Building Self-Sufficiency

Understanding the effects of poverty and how three Greenville nonprofit organizations are accompanying people on the journey to stability

Sally Morris Cote, Ph.D.
Leadership, Knowledge, Impact.

The Riley Institute advances social and economic progress in South Carolina and beyond by creating knowledge through community solutions-focused research, building leadership for a diverse society, hosting expert speakers to broaden perspectives on critical issues, and supporting public education.

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Integrated Services Partners

Founded in 1970 to meet the crisis needs of Greenville County residents, United Ministries (UM) has evolved to focus on developing the potential each family possesses to become self-sufficient—and even to thrive. While short-term needs continue to be met by direct financial aid, homeless day shelter services, and a congregational shelter network for homeless families, the majority of the agency’s resources are invested in people working toward long-term education, employment, housing, and financial wellness goals. In the agency’s Striving to Thrive program, staff partner with individuals to identify personal strengths and goals and to develop and implement action plans to help families thrive.

Foothills Family Resources (FFR) is a 35-year-old nonprofit organization located in Slater, South Carolina. The mission of FFR is to improve the quality of life in Northern Greenville County by providing residents a gateway to comprehensive services, programs, and resources that support, educate, and empower. FFR focuses stabilization services toward individuals experiencing poverty and/or in need. Services include, but are not limited to: SNAP, WIC, Medicaid application assistance, Food Pantry, Rent/Utility Assistance, mental health support, GED training, and vocational rehabilitation counseling. In the Center for Working Families, FFR provides one-on-one, short-term coaching and soft skill development.

The Center for Community Services (CCS) was founded in 1997 and serves as the primary nonprofit in Southern Greenville County that engages the challenges of systemic poverty. CCS unites several area nonprofits under one banner, providing a hub in the Golden Strip where people who face challenging financial circumstances can come for both immediate assistance and long-term help in breaking the cycle of poverty. CCS addresses four core areas that profoundly impact a family’s financial situation: education, employment, financial stability, and school readiness for children. Staff treat each person they encounter with dignity and work to set the stage for client success in improving their own situation.
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IT'S TIME TO RETHINK HOW POVERTY IMPACTS INDIVIDUALS AND WHAT IT REALLY TAKES TO ACHIEVE SELF-SUFFICIENCY.
Executive Summary

Along with much of the southern United States, Greenville County ranks among the hardest areas in which to achieve upward economic mobility. A child raised in the bottom fifth of the income distribution in Greenville County has less than a 5% chance of moving into the top fifth as an adult.\(^1\)

The purpose of this brief is threefold.

1. To explore the nature of poverty’s negative impact on individual functioning and the ways that living in poverty makes it difficult to be upwardly mobile. As traditionally understood, poverty is a lack of material resources—money, food, housing, transportation. However, recent advances in behavioral science have shown that the experience of living in poverty takes a psychological toll, negatively impacting people’s ability to self-regulate and decreasing their self-efficacy, both of which are necessary for achieving and sustaining self-sufficiency.

2. To leverage the knowledge of poverty’s psychological impact to increase understanding of the strategies three Greenville County nonprofit organizations are using to work with those seeking to achieve upward mobility. United as the Integrated Services Alliance, the Center for Community Services (CCS), Foothills Family Resources (FFR), and United Ministries (UM) are using integrated services and coaching to challenge the traditional understanding of how nonprofit organizations can help people work their way out of poverty.

3. To make the case for using both economic and psychological indicators to assess the outcomes of programs that help people work toward self-sufficiency and to offer suggestions for how to do so. A large part of what CCS, FFR, and UM do is build participant psychological self-sufficiency, which cannot be assessed with measures that focus only on indicators such as job placement or increased credit scores.

A final note.

While this brief explores poverty’s impact on the individual, the causes of poverty and stalled economic mobility are structural and systemic in nature. Even if every low-income individual in Greenville County successfully participated in the type of programming provided by CCS, FFR, and UM, many would still find their financial circumstances to be determined more by these external factors than their personal efforts. Until poverty and economic mobility are addressed effectively at a systems level, it will be necessary for nonprofit organizations like those of the Integrated Services Alliance to continue to support and empower individuals as they navigate the complex challenge of achieving and sustaining self-sufficiency.

POVERTY IS A FUNCTION OF SYSTEMS FAILURE TO PROVIDE EQUITY OF OPPORTUNITY AND NOT A FUNCTION OF DEFICIENT CHARACTER, POOR DECISIONS, OR INDIVIDUAL CAPACITY. ONLY CHANGE AT THE SYSTEMS LEVEL WILL DECREASE THE NEED FOR PROGRAMS TO HELP INDIVIDUALS ACHIEVE ECONOMIC MOBILITY AND SELF-SUFFICIENCY.
the Impact of Poverty

Poverty is more than material deprivation. Living with a chronic scarcity of resources takes a psychological toll, negatively impacting people’s ability to self-regulate—to think logically, problem-solve, maintain focus, and control emotions. Moreover, people living in poverty often feel powerless and lack confidence that change is possible, a feeling that can be exacerbated by the very process of seeking assistance to achieve self-sufficiency.

Diminished Self-Regulation

Poverty is a Catch-22—the most crucial planning and decision-making skills individuals need to move out of poverty are those often compromised by the conditions of living in poverty.

Self-regulation is the constellation of skills that enable us to think logically, set goals, problem-solve, maintain focus, and control our emotions. It is essential for navigating and managing the complex challenges of leaving poverty. Unfortunately, people experiencing persistent or even short-term poverty are more prone to failures in self-regulation, which often manifests as lack of impulse control and motivation, inability to pay attention or follow-through on plans, and struggles with time management.

Research over the last two decades has shown this failure is due to the physiological changes that occur in the brains of those living under the stress of chronic scarcity. One set of changes occurs as a result of the body’s biological response to stress. When it perceives stress, the brain activates its “fight or flight” mode, releasing a flood of hormones, increasing heart rate and blood pressure, and overriding its own capacity for the kind of reflective, analytic thought that might impede the body’s ability to react quickly to danger. While an advantage when under threat of immediate physical harm, this response is detrimental when the danger is the ongoing, daily threat of not being able to meet your basic needs.

“IF YOU WANT TO UNDERSTAND THE POOR, IMAGINE YOURSELF WITH YOUR MIND ELSEWHERE. YOU DID NOT SLEEP MUCH THE NIGHT BEFORE. YOU FIND IT HARD TO THINK CLEARLY. SELF-CONTROL FEELS LIKE A CHALLENGE. YOU ARE DISTRACTED AND EASILY PERTURBED. AND THIS HAPPENS EVERY DAY.”

Sendhil Mullainathan and Eldar Shafir, Authors of Scarcity: Why Having Too Little Means So Much

Individuals exposed to frequent or prolonged stress find their ability to engage in the intentional and proactive behaviors needed to achieve self-sufficiency hijacked by their body’s constant engagement of its stress response. Over time, in the chaotic and often unpredictable environment of poverty, the threshold at which the stress response is activated decreases and the likelihood of making impulsive decisions or being unable to control emotions increases. Harvard’s Center on the Developing Child compares our ability to self-regulate to a muscle: “Just as intense physical activity can tire our muscles...[the] unceasing demands [of poverty] can deplete the stores of physiological energy required for self-regulation...”

In addition to the dampening effect of the “fight or flight” response to stress, self-regulation skills also are hampered by the decrease in cognitive capacity, or “bandwidth”, associated with living in poverty. The human brain has a finite amount of bandwidth that can be exercised at any given moment—similar to a computer that has only a certain amount of processing power. The more programs open on a computer, the slower the computer will run when completing even the most basic tasks. Similarly, the ever-present fear and worry of trying to survive with too few resources levies a tax on bandwidth, consuming mental energy and leaving little left over for anything else.

*Attributions for all quotes can be found in Appendix B.
The effects of this bandwidth tax are significant. In a 2013 study, lower-income individuals who were asked simply to think about facing a hypothetical financial problem showed reduced cognitive capacity equivalent to the loss of a full night of sleep or a decrease in average IQ score. Behavioral economist Sendhil Mullainathan and psychologist Eldar Shafir compare the observable effects of decreased bandwidth to the experience of talking, unwittingly, to someone who is only paying half attention to the conversation. They may come across as distracted or not all there, missing important parts of the discussion, and, subsequently, confused by the information they do process. In short, the lack of knowledge, skill, or willpower often attributed to those in poverty has been shown by researchers simply to be the result of consistently depleted bandwidth.

