COPING STRATEGIES USED BY RURAL WORKING FAMILIES LIVING IN POVERTY

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Authorization to Submit Thesis

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Abstract

The purpose of this study was to examine the coping strategies utilized by working families living below the poverty level who reside in rural areas. This exploratory qualitative study involved standardized open-ended interviews with each family being interviewed separately. The population of this study was families living in the rural Pacific Northwest who have at least one child enrolled in the Head Start Program. The sample included eight families chosen from the population of study. The types of coping strategies focused on in this study included: 1) internally directed strategies, 2) network-based strategies, 3) agency-based strategies, and 4) government-based strategies. Emergent in the interview data were findings that low-income families utilize all types of coping strategies; however, the feelings associated with each type of strategy vary greatly from negative to positive.

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Chapter One: Introduction

The United States is considered to be one of the wealthiest nations on earth; however, it has one of the highest, under-researched poverty rates in the Western world (Langille-Hoppe et al., 2010). In 2012, the overall poverty rate was 15.0 percent, representing a total of 46.5 million people. Of these, 13.1 percent were families and 21.9 percent were children under the age of 18 (U.S. Census Bureau, 2013). It is becoming obvious that the proportion of people in poverty is growing, although it is surprising to find many of these people are families with at least one family member participating in the workforce. Individuals who spend at least 27 weeks per year in the labor force, but whose incomes fall below the poverty level, make up what is known as the working poor (Bureau of Labor Statistics, 2013). In 2012, about 7.3 percent of workers aged 18 to 64 were in poverty (U.S. Census Bureau, 2013).

A family experiencing economic hardship is at an increased risk for emotional distress. This emotional distress destabilizes marital relationships and can lead to conflicts, violence, and family dissolution (Vandsburger, Harrigan & Biggerstaff, 2008). Families living in poverty face numerous stressors that threaten the health and well-being of all family members (e.g., Monroe et al., 2007; Wadsworth & Santiago, 2008). Economically challenged individuals also have a greater incidence of anxiety, depression, low self-esteem and hopelessness (Langille-Hoppe et al., 2010). When compared with families not living in poverty, families experiencing poverty are more likely to have family members with medical problems, as well as higher rates of mental illness. Poverty combined with multiple economic and personal stressors faced by these families contributes to higher rates of child

abuse. Economic hardship leads to family conflict, disrupted parenting, and poor child adjustment. Additionally, children from families living in poverty are more likely to drop out of school or become involved in various forms of delinquency (Mullin & Arce, 2008).

It is almost impossible for working families living in poverty to not experience stress of some kind; therefore, it is necessary to find successful coping strategies being used by these families to help other similar families cope as well. A family's survival depends on their ability to handle life's challenges in such a way they, as a whole, can accomplish its main tasks while allowing each family member to thrive individually (Mullin & Arce, 2008). Some people living in poverty show great resilience and resourcefulness as they try to make ends meet (Krumer-Nevo, 2005). Researchers need to tap into these resources to help working families in poverty find a variety of coping strategies to overcome the struggle of meeting the daily needs of their household.

Most research on the coping strategies used by working families living in poverty has focused on urban communities rather than rural communities. Much of this research has neglected to distinguish between working families and non-working families. This study seeks to bridge a gap in the research by specifically targeting rural working families living in poverty and discovering what coping strategies they use to survive.

Definition of Terms

Poverty is defined as the inability to afford minimum standards of food, clothing, shelter, and health care. In 2013, the average poverty threshold for a family of four was \$23,550 (United States Department of Health and Human Services, 2013). Short, Iceland, and Dalaker (2002) identified poverty thresholds:

[They] should represent a dollar amount for a basic set of goods that includes food, clothing, shelter (including utilities), and a small additional amount to allow for other needs (e.g., house-hold supplies, personal care, non-work transportation)" (p. 2).

A more abstract definition of poverty is a family's perception of economic hardship (Vandsburger, Harrigan & Biggerstaff, 2008).

Many families living in poverty have at least one family member participating in the workforce. About 8.9 million people below the poverty level were 16 years and older, and were in the labor force at least 27 weeks or more during the year. Despite this amount of time spent in the work force per year, they had incomes that fell below the poverty level and are defined as the 'working poor' (Bureau of Labor Statistics 2001).

Working families living in poverty experience chronic stress. The definition of family stress is "pressure or tension in the family system—a disturbance in the steady state of the family" (Monroe et al., 2007). These families under stress must find ways to deal with it successfully so they are able to provide their family members with the necessities they need to survive. Monroe et al. (2007) stated the following:

Stressors are stimuli and as such, require a response. This response is characterized as a coping strategy—the action or actions taken to minimize or manage the stressor. For families in a context of chronic poverty, the stressors most often are negative or even life-threatening, the resources are few and unreliable, and the coping strategies often are a patchwork of actions, some quite unorthodox (p. 200).

Significance of the Study

This study was significant on several levels. By interviewing families individually the researcher was better able to understand what types of coping strategies are used by rural working families living in poverty. The researcher was also better able to understand why they chose to use some coping strategies and reject others. Thorough descriptions of coping strategies are largely missing from past literature. Most analyses of research conducted indicate if a household experienced an inability to meet a basic need, but fail to identify the coping strategies that were employed to try to prevent the hardship or that succeeded in doing so (Heflin, London, & Scott, 2011). Some of the best research on mitigating material hardships in low income families, such as Making Ends Meet (Edin and Lein 1997), was conducted prior to the passage of the Personal Responsibility and Work Opportunity Act in 1996 and thus reflects different policy conditions than low-income families face today. Additionally, the existing research generally focuses on urban families rather than rural while failing to distinguish between working and non-working populations. The findings of this study may also have several implications for future policy making. It is crucial that state and federal policy makers realize rural working families living in poverty do not always have access to the resources they need to effectively cope with the stresses they experience on a daily basis. The research in this thesis has assisted on the expansion of theories formulated by scholars such as Walter J. Mullin and Miguel Arce (2008), Jennifer Sherman (2006), Mary Marguerite Langill-Hoppe, Judith R. Gonzalez, Monique Maxey and Stephanie Terrell (2010), Pamela A. Monroe, Vicky R. Tiller, Carol E.