**PEOPLE DO NOT FALL INTO POVERTY BECAUSE THEY LACK SELF-REGULATION SKILLS. POVERTY IS RESPONSIBLE FOR THEIR LACK OF SELF-REGULATORY ABILITY.**

The crucial point here is that people living in poverty do not have an inherent lack of cognitive capacity—they did not fall into poverty because they lacked self-regulation skills. Rather, poverty itself reduces mental energy, depleting the ability to exercise self-regulation. Everybody, regardless of wealth, has experienced temporary lapses in self-regulation when exhausted, stressed, or under intense pressure—snapping at a loved one, buying things they don’t need, or making unhealthy choices. For individuals living in poverty, temporary lapses in self-regulation often become the norm.

**DIMINISHED SELF-EFFICACY**

To achieve and sustain self-sufficiency, individuals need to have a developed sense of self-efficacy, to believe that change is possible and that they have some measure of control over their circumstances. However, the unpredictability of navigating life when regularly experiencing income, housing, and/or food insecurity can cause people to feel like they “are on the receiving end of life, rather than in charge or in control.” This feeling of powerlessness is often confirmed and exacerbated by cues throughout the physical, social, and institutional environments surrounding those in poverty.

Our environment plays a powerful role in shaping how we see ourselves, giving us cues as to who we are, where we belong, and what is possible for our lives. The environments in which impoverished individuals find themselves often send strong, negative cues, imposing a “moral tax” or “poverty stigma” that can undercut self-efficacy.

The cues begin in the physical environment. Low-income neighborhoods are more likely to have abandoned or dilapidated houses and buildings, public facilities that are in need of updating, a noticeable lack of mainstream businesses, and unreliable public services (e.g. trash removal, public transportation). There is a sense that such neighborhoods have been neglected and left behind, and those in them unimportant or unworthy of investment. This feeling is often internalized by residents and used as a lens through which they assess their own self-worth and ability to succeed. Living in an impoverished neighborhood has been shown repeatedly to be associated with higher levels of depression and anxiety and lower levels of self-efficacy.

How others see us—and more importantly, how we think others see us—strongly impacts our self-image. Our social environments are full of cues that can enhance or dampen our likelihood of success by priming us to think positively or negatively about ourselves and placing boundaries on what we perceive as desirable or possible for our lives. People living in poverty are very conscious that those not in poverty often view them as lazy, incapable, irresponsible, and unmotivated. Ignoring these stereotypes takes constant vigilance and effort, taxing cognitive bandwidth and negatively impacting performance and general functioning. It’s a vicious cycle: fear of reinforcing negative stereotypes reduces our ability to succeed, which in turn makes it more difficult to not believe the stereotypes are true.

The expectations others have of us also significantly impact our likelihood of success. When others expect us to do well, they signal their belief by giving us extra encouragement, attention, and support; under these conditions, we will work harder to meet expectations. Conversely, when someone, even unconsciously, does not expect us to do well—as is the case for many professionals who work with adults and children in poverty—we can feel their lack of investment and will find it more difficult to have confidence in our ability to succeed.

**PEOPLE BECOME WHAT THE WORLD SUGGESTS THEY SHOULD AND CAN BE.**

– ELIZABETH BABCOCK, PRESIDENT AND CEO OF EMPATH

The self-efficacy of individuals in poverty often is undercut unintentionally by the very providers who seek to help them. A 2015 research brief summarizing the contributions of behavioral science to anti-poverty programs refers to this phenomenon as the “preposition problem”: Organizations
that serve people in poverty more often than not tend to make decisions for individuals in need rather than with them. The process of getting assistance means navigating an institutional environment characterized by siloed state and nonprofit organizations, each with their own beliefs about what people in poverty need, and each with the power to grant or deny aid based on their assessment of an individual's level of deprivation or deservedness. When a person's well-being depends on the decisions of others, it can be hard to retain a sense of agency and control over what happens in life. This lack of agency is compounded when individuals have to seek assistance from multiple providers—having to repeatedly highlight one's need for help can lead to the development of an identity of dependency.

The impact of negative stereotypes and low expectations also is compounded by the experience of being surrounded by others facing the same struggles. The social networks of people in poverty are often smaller than those of their wealthier peers and limited to friends and family who have equally inadequate resources. With few, if any, examples of others who made it out of poverty, there is often a wide gap between what impoverished people aspire to achieve and what they expect to achieve. A lack of plausible pathways to success can make trying to climb out of poverty seem like a futile endeavor.

Surrounded by institutional, social, and physical environments that cue feelings of unworthiness, inadequacy, and futility, finding the confidence and energy to make a change and the hope that things will get better is simply one more barrier that those in poverty must overcome on their way to self-sufficiency.

**Self-Sufficiency: More than Financial Independence and Stability**

Commonly defined solely in terms of financial independence and stability, self-sufficiency encompasses a psychological component as well as an economic one. Self-sufficient individuals can define their needs, prioritize, set and achieve goals, problem-solve, manage their emotions, and persist in the face of obstacles. They have confidence in their ability to exert control over their situation. Psychological self-sufficiency must be built in tandem with financial self-sufficiency in order for the latter to be achieved and sustained.

Although there is no universally agreed-upon definition, practitioners, scholars, and policy-makers across a variety of fields primarily define self-sufficiency in economic and financial terms: (1) independence from public assistance; (2) being employed and receiving a working wage; (3) being able to independently pay all bills and meet basic family needs; and (4) having a household income above a certain percentage of the poverty line. In Greenville, a common indicator of self-sufficiency is the “Self-Sufficiency Standard” developed by the United Way of South Carolina, a measure of the income a family needs to meet its basic needs without public or private assistance, taking into account family size, composition, and county of residence.

However, as discussed above, poverty is not merely a state of material deprivation; it is also a state of reduced self-regulation and self-efficacy. While helpful for outlining the very concrete resources and supports that those in poverty lack, defining self-sufficiency solely in economic terms misses the toll that being low-income takes on the more abstract, psychological requirements for achieving and sustaining financial stability. A more comprehensive understanding of self-sufficiency incorporates both economic and psychological dimensions.

**POVERTY IS NOT MERELY A STATE OF MATERIAL DEPRIVATION—IT IS ALSO A STATE OF REDUCED SELF-REGULATION AND SELF-EFFICACY. A COMPREHENSIVE DEFINITION OF SELF-SUFFICIENCY INCORPORATES BOTH ECONOMIC AND PSYCHOLOGICAL DIMENSIONS.**

Broadly defined, psychological self-sufficiency encompasses an individual’s degree of self-efficacy, ability to engage in self-regulation, and ability to draw on both of these to set and achieve goals. People who are psychologically self-sufficient have a well-developed sense of self-efficacy, an understanding of themselves as capable of acting upon and shaping their environment. Their ability to self-regulate is robust—even in the face of obstacles, they can organize their thoughts, prioritize, focus their attention, problem-solve, exercise self-control, and manage their emotions.

Together, self-efficacy and self-regulation form the foundation for successful engagement in goal-directed behavior, which itself is essential to rising out of poverty. For
example, individuals who feel more capable and able to make change are more likely to set specific versus vague goals (e.g., “to increase my credit by 100 points” versus “to improve my credit score”) and to identify and implement strategies for achieving success. They also are more likely to put greater effort towards achieving their goals and monitor and adjust their progress along the way.23

Philip Hong, Director of the Center for Research on Self Sufficiency at Loyola University of Chicago, notes that the development of psychological self-sufficiency is “the answer to the question of how one becomes economically self-sufficient”—by practicing the skills, habits, and mindsets of self-regulation, by building self-confidence, persisting in the face of obstacles, and maintaining motivation and hope when encountering setbacks.24 Over the last decade, Hong and his colleagues, as well as other scholars, have shown that the development of psychological self-sufficiency is a necessary precursor to the achievement of long-term economic self-sufficiency.25 Individuals who attain the economic component of self-sufficiency but lack the psychological component are more likely to find themselves cycling through periods of employment and financial stability punctuated by unemployment and instability.26

Until recently, the majority of workforce development and economic stability programs have focused on removing concrete barriers to employment and economic self-sufficiency (e.g., a lack of education or training, lack of childcare or transportation to work, presence of a criminal background, lack of soft skills, etc.). The assumption is that removing these barriers will lead to success in the workforce and increased economic stability. However, since the late 1990s, scholars and practitioners have noticed that: 1) it is much easier for participants served by these programs to get a job than keep a job, and 2) even once barriers have been removed, it is difficult to predict who will succeed.27 Two participants who look the same demographically and have the same barriers may experience dramatically different outcomes in the workplace over time. This suggests that something more intangible is at play in differentiating between people who are able to maintain economic self-sufficiency and those who are not—that “something” is psychological self-sufficiency.

The idea that psychological self-sufficiency must be built in tandem with economic self-sufficiency in order for the latter to be achieved and sustained reflects the findings of researchers who have documented the day-to-day work the staff of nonprofit organizations do with low-income individuals. Accounts show that, in the process of implementing program activities, staff consistently are working to build positive and supportive relationships with participants, encourage their ongoing engagement, strengthen their self-confidence, build their capacity for goal-oriented behavior, and celebrate their achievements.28 This day-to-day empowerment work rarely has been built into program models or measured in program evaluations, despite the key role it plays in participant short- and long-term success.29

In sum, psychological self-sufficiency, and the work it takes to achieve it, is not a result of economic self-sufficiency, but the foundation upon which it is built and maintained. An increasing number of nonprofit organizations, including the three organizations in Greenville’s Integrated Services Alliance, are implementing evidence-based approaches to help increase the psychological and economic self-sufficiency of their participants. Two of these approaches are integrated services and coaching.

An Integrated Approach

Integrated services is a strategy for breaking down organizational silos and easing an individual’s ability to access multiple services at once. Making it easier for people to apply for, travel to, participate in, and coordinate multiple services can help save time and money and reduce the need for individuals to exercise self-regulation skills already strained by limited incomes. Introduced to the concept by the United Way of Greenville County, over the last five years, the Center for Community Services, Foothills Family Resources, and United Ministries have honed their respective approaches to implementing integrated services to increase the likelihood of participant success.

People in need of social services often face a siloed sector, with little coordination among the organizations and programs who serve those seeking self-sufficiency. With each organization or program having its own service delivery processes, qualification criteria, and bureaucracy, individuals facing barriers to stability confront the additional obstacle of having to navigate and organize services from multiple complex systems.
Integrated services is a strategy for breaking down organizational silos and simplifying access to “a wide range of benefits and services that bridge traditional program domains.” With the approach having been in circulation since the 1980s, the number of ways to integrate services are as numerous as the organizations and systems that have implemented it. Integration strategies span from co-location of services with navigators to help streamline access, to the use of shared client data systems and the consolidation of staff, funding, and administrative work of various agencies.

In a report for the Annie E. Casey Foundation, Mark Ragan, a scholar of human service systems, distinguishes between administrative and operational integration strategies. Administrative strategies are “behind-the-scenes changes” that improve client services, such as shared client data systems, increased numbers and types of providers, and blended funding streams. Operational strategies, on the other hand, are changes that are more noticeable to the outside observer, such as staff or office co-location and common intake, assessment, and care management processes. A fully integrated system is integrated both administratively and operationally, although such a system is not necessary for engaging in integrated service provision.

In recent years, a distinction between organization- and participant-driven models of integration also has emerged. Organization-driven models integrate a standardized set of services, leaving little or no room for individuals to opt out of services they do not need, for example, a program with a set curriculum that everyone has to follow, regardless of their knowledge or skill base upon entry. In contrast, a participant-driven model of integrated services allows individuals to receive a customized set of services across multiple program areas based on their unique needs.

Overall, the best determination of whether services are integrated is to look at the problem from the perspective of someone in need. If it difficult to access multiple services and benefits due to the need to interact with many offices and caseworkers who are not coordinated, the system is not integrated.

In general, the practice of integrating services has become a widespread, accepted strategy for organizations and agencies seeking to make it easier for those they serve to achieve self-sufficiency.

**HOW DOES INTEGRATING SERVICES IMPACT INDIVIDUALS SEEKING SELF-SUFFICIENCY?**

Integrating services can reduce the logistical challenges of accessing assistance. Particularly in Greenville County—where transportation is an often-cited barrier faced by those without a car—locating services close together can reduce the amount of time and money people otherwise might spend traveling between multiple organizations. Moreover, providers who share information through a common intake system or a data-sharing agreement where common information is pre-populated, can save people time in having to fill out multiple, repetitive forms.

Integrating services also can help people conserve their cognitive bandwidth. Making it easier for people to apply for, travel to, participate in, and coordinate multiple services reduces the need for individuals to exercise self-regulation skills already strained by their limited income. Mental energy that would be spent juggling appointments with multiple agencies or remembering to complete paperwork from multiple programs instead can be spent on making progress towards long-term goals. By integrating services, providers are “scarcity-proofing” the social support system, making it harder for people to fall prey to the psychological effects of low-income while seeking aid on their journey towards self-sufficiency.

On the whole, evaluations of integrated services programs generally indicate that people who take advantage of a combination of targeted services make greater progress towards self-sufficiency than those who utilize only one service. Potential outcomes include improved financial stability, increased housing stability, more positive and trusting relationships with caseworkers, and improved case management processes. However, the extent of impact generally depends on the length of engagement with services and the starting point of the individual receiving assistance.

The longer individuals engage with an organization providing integrated services, the greater the impact of services on outcomes. Increased impact of longer engagement likely is due to the fact that longer-term, more substantial outcomes take time and ongoing support. For example, an individual may need to secure employment before they can work with a financial counselor on a savings plan; similarly, reducing debt may be necessary before work can begin on improving credit. Almost all studies showing positive impact of integrated services recommended providers commit to working with participants for at least a year, if not much longer.

The starting point of the individual receiving assistance also matters significantly on the impact of programming. Participants who begin further along the path to self-sufficiency (e.g. having a recent work history, a bank account, a good credit score, etc.) have a higher likelihood of reaching common measures of self-sufficiency within a year.
or two years than individuals who are farther removed from the economic mainstream.  

**INTEGRATED SERVICES IN GREENVILLE COUNTY**

Since early 2019, the Center for Community Services, Foothills Family Resources, and United Ministries have been working together as the Integrated Services Alliance to learn more about integrated service delivery in support of self-sufficiency work:

- **The Center for Community Services (CCS)** has served southern Greenville and northern Laurens Counties from its location in Simpsonville since 1997. A multi-service community center, CCS offers families emergency services, GED and ESL classes; on-site child-care; a free medical clinic; and resume and job search assistance to support those seeking self-sufficiency.

- **Foothills Family Resources (FFR)** was founded in 1986 as a central location of support services for residents of rural, northern Greenville County. In addition to partnering with and providing office space to multiple service providers and government programs (e.g. DSS, WIC, Greenville County School District Lifelong Learning, etc.), FFR offers employment readiness coaching to under- and unemployed individuals through its Center for Working Families program.

- **United Ministries (UM)** was founded in 1970 by local church congregations to meet the crisis needs of people living in poverty. Today, United Ministries offers a continuum of crisis, education, housing, and employment programs and services to meet both immediate needs and support economic mobility by partnering with individuals in their development of long-term financial and psychological self-sufficiency.

These three organizations first became introduced to the concept of integrated service delivery in 2012 by the United Way of Greenville County (UWGC). CCS, FFR, and UM accompanied UWGC and other partner organizations on site visits to the Annie E. Casey Foundation’s Center for Working Families in Atlanta, Georgia. While there, they observed the bundling of workforce development, financial services, and public benefit and support services to reduce the logistical challenges individuals seeking self-sufficiency often face.

UWGC was interested in integrated services for its potential to enhance financial stability initiatives in Greenville County. Following the Annie E. Casey site visit, UWGC invested in creating and piloting an integrated services site at Goodwill Job Connection in Simpsonville, bringing together Goodwill Industries of the Upstate/Midlands of South Carolina, the Benefit Bank of South Carolina, and the Greenville County Human Relations Commission. This pilot project emphasized a central intake system for all three partners, logical sequencing of and smooth connection between partner services, and case management to support participant utilization of services on their path towards employment and financial stability.