O'Neil and Lydia L. Blalock (2007), and Julia R. Henly, Sandra K. Danziger and Shira Offer (2005).

Research Questions

The following questions were addressed 1.) What are the coping strategies successfully used by working families living in poverty who reside in rural areas? and 2.)

How do these families feel when utilizing each of the different types of coping strategies?

Limitations

This study was limited because the results cannot be generalized to a larger population. In order for generalization to be possible, a much larger population must be sampled from, and the sample size would need to include more participants. The results of this study can only be compared to other studies that use rural populations. This study cannot be likened to other studies dealing with urban populations as there are too many demographical differences to be taken into consideration. This study was also limited by resources, such as time, finances, and number of researchers.

Chapter Two: Review of Literature

Many studies have been conducted on coping strategies used by families living in poverty; however, many of these studies were done in urban settings rather than rural settings. Also, these studies did not distinguish between working and non-working families. This literature review gives a summary of poverty including how poverty is measured, and the effects of poverty on families. It also includes the findings of previous researchers on individual coping strategies used by families in poverty, network-based coping strategies used by families living in poverty, government and agency-based coping strategies used by families living in poverty, and rural family views on coping with poverty.

Measuring Poverty

Target populations are often defined as "vulnerable" or "disadvantaged" based on their household income, as determined by the federal poverty measure. This measure is used to define those with inadequate resources to cover basic needs (Heflin, London & Scott, 2011). Poverty is concretely defined by the federal government as the inability to afford minimum standards of food, clothing, shelter, and health care (Vandsburger, Harrigan & Biggerstaff, 2008).

Researchers continue to argue that the official poverty measure, developed in the 1960s, fails to take into account changes in the U.S. income distribution, consumption patterns and social safety net (Edin & Kissane, 2010). The number of low-income and working-poor families is unclear because the official poverty measure does not take into account factors such as child care, transportation, clothing, and other work-related expenses (Orthner, Jones-Sanpei & Williamson, 2004; Iceland & Kim, 2001). Another

weakness of the current poverty measure is that it does not reflect the effects of government policies that alter the disposable income available to families. For example, the recent growth of means-tested government benefits has occurred in noncash programs. The extent of poverty reduction resulting from these programs is masked by the official poverty rate definition (Iceland & Kim, 2001).

Table 2.1 Poverty Guidelines

The 2013 Poverty Guidelines for the 48 Contiguous States and the District of Columbia		
Persons in family/household	Poverty guideline	
1	\$11,490	
2	15,510	
3	19,530	
4	23,550	
5	27,570	
6	31,590	
7	35,610	
8	39,630	

For families/households with more than 8 persons, add \$4,020 for each additional person.

Source: United States Department of Health and Human Services

The use of income as a measure of poverty has two significant drawbacks. First, the upper-class population hides their real income. Second, it provides limited information about an individual's standard of living (Singh & Pandey, 1989). After the implementation of the Personal Responsibility and Work Opportunity Reconciliation Act (PRWORA) in 1996, researchers began to collect on material hardship to supplement the existing poverty measure in order to better address the well-being of low-income families. Despite decades

of research on material hardship, little is known about the coping strategies families use to try to mitigate hardship when finances are tight (Heflin, London & Scott, 2011).

Regardless of the definition of poverty, there are a substantial number of U.S. households living on marginal incomes who often are unable to meet the basic needs of their family members. Members of these families are overrepresented in statistics on crime (both as perpetrators and victims), school failure, adolescent pregnancies, family violence and homelessness (Orthner, Jones-Sanpei & Williamson, 2004).

Effects of Poverty on Families

By definition, being poor means "a lack of financial resources to solve problems, forcing the family to make difficult life choices" (Mullin & Arce, 2008). The probability of becoming poor is about 4% per year; however, slightly more than half of all Americans will experience poverty at some point in their lives by age 65. Female-headed households, members of disadvantaged minority groups, and young adults are more likely to slip into poverty, less likely to escape, and more prone to long poverty spells (Edin & Kissane, 2010).

Poverty is not just a problem of joblessness. It is also a result of being part of a workforce characterized by wages that are too low, as well as unsteady employment (Vandsburger, Harrigan & Biggerstaff, 2008). The persistence of poverty among full-time working families challenges the ability of the economy and public policy to reward labor force participation (Iceland & Kim, 2001). Families who are unemployed, underemployed, or employed at low wages are likely to experience hardship in one or more of the following areas: food insecurity, lack of access to health care, and lack of access to affordable quality child care. Working poor families are also at risk for being uninsured and often have

problems accessing safe and affordable housing. Children growing up in poor families are at higher risk than their non-poor peers for school failure, becoming adolescent parents, and living in poverty as adults (Orthner, Jones-Sanpei & Williamson, 2004).

Poverty is toxic for the health and well-being of children, adolescents, and adults alike. Much of the risk for compromised physical and mental health of individuals living in poverty can be traced to the stress borne of living without what one needs. Economic stress is grueling and demoralizing, in turn leading to depressed mood among parents. This parental distress then contributes to conflict among parents and other family members and eventually leads to less effective parenting (Wadsworth & Santiago, 2008).