To spread an integrated services strategy county-wide, UWGC also encouraged CCS, FFR, and UM, to adopt a Center for Working Families (CWF) model into their existing work. In addition to sponsoring two formal trainings—one in financial coaching and one in the overall integrated services approach—UWGC regularly convened the three organizations to compare notes and discuss challenges of implementation. The differences between CCS, FFR, and UM in their programming, geographic locations, and populations served were acknowledged by UWGC as one of the main strengths of its county-wide focus in a memo justifying the need to train these agencies in integrated services: “Whether it is serving the inner city, suburban or rural parts of the county or working with minorities, homeless, undereducated, unemployed or the underemployed, there is a program in Greenville County that can help our neighbors move from crisis to self-sufficiency.”

Over the last five years, CCS, FFR, and UM honed their respective approaches to integrated services, recognizing that it likely would take years of refining and adapting programming to achieve desired outcomes. CCS began requiring individuals who regularly used their food and utility assistance to meet with their coaching staff to identify the root cause(s) of need and begin transitioning from a direct aid to more coaching-based model. FFR launched their version of the CWF model to offer employment readiness coaching to all individuals who came to the agency with a food, utility, or rent emergency or needed assistance with SNAP or Medicaid applications. Among other changes, UM incorporated financial counseling and mental health counseling into its Employment Readiness program (now called Striving to Thrive) and implemented protocol to ensure that all individuals who came for emergency assistance (e.g. food, rent assistance, etc.) were invited to learn about and participate in other programs such as Employment Readiness and Adult Education.

In addition to redesigning program flows and ensuring connections between offered services, CCS, FFR, and UM also shifted from a case management approach to one of coaching, a relational method of working with individuals that is defined by its collaborative, non-directive nature and
its focus on mindset change, behavior change, and skill building. While not a necessary component of a general integrated services strategy, coaching is a key part of the CWF model and increasingly has been recognized as best practice for organizations working to move low-income individuals from crisis to stability.

With the support of the Graham Foundation, the Riley Institute at Furman University began convening integrated services providers again in 2019. Through these convenings, CCS, FFR, and UM reengaged in conversations to reflect on the current state of integrated services at their respective agencies, share lessons learned, delve into the most recent research on self-sufficiency, and define common measures of progress. United under the banner of the Integrated Services Alliance, these organizations committed to the principles of integrated services grounded in a relational approach to working alongside those in need.

A Relational Approach

A large and growing body of evidence is showing that to maximize effectiveness, programs that help participants work towards self-sufficiency should center their services within the context of a trusting, supportive, and collaborative coaching relationship between the provider and participant. Coaches create opportunities for participants to repeatedly practice the skills, habits, and mindsets of self-regulation and self-efficacy, while providing consistent encouragement and support.

One of the primary ways that human beings learn is through interaction with others. As children, we learn to self-regulate by watching our caregivers closely, observing how they react to various situations. As adults, we can build self-regulation skills and self-efficacy through regular, sustained interaction with others who model these skills, provide accountability, support, and encouragement, and reflect back to us positive beliefs about our capabilities.

In light of the negative impact poverty has on self-regulation and self-efficacy, a large and growing body of evidence shows that providing education or training, supplying direct aid (e.g. food assistance), making referrals to other community resources, and/or offering financial incentives (e.g. matched savings programs) is not enough to lift most people from poverty to long-term self-sufficiency. To be most effective, organizations must center the above services within the context of a trusting, positive, and collaborative relationship with another adult who can create opportunities for the participant to repeatedly practice the skills, habits, and mindsets of self-regulation and self-efficacy while taking advantage of offered services. This involves a shift from providing services “for the poor to [providing] services with them.”

Working in collaboration with those in need allows organizations to avoid making assumptions about how people should respond to a program or intervention and instead provide services based on how people actually do respond. Programs are often based on the belief that people are rational actors—for example, that if someone had greater financial literacy, they would make better financial decisions. For those not in poverty, knowledge and awareness do not always guarantee action, and both monetary and non-monetary factors drive decisions. But for those in poverty, the very experience of living in scarcity impairs one’s cognitive ability to engage in reflective, logical thought.

Within the context of self-sufficiency work, a relational approach acknowledges the struggle of participants to self-regulate and allows room for participants to make halting progress, taking one or two steps backward for every one step forward. Rather than being an unacknowledged byproduct of service delivery, relationships that provide
participants with structure and steadfast encouragement are seen as a key feature of program design.

RATHER THAN BEING AN UNACKNOWLEDGED BYPRODUCT OF SERVICE DELIVERY, RELATIONSHIPS THAT PROVIDE PARTICIPANTS WITH STRUCTURE AND UNFLAGGING ENCOURAGEMENT SHOULD BE A KEY DESIGN FEATURE OF PROGRAMS THAT MOVE PEOPLE TOWARDS SELF-SUFFICIENCY.

Organizations that take a relational approach to their work utilize a range of methods for cultivating and sustaining connection with participants, including coaching, case management, mentoring, counseling, and home visiting. While the three organizations in the Integrated Services Alliance all do some case management, they utilize a coaching framework as the primary vehicle for connecting with and challenging participants to build self-sufficiency.

COACHING FOR SELF-SUFFICIENCY

Coaching is a type of relational work that is defined by its collaborative, non-directive nature and its focus on mindset change, behavior change, and skill building. When used within the realm of self-sufficiency work, coaching takes the form of:

1. an ongoing, trusting, collaborative relationship, in which
2. the participant is treated as the expert in defining their needs and priorities, and
3. the role of the coach is to build the participant’s self-efficacy while
4. supporting the participant in setting goals and practicing new behaviors and skills.

AN ONGOING, TRUSTING, COLLABORATIVE RELATIONSHIP

Coaching is not a specific intervention with a defined endpoint. Rather, it is an ongoing, collaborative relationship that evolves over time as the needs of the participant evolve. Ideally, a coach will “scaffold” their assistance, with the amount of support provided meeting each participant’s unique level of need. Over time, the coach slowly removes the scaffolds or supports as participant needs lessen. The relationship ends only when the participant feels they no longer require the support of the staff member to continue making progress towards or maintaining stability.

In addition, unlike in many case management, counseling, or mentoring relationships, the coaching relationship is collaborative, “based on an idea of teamwork, as opposed to a power dynamic where the participant is below the...[coach].” The coach should see the participant as an equal and seek to partner with and support the participant in recognizing the power within themselves to set and achieve goals.

Setting a tone of equality between the coach and participant can begin before a participant even walks in the door with how an organization chooses to describe its work and what it chooses to call its coaches. For example, United Ministries (UM) advertises its services by saying it offers “programs that serve and empower” individuals striving to achieve self-sufficiency. Moreover, UM staff members who coach are called “Economic Mobility Partners,” not case managers or counselors.

AS UNITED MINISTRIES EVOLVED OVER TIME TO SUPPORT TRANSFORMATIVE CHANGE, THE DRIVING QUESTION BEHIND OUR WORK SHIFTED FROM ‘WHAT ARE WE PROVIDING FOR PEOPLE?’ TO BECOME ‘HOW ARE WE WORKING ALONGSIDE PEOPLE?’

– ETHAN FRIDDLE, DIRECTOR OF PROGRAMS AND OPERATIONS AT UNITED MINISTRIES

Once a participant is in the door, establishing a sense of trust and mutual respect is key to the success of the coach in building a teamwork dynamic. At Foothills Family Resources (FFR), volunteer coaches in their Center for Working Families spend a lot of time listening to participants tell their stories. Marilyn Neves, FFR’s Executive Director, describes many of their participants as having “no one in their lives who they feel comfortable talking with about their situation. Building trust early in the relationship allows them to be able to open up about things that are stumbling blocks to their success and allows for formation of a ‘team’ between the coach and participant.”

THE PARTICIPANT IS THE EXPERT

Perhaps the most foundational component to coaching for self-sufficiency is seeing and treating the participant as the expert on their situation with the most knowledge of their needs, priorities, goals. In this approach, the purpose of the coach is not to give advice. Rather, the coach takes the role of the facilitator, asking open-ended questions and reflecting
back what they hear to help the participant define and set goals and identify various pathways to goal achievement. In doing so, the coach aims to strike a balance between being a useful resource for participants—for example, sharing important information about job openings or educational opportunities—while not betraying their opinions on which direction the participant should take. At all times, the coach fosters the participant’s belief that they know what is best for themselves and should look to the coach only for support in weighing the advantages and disadvantage of their options.

**CASE MANAGERS DRIVE THE DECISIONS HAPPENING WITH THE APPROVAL OF THE PARTICIPANT. OUR COACHES, ON THE OTHER HAND, GIVE THE PARTICIPANT THE POWER TO DIRECT THEIR OWN PATH.**

– ANDREW ROSS, EXECUTIVE DIRECTOR OF THE CENTER FOR COMMUNITY SERVICES

At the Center for Community Services (CCS), the coaching staff—known as Family Stability Advocates—work with participants to improve their employment opportunities. Their staff ask participants open-ended questions such as, “What job or jobs do you feel qualified for?”; “How will that job make you feel?”; and “What value will it bring to your life and family?” These questions allow for a conversation to begin during which the participant becomes the teacher, instructing the coaches on their personal values, needs, and worldview. The coaches listen reflectively to learn how to tailor their support to each participant’s situation, with coaching sessions stopping only when the participant feels they are ready and/or have reached stability.

**BUILD SELF-EFFICACY**

For many service providers, believing that the participant is the expert and fully capable of making wise choices about the future may involve adopting a new mindset about participant ability. Working day after day with individuals in poverty, and knowing the obstacles they face to achieving self-sufficiency, can make it difficult for providers to truly believe that all participants can achieve stability. According to Elisabeth Babcock, President and CEO of EMPath, her coaching staff “know the facts, and when the factual odds are stacked three-to-one against participants, one could argue that they [staff] would have to be less than fully rational to expect participant success.”

However, a coach’s ability to believe in a participant’s potential for change, growth, and success is vitally important. Coaches consistently provide positive messages to the participant about their strengths and skills, setting high expectations and combating the negative stereotypes individuals with low-income often encounter in their day-to-day lives. By unfailingly reflecting back a participant’s positive attributes and providing regular validation, the coach can help the participant begin to build confidence and “see yourself as I see you.”

One concrete way FFR staff coach participants to see themselves positively is by offering services that allow participants to make their outward appearance match their growing confidence. FFR maintains a closet of gently used professional clothes from which participants can select two full outfits, including shoes. The clothing closet is set up to look like a boutique, with a fitting area, and clothes hung neatly on racks, sorted by size and style. In addition, FFR maintains an on-site hair salon and engages a cosmetologist to come once a month to provide haircuts.

**MANY OF THE PEOPLE WE SERVE COME IN WITH REALLY TOUGH STORIES AND ARE CONVINCED THEY ARE DOOMED TO THE SAME WAY OF LIFE THEY’VE GROWN UP WITH. WE WORK HARD TO CREATE A SPACE WHERE PEOPLE DO NOT FEEL JUDGED. JUST ONE WORD OF ENCOURAGEMENT MAKES OUR PARTICIPANTS FEEL MORE PRIDE AND DETERMINATION, A FEELING THAT IS OFTEN NEW FOR THEM.**

– MARILYN NEVES, EXECUTIVE DIRECTOR OF FOOTHILLS FAMILY RESOURCES

In addition to reflecting positive images of participants back to them, coaches should challenge participants to expand the horizon of what they believe is possible for their lives, closing the gap between what someone may aspire to achieve in comparison to what they expect to achieve.
UM uses a “brag board” to display pictures of participants who have reached long-term goals—there are images of participants standing in front of their newly purchased cars, holding a set of keys to their new home, or posing with their GED or training certificate. In publicly displaying these photos, UM provides participants with real examples of their peers who have accomplished short- and long-term goals, showing participants that success is possible.

**SUPPORT GOAL-SETTING AND PRACTICE OF HABITS AND SKILLS**

The primary objective of coaching for self-sufficiency is to provide the structure and opportunities through which participants can master the self-regulation skills necessary to achieve and maintain stability.

Creating opportunities for participants to repeatedly practice new skills and mindsets is key to addressing the cognitive deficits to self-regulation and self-efficacy caused by chronic scarcity. Just as practicing a sport or playing an instrument creates muscle memory through the development and strengthening of neural pathways in the brain, repeatedly engaging in self-regulatory behaviors with the support of a coach can help such behaviors become internalized and easier to engage in the future.

One of the principal ways coaches create opportunities is by helping participants set and reach small goals that collectively add up to longer-term achievements such as gainful employment, increased credit, or educational credentials. While individuals working towards self-sufficiency likely will have goals that fall in similar areas (e.g. financial wellness, secure housing, stable employment), the goal itself does not matter as much as the participant’s ability to identify and meet the goal. In this sense, the role of the coach is not to solve participant problems or manage service delivery and connection to resources. Rather, the coach provides the structure and support for participants to develop and implement their own solutions, gaining confidence in their ability to succeed.

At CCS and UM, coaching staff utilize adapted versions of EMPath’s Bridge to Self-Sufficiency to help participants assess their own strengths and areas in their lives that need improvement. The Bridge is a diagram that allows participants to see the multiple areas in life that contribute to self-sufficiency (e.g., career, family stability, health, education) and set personalized goals to help them advance towards success in each. Using the Bridge to chart a path to self-sufficiency is often the first time that participants see their goals mapped out in a series of logical steps. The structure and clarity that a diagram like the Bridge lends to the process of goal-setting is invaluable.

Coaches also provide structure through simple accountability. The impairments to cognitive function and everyday crises that accompany living in poverty can make it difficult to maintain a focus on goals. A lack of self-regulation can look like someone knowing what they need to do but lacking the impulse control, time management skills, or motivation to consistently act on that knowledge. By engaging in regular and predictable follow-up with participants, coaches help participants look past the present moment to the longer-term outcomes they seek.

In its Center for Working Families, FFR focuses particular attention on time management. In a 2017 informal survey of over 20 leaders of local industries where participants often sought employment, FFR found that the majority of survey respondents reported absenteeism and tardiness as the largest contributor to low retention rates of new employees. To combat this issue, FFR built specific accountability mechanisms into its weekly coaching sessions to help participants practice time management skills. For example, participants are expected to show up 10 minutes early to all coaching sessions and complete a weekly phone check-in. If they arrive late or do not complete the weekly check-in, the coach meets with the participant to help them identify what happened and set a plan in place to prevent it from happening again.

While coaching is vitally important to the work of CCS, FFR, and UM, demonstrating the participant outcomes of coaching for self-sufficiency can be difficult. Traditional measures of self-sufficiency that focus on economic and employment indicators cannot capture the changes in client

> “COACHING IS EFFECTIVE BECAUSE IT ALLOWS FOR REPEATED PRACTICE OF SELF-REGULATION SKILLS, REPEATED REINFORCEMENT OF POSITIVE IDENTITIES, AND REGULAR PRACTICE OF SELF-DETERMINATION.”

– NICKI RUIZ DE LUZURIAGA, VICE PRESIDENT OF INSTITUTIONAL ADVANCEMENT AT EMPATH
empowerment and self-regulatory ability that occur over time. The final section of this brief speaks to: (1) the challenge faced by nonprofit organizations that engage in relational work like coaching but often are held accountable for outcomes that do not directly flow from coaching efforts, and (2) ways to measure the increases in psychological self-sufficiency that result from coaching.

**Measuring Self-Sufficiency**

Traditional measures of self-sufficiency that focus solely on economic and employment indicators do not capture the deep relational work organizations do to empower participants and build their capacity for self-regulation. Measures that show progress towards self-sufficiency and assess increases in psychological self-sufficiency more clearly reflect the nature and intended results of the programs run by the Integrated Services Alliance.

Given the dominant understanding of self-sufficiency as an economic concept, the majority of organizations and funders measure it solely using economic and employment indicators, often ones that are point-in-time snapshots over a six- or twelve-month period—e.g., number of jobs obtained, average starting wage, number of people with a credit score of 650 or higher, or average amount saved by participants.