Poor families have to deal with a greater number of daily stresses, which over time weakens their ability to handle subsequent stress. Both the inability to control the source of the stress and the inability to handle the stress itself can damage psychological functioning (Klebanov, Brooks-Gunn & Duncan, 1994). McLoyd's (1990) "contexts of stress" model asserts the stress of poverty concerns much more than worries about money—it also encompasses hunger, violence, illness and accidents. In addition to being a frequent source of frustration and demoralization, chronic stress takes an undue toll on individuals by making them vulnerable to additional stressors and by creating circumstances in which everyday stressors are more likely to occur. This increase in stressful life events depletes an individual's capacity to cope with chronic strains, making them more vulnerable to their insidious effects (Wadsworth et al., 2005).

"People who live with low incomes are not an underclass. They have aspirations just like others in society they want a job, a decent home, and an income that is enough to pay

the bills with a little to spare" (Kempson, 1996, p.163). People living in poverty show great resilience and resourcefulness in their efforts to make ends meet. They must find a balance and choose between the welfare system, which pays too little, and finding employment, which pays only slightly more than they would receive had they chosen to remain at home (Krumer-Nevo, 2005). Low-income families face multiple threats; therefore, they must use multiple coping strategies to adapt to different demands in their environment (Singh & Pandey, 1989). In spite of their hardships, most families in poverty are resilient in the ways they achieve success. Resilience refers to a family's ability to accomplish specific goals despite the demands and risks associated with living in poverty (Mullin & Arce, 2008). Family resilience is also referred to as "the ability of the family to develop and/or maintain healthy family functioning and successfully adapt to life's challenges and risks" (Patterson, 1997, p.8). McCubbin and McCubbin (1996) developed five major assumptions for resilience in their "Resiliency Model of Family Stress, Adjustment, and Adaptation": families experience stress over the course of the life cycle; families possess strengths that protect and assist them in recovering from negative experiences; families benefit from and contribute to a network of relationships on their communities; families seek to make meaning of and develop shared understanding of negative experiences; and families faced with crisis seek to restore order and balance to their lives.

Individual Coping Strategies

There are three types of coping strategies used by families living in poverty. The first type is individual strategies, also known as internally directed strategies. These are defined as things families do within their own lives or households without relying on other

people, to cope with the challenge of a stressor (Monroe et al., 2007; Heflin, London & Scott, 2011).

Families use a variety of individual coping strategies to meet needs in all areas of their lives. The most common individual strategies used for coping with financial strains, such as utility hardship, is to leave bills unpaid and wait to see how creditors respond, pay a little on each bill, or stagger bills paid in full. Some families also regularly pay just enough of their utility bills to keep them from being shut off (Monroe et al., 2007; Heflin, London & Scott, 2011). Sometimes families search out a new vendor for a particular needed service in order to start a new line of credit knowing it will take some time before the unpaid bill becomes serious enough they cannot return to that vendor. In order to pay necessary bills such as rent or utilities, some families pawn their possessions, like televisions and other electronics. Families are sometimes able to save a little money and put it aside for upcoming bills, but this strategy is less common (Monroe, et al., 2007). In order to lower their bills, some families are able to cut firewood from surrounding forests to fuel their stoves. These families use their stoves for a heat source and sometimes even a cooking source (Greenlee & Lantz, 1993). On occasion, families are able to petition the utility company for a continuation of services, regardless of their history of non-payment, if they have a child or family member with medical problems requiring electric-powered medical devices (Heflin, London & Scott, 2011).

Low-income families must sometimes juggle their families' food needs with their families' food resources. One individual strategy used is eating "breakfast foods" or sandwiches for dinner to save both money and time cooking. Some families cook certain

foods, such as large pots of rice or beans, which constitute one of the main staples of their diet. When they can, most families try to buy food in bulk and freeze or store the leftovers. Another strategy commonly used is trying to buy only food items that are currently on sale, cutting coupons for needed food items, or only shopping at discount food stores (Monroe et al., 2007; Heflin, London & Scott, 2011). The most disconcerting strategy used by these families is when an adult, most often the mother, skips meals or goes without food as a conscious decision to feed the other people in the household (Monroe, et al., 2007). A few less common strategies include stealing food from work, sending children to stay with family members who can feed them one or two meals a day, earning money for food from donating plasma and recycling cans, and smoking more to curb appetite (Heflin, London & Scott, 2011).

Sometimes families employ individual strategies to improve their housing quality. Many act as their own advocates while trying to convince landlords to do repairs on the property they rent or they fix the problems themselves (Heflin, London & Scott, 2011).

In order to mitigate medical hardships, families use a variety of individual strategies to fill in the gaps between state support and network-based strategies. One of these strategies is to use earned income to pay for medicine or needed medical treatments, even if it means not paying other bills temporarily. Families sometimes wait for a period of insurance to begin so they can stock up on medications that are covered in order to prevent out-of-pocket expenses which would occur if they waited to purchase the medication only at the time of need. Unfortunately, some families feel forced to resort to strategies like not paying hospital bills or shoplifting (Heflin, London & Scott, 2011).

Acquiring adequate clothing for family members is another area of need families in poverty struggle to cope with. Individual strategies used include waiting to get tax returns to purchase clothing or delaying purchases until enough money can be saved to pay for them. Other strategies sometimes used are buying clothing at second-hand or thrift stores, not paying other bills to be able to afford needed clothing, and bouncing checks to buy needed clothing. Families with multiple children often hand down clothes from older children to the younger ones. Many families report that sometimes the adults, mostly mothers, go without new or needed clothes so that their children would not have to do so (Heflin, London & Scott, 2011).

The previously mentioned challenges of living in poverty cause families to experience large amounts of psychological stress. Families in poverty utilize both healthy and unhealthy strategies to deal with this stress. Some family members drink alcohol in an attempt to relieve the stress in their lives, while other family members take medication to relieve the anxiety and depression they suffer. Sometimes family members isolate themselves from feelings of powerlessness over their environment. Some parents report talking to their spouses and family about the problems as a way of venting frustration and anger over their financial situation. Families sometimes turn to God when their lives become unmanageable. Finally, participating in constructive hobbies such as working on cars or going hunting, helps some family members relieve the stress of their situations (Greenlee & Lantz, 1993).