However, measuring self-sufficiency solely from an economic and employment standpoint is problematic in two major ways for organizations and programs that work to help individuals leave poverty. First, moving from a state of economic crisis to self-sufficiency can take a long time, and progress often is halting. Individuals requiring assistance from self-sufficiency programs may start without a credit score or with a low credit score, no savings, and, in many cases, no job. Expecting individuals starting from this situation to reach many of the common indicators of economic self-sufficiency within the typical six- to twelve-month reporting cycles for nonprofit organizations is unrealistic.

Moreover, point-in-time indicators such as number of people who got a job or transitioned off of public benefit support do not reflect the reality that the path from poverty to self-sufficiency is often non-linear. An organization that reports 50 participants obtained job placements within six months of program start may look like they are having great success at helping people attain self-sufficiency—however, a look at those same individuals 18 months later may show that only half are still employed. Organizations that are nationally recognized as successful in helping low-income individuals achieve lasting economic security—e.g., LIFT, Roca, and EMPath—plan for the achievement of self-sufficiency to take from two to five years or longer. In addition, these organizations track individual progress over time rather than aggregate point-in-time indicators.

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*WE NEED TO “RETHINK HOW WE DEFINE MOBILITY FROM POVERTY. ALTHOUGH MEASURES OF ECONOMIC SUCCESS SUCH AS INCOME AND ASSETS ARE FOUNDATIONAL TO UPWARD MOBILITY, THEY DO NOT FULLY CAPTURE PEOPLE’S EXPERIENCES.”*

– US PARTNERSHIP ON MOBILITY FROM POVERTY

The second reason measuring self-sufficiency through an economic lens only is problematic is that common measures of economic self-sufficiency often are affected significantly by forces outside of an organization’s direct control. In focusing solely on these indicators, programs are measuring their success against outcomes over which they have relatively little direct influence. The causes of poverty for many people are structural in nature—examples include economic recession, fluctuations in supply and demand for low-to-middle income labor, or a mismatch in the skills one has and the demand for those skills within commuting distance. Variance across states and localities in labor laws, minimum wage thresholds, and tax policies also affect the job market and the likelihood that individuals in poverty can find work that will help them climb the economic ladder.

Organizations like the Center for Community Services (CCS), Foothills Family Resources (FFR), and United Ministries (UM) focus their interventions on *individuals*, not the labor market or the government agencies that set laws. These organizations engage in deep relational work to empower individuals, build their self-regulation skills, increase their financial literacy, increase knowledge of the job application and interview process, and support their pursuit of self-identified goals. Economic and employment indicators
cannot capture the outcomes of this relational work, such as increased self-efficacy, greater self-regulation, or increased motivation and hope for a better life. In short, much of what organizations like CCS, FFR, and UM do is build psychological self-sufficiency and increase job readiness, neither of which can be assessed through measures that focus on job placement or increased credit scores.

Over the last 10 to 15 years, more research is affirming this gap between the core of what frontline staff do and the forward progress they see their participants making in comparison to the economic and employment benchmarks to which their programs are held accountable. CCS, FFR, and UM have witnessed this gap and have begun to articulate outcomes that more clearly reflect the nature and intended results of their programs. Each organization is exploring how to assess participant progress towards economic self-sufficiency as a direct result of their services and how to measure increases in psychological self-sufficiency.

THE IMPORTANCE OF MEASURING PROGRESS IN ADDITION TO COMPLETION

As discussed above, achieving self-sufficiency is often a multi-year process, and organizational tracking and reporting should reflect this reality. Rather than reporting aggregate, summary numbers of how many individuals got a job or how many eliminated debt, organizations that invest in long-term self-sufficiency work should engage in long-term tracking of individuals over time, measuring progress “based on where people start and how far they travel, not just where they end up.”

In other words, a participant who begins a program with no recent employment history and no income from earned wages should be considered successful if within six-months to a year they have a part-time, minimum wage job. A participant who is deeply in debt at program start should be considered successful if they have reduced their debt by 75% after a year or two years, even if they still have a low credit score. Neither of these participants meet traditional criteria for economic self-sufficiency, but they are on the right path to getting there over time.

The importance of measuring and considering forward progress as an indicator of success cannot be overstated. Organizations and funders that look exclusively at whether participants achieve traditional markers of economic self-sufficiency lose the opportunity to learn valuable information about the actual path participants walk on their journey to economic stability—information that could inform future program design and services to maximize impact.

Additionally, focusing only on the longer-term achievement of economic self-sufficiency may negatively impact staff motivation and participant success, particularly when participants start very far away from the end goal. For some individuals, full economic self-sufficiency as defined, for example, by complete independence from public assistance, may never be a realistic goal; however, their journey to living a more economically stable life, even with public assistance, still should be celebrated. Not acknowledging that progress may feed a participant’s sense of futility in the effort and a staff member’s belief that some participants face too many obstacles to achieve any measure of success.

Nonprofit organizations that center relational work in the design of their self-sufficiency programs can more reliably assess progress towards economic self-sufficiency by measuring growth in psychological self-sufficiency. The next section offers examples of ways to measure psychological self-sufficiency.

MEASURING PSYCHOLOGICAL SELF-SUFFICIENCY

As described earlier, psychological self-sufficiency encompasses an individual’s degree of self-efficacy, ability to engage in self-regulation, and ability to set and achieve goals, even in the face of obstacles. While more complex to measure than income or employment, these concepts can be quantified, and social scientists and practitioners have developed multiples valid ways to do so within the context of programs that help individuals work towards self-sufficiency. The following section contains examples of ways to measure each of these concepts using standardized survey questions. These measures can be used at program entry, throughout program participation, and at program exit to assess growth in psychological self-sufficiency over time. Most of these measures were designed to be self-reported, meaning the program participant assesses themselves rather than program staff. In addition, unless otherwise noted, all of the measures listed in this section are free for use and can be administered in either a paper or electronic format. More qualitative approaches, such as individual interviews and observation, also have been used by organizations to supplement and provide context to the
The ability to achieve most of the goals that I have set for myself.

I will be able to successfully overcome many challenges; “I will succeed at most any endeavor to which I set my mind”; “I will be able to achieve most of the goals that I have set for myself.”

Participants rate how much they agree with each of eight statements. Sample statements include: “I believe I can succeed at most any endeavor to which I set my mind”; “I will be able to successfully overcome many challenges”; “I will be able to achieve most of the goals that I have set for myself.”

The New General Self-Efficacy Scale is an eight-item scale that assesses the degree to which participants feel confident in their ability to succeed and overcome challenges, accomplish difficult tasks, and achieve their goals. Participants rate how much they agree with each of eight statements. Sample statements include: “I believe I can succeed at most any endeavor to which I set my mind”; “I will be able to successfully overcome many challenges”; “I will be able to achieve most of the goals that I have set for myself.”

The Cantril Self-Anchoring Striving Scale requests individuals to imagine a ladder with steps numbered from zero at the bottom to ten at the top. The top rung of the ladder represents the best possible life for an individual, and the bottom rung represents the worst possible life. Participants are asked on which step of the ladder they feel they stand at the moment of asking and on which step they feel they will stand five years later. This scale has been used extensively by social scientists across the world to measure subjective sense of well-being and currently is used by EMPPath to gather information about participants at program entry and exit.

The Employment Hope Scale was developed by Philip Hong, Director of the Center for Research on Self Sufficiency at Loyola University of Chicago. Program participants select their level of agreement with a series of 14 statements that cover six dimensions of psychological empowerment and goal orientation (self-worth; self-perceived capability; future outlook; self-motivation; utilization of skills and resources; and goal orientation). Sample statements include: “I am capable of working in a good job”; “I have the strength to overcome any obstacles when it comes to working”; and “I am able to utilize my skills to move towards career goals.”

The Sense of Control Scale is an 12-item scale that measures how much control people feel they have over their outcomes and the extent they feel there are barriers to success that are beyond their control. Participants rate how much they agree with each of the 12 statements. Sample statements include: “Whether or not I am able to get what I want is in my own hands”; and “I sometimes feel I am being pushed around in my life.”

SELF-EFFICACY

As used here and represented by the below measures, self-efficacy broadly encompasses people’s self-reported well-being, the degree of hope they have for the future, and how much they feel they are in control of their lives.