Network-Based Coping Strategies

The second type of coping strategies used by families in poverty is called networkbased strategies, also known as externally directed strategies. These are strategies families use or resources they tap into, outside of their own internal resources, to cope with the challenges of a stressor (Monroe et al., 2007). These strategies involve a social network of family, friends, and other associates that may be called upon to provide support to reduce the hardships of everyday life. Social networks can also function as coping capital, providing a range of supports—including money, in-kind assistance, emotional guidance, and information—that serve to reduce family hardship, buffer the stressors of everyday life, and prevent already poor families from further decline. (Henly, Danziger & Offer, 2005). Connections to social support are also potential sources of strength for families living in poverty. Community ties are an effective strategy for these families to get the help they need to accomplish their objectives and meet the goals they have set for their families (Orthner, Jones-Sanpei & Williamson, 2004). Singh & Pandey (1989) proposed that social support moderates the negative effects of stress on well-being. First, it buffers the effect of stress on coping. Second, it strengthens the effect of coping on well-being. Edin and Lein's (1997) Making Ends Meet study revealed network-based strategies were the preferred source of coping reported by 77 percent of welfare-reliant mothers and 82 percent of work-reliant mothers.

Social support is gathered through two sources: informal or natural systems and formal systems. Informal or natural systems develop spontaneously from family, friends, work colleagues, and neighbors. Formal systems are based on the support received by

social workers, doctors and other professionals. Informal support tends to be distinguished by close-knit relationships which are fostered by close geographical proximity. This type of support usually consists only of emotional support and short-term practical help, such as finding "someone to talk to" or having someone watch their children for a few hours.

Formal support is distinguished by more distant interventions, both geographically and emotionally. This support generally consists of the provision of goods, money or services.

Due to the higher level of reciprocity involved, families tend to prefer the informal system—asking for help means the recipient will return the favor and offer their own assistance at another time. Families are generally more reluctant to involve the formal system in solving problems, mainly because the recipient becomes dependent on the giver for assistance and reciprocity rarely exists; however, families will turn to the avenues of formal support when the support available from informal sources is insufficient (Sousa & Rodrigues, 2009). For many low-income families, extended family is the primary support system. Friends are rarely included in this support network. Despite having few resources of their own, many families still feel obligated to help other family members when necessary (Greenlee & Lantz, 1993).

Low-income families frequently use network-based strategies to help with monetary hardships. It is common when in a time of need, or even as part of their routine monthly resources, someone outside the immediate family pays a bill, makes a purchase, or gives money. Occasionally help does come from outside the extended family, which can include friends or ex-boyfriends/husbands (Monroe, et al., 2007; Heflin, London & Scott, 2011).

Network-based strategies are also regularly used by families in order to see that members receive adequate food. Some families report going to eat at a relative's house, on a regular basis or near the end of the month when their food budget becomes tight. Some women also report they plainly tell their mother or other family member they are out of food until their next pay check or food stamp allotment, and ask the family member to purchase food for them (Monroe et al., 2007). One strategy families employ to increase the variety and freshness of foods is to pool resources with friends and family (Heflin, London & Scott, 2011).

Families living in poverty engage in multiple strategies to mitigate housing hardships. The primary strategy used is reliance on network members by renting from them, usually at reduced rates, or moving in with them (Heflin, London & Scott, 2011).

While most families living in poverty are able to receive medical benefits through agency-based sources, sometimes there are gaps in coverage and families are forced to rely on their social networks to prevent medical hardships from emerging. These gaps are filled by borrowing money from a relative, friend, or even employer to cover medical expenses such as purchasing a needed prescription or over-the-counter medication (Heflin, London & Scott, 2011).

There is often limited access to state-subsidized support for clothing; therefore, families commonly report extended family and friends often provide gifts of clothing.

Sometimes, families borrow money from members of their social network to buy clothing.

When families receive help with other expenses such as utilities or housing from their

social network, this then leaves them with leftover resources which can then be applied to the purchase of new clothing (Heflin, London & Scott, 2011).

Agency-Based Coping Strategies

When low-income families are faced with a hardship and are unable to overcome it using either individual or network-based strategies, they must rely on agency-based strategies. These are programs that provide material assistance and are supported by either the government or other social service agencies, both public and private (Monroe et al., 2007; Offer, 2010). The agencies utilized by low-income families provide support in the areas of finance, food, clothing, and housing.

Reliance on agency-based strategies has also been attributed to the shrinking of social support networks, especially among minority groups, due to economic and demographic changes. These changes include the massive loss of low-skilled employment opportunities, increased family disruption, and the deterioration of many urban communities (Offer, 2010).

Many families living in poverty rely on government supported strategies in order to make ends meet. Occasionally, families receive monthly payments from Temporary Assistance for Needy Families (TANF). Sometimes families also benefit from the SSI/Disability income someone in their family receives due to having a disability (Monroe et al., 2007). Members of these families qualify for this benefit if they have a disability including blindness, a medically determinable physical impairment, or mental impairment—including an emotional or learning problem (US Social Security Administration, 2013).

The most widely used government benefit is the Earned Income Tax Credit (EITC) (Monroe et al., 2007). According to the Internal Revenue Service, the EITC is a tax credit for eligible people who work and have low to moderate incomes. The amount of the credit is based on income, filing status, and number of qualifying children, if any (United States Internal Revenue Service, 2013). Although the EITC has been used to lift some families earning low wages above the poverty line, the true effect of the EITC on relieving poverty among working families is difficult to estimate due to working families accruing markedly greater expenses associated with employment in the paid labor market. The expenses can include transportation, child care, and other miscellaneous work-related expenses (Iceland & Kim, 2001).