SELF-REGULATION

Self-regulation is an umbrella term that covers a range of cognitive skills, emotional skills, and personality-related factors that together allow us to control our thoughts, emotions, and behavior. As with self-efficacy, there are multiple ways to assess increases in self-regulatory ability. The following two assessments are well-recognized by scholars and practitioners alike as valid measures of self-regulation.

The Behavior Rating Inventory of Executive Function—Adult Version (BRIEF-A) is a 75-item assessment of nine cognitive and emotional skills such as maintaining working memory, initiating tasks, and overcoming barriers. Participants indicate how often a series of everyday scenarios applies to them (e.g. “never,” “sometimes,” “often”). The BRIEF-A is a licensed tool and costs $100 or more per individual use.

The Difficulties in Emotion Regulation Scale (DERS) assesses an individual’s awareness and understanding of their emotions, as well as their ability to change the intensity of the emotions they feel at any given moment and refrain from negative behaviors that may flow from those emotions. Across 36 statements (or 18 statements in the shortened version), participants indicate how often each statement is true for them. Sample statements include: “I pay attention to how I feel”; “When I am upset, I have difficulty getting work done”; and “When I’m upset, I have difficulty controlling my behaviors.” Roca, a highly successful nonprofit organization that runs the largest Pay for Success project in the United States, uses the DERS to measure the effects of their cognitive behavioral therapy program on participants.

GOAL ATTAINMENT

The ability to set and achieve long-term goals is a direct function of self-regulatory ability and is central to the process of reaching self-sufficiency. Individuals living in poverty often find it difficult to focus attention on goals that are not related to meeting their immediate needs. Everyday crises such as choosing between paying for gas to get to work or paying rent distract from making steps towards long-term objectives. Given that setting and meeting a goal, even a small one, requires many of the self-regulatory skills compromised by the experience of poverty, an individual’s ability to achieve small goals is a valid indicator of the development of self-regulation. Moreover, evidence suggests that breaking down larger, long-term goals into smaller, short-term goals can help individuals make significant progress toward goal achievement. Smaller, shorter-term goals are achieved more quickly, which can increase self-efficacy and motivation.
Tracking goal attainment can be as simple as having participants write down the series of steps needed to meet a long-term goal and checking off each step as it is completed. Some organizations use comprehensive frameworks for sorting goals into various domains of self-sufficiency and breaking down various levels of achievement—see, for example, EMPath’s Bridge to Self-Sufficiency®, which has been adapted for use by both CCS and UM.75

**Goal Attainment Scaling (GAS)** is a popular tracking method that uses a standardized template for documenting and scoring participant progress towards individual goals. With GAS, participants work with a coach to set SMART goals (specific, measurable, achievable, realistic/relevant, and timed). The coach then helps the participant describe what various levels of goal achievement would look like, ranging from -2 (no progress made towards goal) to +2 (achieved more than set goal). The template allows for the comparison of progress across participants with different goals and for aggregate reporting.

Whatever method is used, the key to tracking goal attainment is framing the participant’s ability to set and achieve small goals as the measure of success rather than the accomplishment of longer-term indicators of self-sufficiency.

The measurement of concepts like those listed here is an evolving science, and the above assessments are just sample what currently exists. As more organizations begin measuring the impacts of their work on psychological self-sufficiency, existing assessments will be refined and new ones created to accurately capture the experience of developing self-sufficiency.

### Conclusion

The path from poverty to self-sufficiency is difficult, and the work of accompanying people on the journey is complex. The skills and mindsets needed to move out of poverty are the same ones compromised by living within poverty. Moreover, having less than you need to survive can be a deeply dehumanizing experience, one that often is only worsened by the process of seeking assistance from an oftentimes siloed human service system designed to deliver assistance to people rather than in collaboration with people.

While there is no one-size-fits-all solution, evidence is mounting that providing integrated services within the context of a trusting, supportive, and collaborative coaching relationship can be transformative. Incorporating integrated service strategies into self-sufficiency work can reduce the logistical burden of accessing services across multiple areas of need and lessen the necessity for individuals to exercise self-regulation skills already taxed by living in poverty.

Relationships between coaching staff and participants create scaffolding upon which participants can practice self-regulation and reclaim their sense of purpose and control.

The Center for Community Services (CCS), Foothills Family Resources (FFR), and United Ministries (UM) are using integrated services and coaching to walk alongside and empower people on the journey to self-sufficiency. Drawing on their knowledge of poverty’s psychological impact, they are redefining what it looks like to assist those seeking upward mobility in Greenville County. They also are redefining what it looks like to measure the results of this work and showcase the progressive acquisition of skills and confidence that lays the foundation for long-term self-sufficiency.

Through their efforts, CCS, FFR, and UM have become part of a movement of innovative organizations around the country working to change the narratives surrounding poverty, mobility, and the American Dream—the latter of which for too many people is just that, a dream. While the work is not easy, it is profoundly important and necessary for creating a future where everyone in Greenville County has the chance to thrive.
Glossary

COACHING
A type of relational work that is defined by its collaborative, non-directive nature and its focus on mindset change, behavior change, and skill building. See page 8.

ECONOMIC SELF-SUFFICIENCY
A term that has been defined variously as: (1) independence from public assistance; (2) being employed and receiving a working wage; (3) being able to independently pay all bills and meet basic family needs; and (4) having a household income above a certain percentage of the poverty line. The most common understanding of self-sufficiency. See page 3.

INTEGRATED SERVICES
A service approach to breaking down organizational silos and easing an individual’s ability to access multiple services at once. Integration strategies span from co-location of services with navigators to help streamline access, to the use of shared client data systems and the consolidation of staff, funding, and administrative work of various agencies. See page 4.

PSYCHOLOGICAL SELF-SUFFICIENCY
An umbrella term referring to an individual’s degree of self-efficacy, ability to engage in self-regulation, and ability to draw on both of these to set and achieve goals that can lead to the attainment and maintenance of economic self-sufficiency. See page 3.

RELATIONAL APPROACH
An approach to providing services within that centers the service provision within the context of a trusting, positive, and collaborative relationship with another adult who can create opportunities for the participant to repeatedly practice skills, habits, and mindsets. See page 7.

SELF-EFFICACY
The belief people have in their ability to act on and shape their environment, to succeed in a given situation. See page 2.

SELF-REGULATION
The constellation of cognitive skills, emotional skills, and personality-related factors that enable us to think logically, set goals, problem-solve, maintain focus, and control our emotions. See page 1.

SMART
An acronym, Specific, Measurable, Attainable, Realistic, and Time-bound. Describes a way of articulating goals that increases the likelihood of goal attainment. See page 14.
Appendix A.

The following table is a reproduction of Table 1 in Babcock’s white paper, *Using Brain Science to Design New Pathways Out of Poverty.*