Participation in the Supplemental Nutrition Assistance Program (SNAP), formerly known as the Food Stamps Program, is the government program most often identified by low-income families as essential to their survival. Many families also report they supplement their food stamp purchases with vouchers from Women, Infants, and Children (WIC) (Monroe et al., 2007). WIC is a special supplemental nutrition program for women, infants, and children. It provides federal grants to states for supplemental foods, health care referrals, and nutrition education for low-income pregnant, breastfeeding, and non-breastfeeding postpartum women, and to infants and children up to age five who are found to be at nutritional risk (United States Department of Agriculture, 2013). Many families also rely on their children receiving two nutritious, hot meals at school through the free lunch program sponsored by the USDA. Some families report visiting local food banks to supplement their pantries (Monroe et al., 2007).

Families living in poverty can sometimes receive vouchers from the welfare office to buy school clothes for their children or work clothes for the adults in the family.

Occasionally, they can obtain grants from welfare, such as a Prevention, Retention, and Contingency (PRC) grant in order to buy suitable work clothes (Heflin, London & Scott, 2011).

Many low-income families rely partially on government funded programs in order to obtain safe and adequate housing. The Section 8 housing program authorizes the payment of rental housing assistance to private landlords on behalf of low-income households. The Low-Income Heat Assistance Emergency Program (LIHEAP) helps low-income families pay their heating bills (Heflin, London & Scott, 2011).

Often, financial and in-kind assistance from charities, religious organizations, and private social service agencies constitute an important source of support for families living in poverty. These nonprofit organizations frequently provide assistance to these needy families by offering services that address basic needs, such as soup kitchens, clothing distribution centers, and homeless shelters. They also help pay utility bills and rent, and sometimes provide cash donations and vouchers to purchase goods (Edin & Lein, 1997; Offer, 2010); however, the role of these organizations is not limited to the provision of material support. These organizations can act as resource brokers too, and connect lowincome families to other organizations that can supply them with information and resources pertaining to issues like childcare, employment, health, and legal advice (Offer, 2010).

Previous research suggests acquiring cash, goods, or services from charities and social service organizations can be stigmatizing and even families in great need are usually reluctant to resort to this type of support (Offer, 2010). Dohan (2003) asserts that because asking charities for assistance is a highly visible public act, it often leads to shame and stigma. Edin and Lein, report low-income families "turned to agencies to get what they needed, even though they found 'begging' humiliating" (1997, p. 190).

Nevertheless, despite the negative sentiments involved in charitable acts, a significant proportion of low-income families have used agency-based support at some point, particularly during periods of acute financial distress (Offer, 2010). Dominguez and Watkins report some low-income families prefer turning to charities and private social service agencies rather than ask relatives or friends for support. This allows them to avoid conflict, maintain confidentiality, and reciprocate help on their own terms (2003).

When compared to public agencies, private social service agencies are less likely to impose conditions or adopt strict rules, but quite often require clients to exhaust all other sources of support first (Offer, 2010). Thus, due to the limited amount of support charities and private social service agencies can provide on a daily basis, they are more suited for addressing short-term problems and helping during emergency situations (Dohan, 2003). Families needing assistance on a continual basis are usually compelled to turn to government-based social services to receive the help they need.

After the implementation of the Personal Responsibility and Work Opportunity Act (PRWORA) in 1996, policy makers hoped to lessen working families' dependence on government sponsored social programs; however, some research suggests families who

left welfare for work continue their ongoing reliance on government benefits, such as Medicare, child care subsidies and the EITC, thus belying the idea they became economically self-sufficient upon their return to the work force. There are also indications associated with the economic crisis which may be catalysts in the increased use of services including food banks and shelters. Additionally, caseloads for the Supplemental Nutrition Assistance Program are currently at record high levels due to income loss and rising take-up rates (Edin & Kissane, 2010).

Rural Views on Poverty

Poverty in the United States is usually thought of as an urban minority problem. The majority of what we know about the poor is based in this setting. Surprisingly, rural poverty rates have been higher than urban poverty rates since the 1960s (Struthers & Bokemeir, 2000).

Edin and Lein (1997) found low-wage workers tended to choose the most legal and morally accepted coping strategies, rather than more economically lucrative and illegal ones, because these activities provided workers with greater self-respect. In rural communities, coping strategies generally tend to be influenced by local cultural and gender norms. Culturally-appropriate provisioning activities such as gardening, wood cutting, hunting, and fishing are often supplemented by barter and trade. Furthermore, rural low-income families often choose only those coping strategies consistent with local cultural ideals, even when that choice forces them to cut back on what they consume. Additionally, it is common to find the use of public assistance is scarcer among the rural poor than the urban poor and use of these services often carries a powerful stigma. The stigma attached

to welfare receipt has grown over the past several years. This increased social disdain may contribute to the perception of growing receipt, as well as some of the actual decline in receipt (Sherman, 2006).

Sherman (2006) conducted a study in the rural area of Golden Valley, California focused on socially acceptable survival strategies of low-income families. Rural families with inadequate incomes must choose between a number of available coping strategies.

The different strategies carry with them varying degrees of moral capital. The most popular and respectable coping strategies are those related to subsistence food provision including hunting, fishing, growing gardens, and raising livestock.

Receiving help from relatives came second to subsistence activities in moral acceptability. This included cash loans, assistance with childcare, and sending family members, primarily mothers, into the workforce who would otherwise have been at home. For those families who still cannot manage to make ends meet through the use of both individual-based and network-based strategies, government assistance is a last resort.

The most acceptable type of government assistance is unemployment insurance, which is received by a significant number of men due to the seasonality and instability of their jobs. After unemployment insurance, Supplemental Security Income (SSI) is the most acceptable form of government assistance. SSI receipt is less stigmatizing than the receipt of welfare because it carries with it the assumption of a dangerous, hardworking past. Utilizing government assistance as a coping strategy was considered so shameful several families in the study admitted to traveling an hour to other communities in order to spend their food stamps to avoid being seen by people they knew (Sherman, 2006).

Summary

There are a variety of resources available to low-income families; however, not all families experiencing poverty are able to take advantage of these resources. For the families who do have many resources, it is misleading to imply all these families can overcome the stress of poverty if they become stronger and receive more services. Living in poverty has many negative effects on families as shown in research by Orthner, Jones-Sanpei & Williamson (2004), Wadsworth & Santiago (2008), Klebanov, Brooks-Gunn & Duncan (1994), and Wadsworth et al. (2005).

The poor face multiple threats; therefore, they must utilize multiple coping strategies to adapt to different demands in their environment. These coping strategies are categorized into three types: individual strategies, network-based strategies, and agency-based strategies, as defined by Monroe et al. (2007), Offer (2010), and Henly, Danziger and Offer (2005).

Monroe et al. (2007), Heflin, London & Scott (2011), and Greenlee & Lantz (1993) have identified individual strategies low-income families use to combat financial and material hardships. Henly, Danziger & Offer (2005), Monroe et al. (2007), Orthner, Jones-Sanpei & Williamson (2004), Sousa & Rodrigues (2009) and Heflin, London & Scott (2011) have delved into exploring the network-based strategies these families use. Edin & Lein (1997), Monroe et al. (2007), Offer (2010), Heflin, London & Scott, (2011) and Dohan (2003) provided crucial information about which agency-based services families living in poverty rely on to help ease their burdens.

While some research on rural families living in poverty has been completed by Sherman (2006) and Greenlee & Lantz (1993), the majority of research focuses instead on urban families. Struthers & Bokemeier (2000) state rural poverty rates have surpassed urban poverty rates, yet rural families living in poverty remain an under-researched population.

Chapter Three: Methodology

The purpose of this ethnographic study is to discover the types of coping strategies used by working families living in poverty who reside in rural communities. This study also explores the attitudes expressed by these families when utilizing each of these types of coping strategies. Ethnography is the study of human groups when the researcher seeks to understand how the group collectively forms and maintains a culture. By analyzing the actions and interactions within the group, ethnographers can get an inside view of the group and see how their culture "describes the way things are and prescribes the ways people should act" (Marshall & Rossman, 2011, p. 19).

This study utilized the grounded theory method developed by Glaser and Strauss (1967). Grounded theory involves the discovery of theory through the analysis of data and strives to provide relevant predictions, explanations, interpretations and applications. The first step in this method is collecting data through a variety of methods. Using the data collected, the key points are marked with a series of codes. The codes are then grouped into similar concepts to make the data more workable. These concepts are used to form categories which are the basis for the creation of a theory (Glaser & Strauss, 1967; Marshal & Rossman, 2011).

The following questions will be addressed: 1.) What are the coping strategies successfully used by working families living in poverty who reside in rural areas? and 2.) How do these families feel when using each of the different types of coping strategies?

Setting

This study took place in a Head Start Center located in the Pacific Northwest. A Head Start program was chosen as the basis for this study because the families participating in the program fit the target sample parameters the researcher needed. In order to have a child enrolled in the program, a family must meet specific guidelines, such as have an income that falls below the federally established poverty level, the family must be homeless, or the child enrolled has a disability. Eighty-eight percent of the families participating in the program had income that fell below the poverty thresholds established by the United States Department of Health and Human Services. Seventy-three percent of the families with incomes below the poverty threshold had at least one family member actively enrolled in the workforce.

The interviews were conducted on an individual basis with only one family at a time. Interviews were held in a private office room in the Head Start building either after class or during non-school days. The adult(s) of the family participated in the interview and the children, if present, played in the classroom or on the playground under adult supervision.

Participants

The sampling procedure used by the researcher was purposive sampling due to the researcher's knowledge of the population and the purpose of the study (Babbie, 1995). A purposive sample was chosen because the researcher was well-known to the families enrolled in the Head Start program. This familiarity helped the participants feel more comfortable about answering questions regarding their finances and other aspects of their

personal lives. The existence of a previously established relationship between the researcher and participants helps develop a stronger rapport which may include a level of closeness, engagement, and involvement that enhances the richness of the research (Marshall & Rossman, 2011). The researcher also chose to use families enrolled in the Head Start program because negotiating access to the families went smoothly and the formal gatekeeper, the program director, was supportive of the research being done. The participants were limited to families who had a child currently enrolled in the local Head Start program. The participants were selected based on specific criterion, including income level and workforce participation. Ten families enrolled in the program met the criteria set by the researcher. Two of the families were not asked to participate due to scheduling conflicts; however, the two families not interviewed were headed by single mothers with comparable demographics to the study participants.

The following tables include specific information regarding the demographic information of the study participants and the other family members residing in their household. Specific information about the participants, including annual income for the year 2013, frequency of employment, and type of employment are also included in the tables below. The participants named were changed to maintain confidentiality.