<table>
<thead>
<tr>
<th>Cognitive, behavioral, and health challenges associated with chronic exposure to social bias, persistent poverty, or trauma, including difficulties with any or all of the following:</th>
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<tbody>
<tr>
<td><strong>Managing Thoughts, Organization, and Learning</strong></td>
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<tr>
<td>- Verbal fluency, including auditory learning and following verbal directions</td>
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<tr>
<td>- Maintaining focus and attention; increased distractibility</td>
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<tr>
<td>- Optimizing behavior or decision making in highly stimulating environments</td>
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<tr>
<td>- Memory retention, including general retention of information and following multi-step instructions</td>
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<tr>
<td>- Organizational skills, including keeping track of belongings or tasks</td>
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<tr>
<td>- Following plans or goals through to completion</td>
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<tr>
<td>- Thinking of logical alternatives to a particular course of action; surfacing choices and/or options</td>
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<tr>
<td>- Juggling competing priorities and multitasking</td>
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<tr>
<td>- Time management; organizing tasks to meet deadlines</td>
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<tr>
<td>- Weighing future implications of current decisions</td>
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<tr>
<td>- Building mastery through repeated practice or long-term investment in skill-building</td>
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<tr>
<td>- Taking tools or information learned in one setting and applying them in another</td>
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<tr>
<td>- Spatial awareness and spatial memory; navigating to new locations using maps or written directions; reading tables or diagrams</td>
</tr>
<tr>
<td>- Managing life changes and changes in rules or expectations</td>
</tr>
<tr>
<td><strong>Managing Behavior, Emotions, and Feelings</strong></td>
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<tr>
<td>- Developing and maintaining self-confidence, self-esteem, or agency</td>
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<tr>
<td>- Controlling impulsive behaviors and regulating risk-taking</td>
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<tr>
<td>- Delaying gratification</td>
</tr>
<tr>
<td>- Controlling responses to perceived threats or anger</td>
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<tr>
<td>- Calming down after dealing with stressful events or perceived threats</td>
</tr>
<tr>
<td>- Maintaining a course of action in the face of new stimuli; persisting in the face of worry or despair</td>
</tr>
<tr>
<td>- Understanding the behavior and motivations of self and/or others (EQ-emotional quotient or social competence)</td>
</tr>
<tr>
<td>- Effectively working in partnerships, teams, or groups</td>
</tr>
<tr>
<td>- Building, navigating, and using social networks</td>
</tr>
<tr>
<td>- Internalizing recommendations; accepting and using feedback or advice</td>
</tr>
<tr>
<td>- Maintaining equanimity when dealing with authority</td>
</tr>
<tr>
<td><strong>Managing Health and Well-being</strong></td>
</tr>
<tr>
<td>- Higher rates of major illnesses, such as heart disease, high blood pressure, atherosclerosis, diabetes, cancer, and obesity</td>
</tr>
<tr>
<td>- Higher rates of anxiety, depression, addiction disorders, and other mental illnesses</td>
</tr>
<tr>
<td>- Compromised immunity to diseases and elevated rates of autoimmune diseases</td>
</tr>
<tr>
<td>- Higher rates of diagnosed disabilities</td>
</tr>
<tr>
<td>- Slower rates of post-illness recovery</td>
</tr>
</tbody>
</table>

Appendix B.

“If you want to understand the poor, imagine yourself with your mind elsewhere. You did not sleep much the night before. You find it hard to think clearly. Self-control feels like a challenge. You are distracted and easily perturbed. And this happens every day.”
– Sendhil Mullainathan and Eldar Shafir


“People become what the world suggests they should and can be.”
– Elizabeth Babcock, President and CEO of EMPath


“Relationships are the ‘active ingredients’ of the environment’s influence on healthy human development. They incorporate the qualities that best promote competence and well-being.”
– National Scientific Council on the Developing Child


“Coaching is effective because it allows for repeated practice of self-regulation skills, repeated reinforcement of positive identities, and regular practice of self-determination.”
– Nicki Ruiz de Luzuriaga, Vice President of Institutional Advancement at EMPath

Endnotes

1 This statistic comes from Opportunity Insights’ Opportunity Atlas interactive data mapping website. It was derived by looking at the “Fraction in top 20% based on household income” outcome for children in Greenville County whose parents’ income placed them in the “Low” (25 percentile) and “Lowest” (0 percentile) income percentiles. See Chetty, R., Hendren, N., & Friedman, J. (2020). The Opportunity Atlas. Opportunity Insights, Harvard University. [https://www.opportunityatlas.org/](https://www.opportunityatlas.org/).

2 See Appendix A for a list of the other ways a failure of self-regulation manifests. See also Center on the Developing Child at Harvard University. (2016). Building Core Capabilities for Life: The Science Behind the Skills Adults Need to Succeed in Parenting and in the Workplace. Harvard University. [https://developingchild.harvard.edu/resources/building-core-capabilities-for-life/](https://developingchild.harvard.edu/resources/building-core-capabilities-for-life/).


26 For example, the ability of individuals to keep a job once they have gotten it is tied heavily to their self-regulation skills and self-efficacy—in short, their psychological self-sufficiency. Individuals who cannot manage their time well, focus at work, or control their emotions when on the job—who lose confidence and get discouraged at the smallest setback—are not likely to be retained by employers or considered for advancement.


33 The Annie E. Casey Foundation’s Center for Working Families model—the model that inspired the move to integrated services in Greenville County—is one of the most well-recognized participant-driven approaches to integrated services today.


35 **Vohs (2013) suggests** that even paring down the volume of decisions people must make can help free cognitive bandwidth for use on other tasks. See **Vohs, K. D. (2013).** The Poor’s Poor Mental Power. *Science, 341*(6149), 969–970. [https://doi.org/10.1126/science.1244172](https://doi.org/10.1126/science.1244172).


37 For example, the United Way of Greater Greensboro Family Success Center found that families who engaged with their services for two years made substantially more improvement across a variety of assessment areas—employment status, transportation access, social support networks, continued education—than families who engaged for only one year. See United Way of Greater Greensboro. (n.d.). *Family Success Center Family Assessment Outcome Evaluation Executive Summary*. https://www.unitedwaygso.org/wp-content/uploads/2019/12/FSC-Executive-Summary-and-Evaluation-06.2019-1.pdf.


40 Other partner organizations included the Greenville County Human Relations Commission, Goodwill Industries of the Upstate/Midlands, CommunityWorks Carolina, and the Benefit Bank of South Carolina.

41 UWGC’s investment in integrated services replaced their investment in co-located services, the latter of which is a method of placing multiple community partners together in the same space to enable easier access for individuals in need. In the words of a 2014 proposal UWGC wrote to fund integrated services training, “Co-Located Services brought the right parties together, but Integrated Services will help all parties speak the same language.” See United Way of Greenville County. (2014). *Report to the Community: Together, We’re Building a Cycle of Success*. https://www.unitedwaygc.org/sites/unitedwaygc.org/files/2014_annual_report_final%20%281%29.pdf.


43 Community Impact Staff and Integrated Service Delivery Partners at the United Way of Greenville County. (2014, October 20). *Integrated Service Delivery [Internal memo]*.

44 The 2014 internal memo which proposed to fund training in financial coaching for the integrated service delivery partners acknowledged that Chicago’s Center for Changing Lives “didn’t meet expected outcomes until their fifth year of work.” See Community Impact Staff and Integrated Service Delivery Partners at the United Way of Greenville County. (2014, October 20). *Integrated Service Delivery [Internal memo]*.


EMPath is a nationally recognized nonprofit organization dedicated to creating new pathways to economic independence for low-income women and their families. EMPath’s research into the cognitive effects of poverty led to the development of its Mobility Mentoring™ platform, which since its release in 2009, has been replicated and adapted by organizations across the country seeking to move individuals from crisis to stability. For more information, visit their website at https://www.empathways.org/. See Babcock (2018, p.12). Babcock, E. D. (2018). Harnessing the Power of High Expectations: Using Brain Science to Coach for Breakthrough Outcomes. Economic Mobility Pathways formerly Crittenton Women’s Union. https://www.empathways.org/research-policy/publications/2018-high-expectations.

Moreover, Babcock (2018) argues that having high expectations for participants can pose real personal and professional risks for coaching staff. Personally, coaches may feel disappointed or like a failure if the participants they work with do not succeed or seem to take more steps backward than forward. Professionally, coaches may fear that if their participant outcomes are not good, then they will be held to account during performance review or evaluation and face negative professional consequences. Thus, it can be easy for coaches fall into encouraging participants to set low achievement goals rather than push them towards more ambitious targets. See Babcock, E. D. (2018). Harnessing the Power of High Expectations: Using Brain Science to Coach for Breakthrough Outcomes. Economic Mobility Pathways formerly Crittenton Women’s Union. https://www.empathways.org/research-policy/publications/2018-high-expectations.


 CCS and UM each have their own versions of the Bridge, adapted for their specific programs from EMPath’s well-recognized Bridge to Self-Sufficiency®. To learn more about EMPath’s Bridge to Self-Sufficiency®, visit https://www.empathways.org/approach/bridge-to-self-sufficiency.


 For more information about LIFT, visit https://www.liftcommunities.org. For more information about Roca, visit https://rocainc.org/. For more information about EMPath, visit https://www.empathways.org/.


For more information about Roca’s work for the Massachusetts Juvenile Justice Pay for Success Initiative, visit https://rocainc.org/who-we-are/outcomes-based-funding/.


To learn more about EMPath’s Bridge to Self-Sufficiency®, visit https://www.empathways.org/approach/bridge-to-self-sufficiency.