Table 3.1 Household Demographics

Participant	Adults	Children	Education Level
(by pseudonym)	(Gender & Ages)	(Gender & Ages)	
Lisa	Female – 38	Boy – 16	High School
	(Divorced, Single	Boy – 15	
	Parent)	Girl – 10	
		Girl – 5	
Denise	Female – 30	Boy – 7	High School
	(Divorced, Single	Girl – 4	
	Parent)		
Susan	Female – 33	Girl – 7	2 years of college
Susaii	(Divorced, Single	Girl – 7	2 years or conege
	Parent)	Girl – 3 months	
	Parent)	GIII – 3 IIIOIIUIS	
Tom & Carol	Male – 27	Boy – 4	High School
	Female – 25	Girl – 2	(Both)
	(Cohabiting)	Girl – 9 months	
	, ,,,		
Jim & Martha	Male – 32	Girl – 6	Jim- High School
	Female – 26	Girl – 4	Martha - GED
	(Married)	Girl – 2	
			46
Luke & Jill	Male – 30	Girl – 7	Luke-8 th Grade
	Female – 26	Girl – 4	Jill- High School
	(Married)	Girl – 2	with a few
		Boy – 9 months	medical & CNA
			courses
Mark & Tracy	Male – 44	Girl - 13	Mark – High
Iviaik & Hacy	Female – 30	Girl – 11	School
	(Married)	Boy – 5	Tracy – 1 year of
	(iviairica)	Boy - 4	college
		23, 4	College
George & Becky	Male – 43	Boy – 15	George- 1 year of
,	Female – 35	Boy – 15	college
	(Married)	Girl – 15	Becky – 2 years of
		Boy – 14	college
		Girl – 12	
		Girl – 5	
		Boy – 4	

Table 3.2 Employment Type and Frequency

Participant (by pseudonym)	Type of Employment	Frequency of Employment in 2013	Annual Income (PY 2013)
Lisa	Food Service	12 hours per week for 12 months	\$14,000
Denise	Customer Service (7 months) Food Service (5 months)	36 hours per week for 12 months	\$15,000
Susan	Customer Service	40 hours per week for 10 months	\$16,900
Tom & Carol	Sales & Customer Service	Tom: 38 hours per week for 12 months	\$20,000
Jim & Martha	Jim: Janitorial	Jim: 26 hours per week for 12 months	\$16,000
	Martha: Food Service	Martha: 10-12 hours per week for 3.5 months	
Luke & Jill	Nursery/Landscaping	Luke: 40+ hours per week for 10 months	\$15,000
Mark & Tracy	Mark: Nursery/Landscaping	Mark: 40 hours per week for 7 months	\$27,000
	Tracy: Newspaper Route	Tracy: 20 hours per week for 8 months and 40 hours per week for 3 months	
George & Becky	George: Construction	George: 40 hours per week for 9 months	\$28,000
	Becky: Customer Service	Becky: 32 hours per week for 4 months	

Procedure

All participants were interviewed face-to-face by the researcher using a standardized, open-ended interview method. This instrumentation was primarily because interviews allow for a quick yield of large amounts of data. Interviews can be time consuming both to conduct and analyze the data; however, due to the small sample size, in-depth interviews were chosen for the quantity of data that results from this type of data collection (Marshall & Rossman, 2011). Interviews are often intimate encounters that depend on trust. The researcher had existing relationships with the participants thus establishing trust between both parties before the interviews began.

The interviews were conducted at the Head Start center where each participant has an enrolled child and the procedure did not disrupt the participants' normal, daily activities. The interviews were conducted at times convenient for the participants and child care was provided during the interviews. Before beginning each interview, the researcher reviewed the consent form with the participant and further explained the purpose of the study. The researcher also strived to set the participants at ease by providing them with comfortable chairs and offering refreshments, such as coffee or tea, before starting the interview.

The interview consisted of a list of open-ended questions. The researcher was free to ask follow-up questions as necessary for expansion or clarification. Each participant was asked all questions included in the list and were given the option to refuse answering any question that might have caused them discomfort. The participants had the option to be interviewed alone or with their spouse or partner. The data collection process took place

over a 2-week time period. Each interview was recorded using an audio-recorder for accuracy and lasted between 20 and 35 minutes. Proper procedures for a qualitative measure were in place, including a signed consent form submitted by all study participants, which was approved by the Institutional Review Board at the University of Idaho.

Data Analysis

Eight one-on-one open-ended, qualitative interviews were conducted with rural low-income families who have at least one child currently enrolled in the Head Start program. All eight of the interviews were conducted with only the female adult in the household even though five of the participants were either married or in a committed cohabiting relationship. Invitations were extended for both adults to participate in the interview; however, none of the males chose to participate. Each interview was conducted in a private office at the Head Start Center where the participants' children were enrolled. Notes were taken during the interview, as well as audio taping, to ensure no participant responses were missed or transcribed incorrectly. The sound files from the interviews were saved to a voice recorder that was USB compatible. After the interviews were completed, the researcher listened to the audio files and compared them to the notes taken during the interview to ensure the accuracy of the data.

The collected data was transcribed and categorized in terms of the research questions and emergent themes. Specific interview questions were matched with the corresponding research questions. The interview data was organized into themes and issues relevant to each research question. Quotations were also selected from the interviews, highlighting emerging themes and concepts. The data analysis procedure used

by the researcher follows the grounded theory for qualitative research developed by Glaser and Strauss, demonstrated in their book *The Discovery of Grounded Theory: strategies for qualitative research* (1967). The researcher chose to use grounded theory as the basis for this research study because "Theory based on data can usually not be completely refuted by more data or replaced by another theory. Since it is too intimately linked to data, it is destined to last despite its inevitable modification and reformulation" (Glaser & Strauss, 1967, p.4).

Chapter Four: Results

The participant interviews shared demographic information on their families and provided details on what types of coping strategies are used by working families living in poverty. Demographic similarities were found to exist among the study participants.

Particular themes emerged from the data including which strategies are used more commonly and the feelings associated with each type of strategy.

Education and Employment

The results of this research indicate the rural working families interviewed all have annual incomes placing them below the poverty level for their respective family size. The families also exhibited similar demographic traits. Five of the eight families were two-parent households, with three families having a female head of the household. All of the participants had at least two children, with an average of 3.75 children per household. According to the United States Census Bureau (2012), only 9 percent of family households in the United States have three or more children with the national average of 2.1 children per family household—this statistic only includes households with children, not all U.S. households.

According to the Bureau of Labor Statistics (2013), the incidence of living in poverty greatly diminishes as workers achieve higher levels of education. In 2011, 20.1 percent of workers without a high school diploma were categorized as part of the working-poor. This rate dropped to 9.2 percent for workers with a high school diploma, and dropped even lower to 4.6 percent for workers with an associate's degree and 2.4 percent for a bachelor's degree and above. While three of the families interviewed had at least one

member with one or two years of college, none of the study participants had completed any college related programs. The rest of the participants all had either a high school diploma or their GED with the exception of one person who dropped out of school after completing 8th grade.

The study participants also had similar occupations with six of the families having at least one worker engaged in service work. The other workers had employment in agriculture, construction, or maintenance. According to the Bureau of Labor Statistics (2013), 13.1 percent of service workers were classified as working poor in 2011, 9.1 percent of workers in maintenance or construction were working poor, and 17.2 percent of workers employed in farming, fishing, and forestry occupations were among the working poor.

Network-Based Strategies

The families participating in the study all rely on their extended family for at least one type of support. The most common type of support is child care with six of the eight families claiming to rely on their parents, siblings, or ex-spouses to help take care of their children. Quite often they have a family member watch their children on a regular basis. When using a Likert scale to assess their feelings associated with this, most of the families felt either somewhat positive, rating it a 4, or very positive, rating it a 5. One person rated it a 3 and said they felt neutral about having their family take care of their children. One person rated it between a 1 (very negative) and a 5 (very positive) depending on which family member they had watching their children.

Five of the families mentioned their parents sometimes help pay for needed items such as clothing, shoes, diapers, music lessons, school pictures, and gas for their car. The participants rated a 4 or a 5 when the item being bought was something the children needed; however, if the item was something else the participant felt was not directly benefitting the children, such as putting gasoline in their car or purchasing needed household supplies, the participant felt somewhat negative, rating the experience a 2.

Direct financial help was common, with six of the families reporting they have received money from their parents. This help came as either a gift or a loan. In the cases the money was a loan, the participants felt between a 2 and 4, slightly negative to slightly positive. When money was gifted with no expectation of being paid back, the participants reported mainly a feeling of a 2 with one person feeling neutral and rating it a 3.

Housing was another area some families received help with from extended family. Two families reported they had rented housing from their family at a reduced rate and felt the experience was positive rating it either a 4 or a 5. Two families also reported living with their family for a short period of time and reported the experience being somewhat negative. One of these participants lived with her family for three months when she moved back to the area and felt bad relying on her parents for a place to live until she could afford rent for a place of her own. The other family reported they had a negative experience because they were living in their parent's basement and it was too small for the family which had two small children at the time.

Extended family also helped out some with transportation. Two families reported they had received a car as a gift. One person received it from their parents and the other

person received it from their brother. They had either neutral or somewhat positive feelings when receiving the car. One participant even talked about receiving car repairs for free from their dad and felt it was a somewhat positive experience.

When asked about her feelings regarding the help she receives from her family,

Martha stated she was very grateful for the help; however, she also said, "We'd like to be

able to stand on our own feet, but sometimes it's hard. We're trying to get there."

Receiving help from friends or neighbors was not very common among the participants. Only three of the eight families receive help from people outside of their family. The most common type of help received was child care and it was felt by all to be a positive experience. One participant reported getting help from a friend occasionally to help purchase a needed item, but they later reimbursed the friend for the purchase. The participant felt this was somewhat positive—as long as she was able to pay her friend back within a short amount of time.

Government-Based Strategies

All families participating in the study are either currently receiving services from the government or have received them in the past. Three services that have been utilized by all families are Women, Infants, and Children (WIC), Supplemental Nutrition Assistance

Program (referred to by participants as Food Stamps), and Medicaid. WIC is a program well accepted by the families with ratings from neutral-3, to very positive-5. When Tracy was receiving WIC she said, "It was a nice help. Especially right after having a baby, not being able to work, staying at home with the baby. That formula gets expensive!" The families had similar feelings about receiving Medicaid, as they all rated it between a 3 and a 5.

Becky stated, "I did utilize the Medicaid. I even had insurance, but Medicaid was my backup because I still didn't make enough. I was very thankful for Medicaid. Insurance is expensive. Without it, there was no way I could have done it as a single mom." When Jill was asked about Medicaid, she said, "With Medicaid, I'm neutral because medical is super expensive!" Others felt more positive about Medicaid and Tracy shared about her experience: "In my situation, it's awesome. One time when I didn't have medical insurance I got the bill from my daughter's heart specialist and it was \$10,000. Ain't no way I can pay that!"

Even though all the families have utilized the Food Stamps Program, they did not express the same type of feelings they did for WIC and Medicaid. The highest anyone rated the program was a 3, but most of the families felt either somewhat negative or very negative. Becky stated her opinion: "I would be sad about it, but then it was like, I needed it at the time. It's one of those things. I don't like being on something, but when I do get it I am working so it's like I am helping put back into the system. I'm not just taking from it. I used it when I needed it and when I didn't I got off of it." Tracy felt very negative about the Food Stamps Program. She expressed her feelings to the researcher: "I hate food stamps. Off or on I hate it. If you have a baby you can't support, taxpayers shouldn't have to support your children. I'm one to talk...but now I've bettered my life. I hated the fact that I had to have food stamps. I didn't like them then, don't like them now. There's a lot of people that abuse the system. They trade them for drugs and alcohol. That's not okay."

Unemployment benefits were also fairly common among the participants with six of the eight families having received these benefits at least once. Most people felt somewhat

positive about receiving these benefits and rated this at a 4. One person felt neutral about it and one person rated it a 2 when her husband received it. She said, "Unemployment I was thankful for when I lost my job because it helped me keep paying the bills I had. As far as my husband being on it, I felt kinda negative about it because I felt he could get off his ass and get a job. Even though he had worked, I felt that he was capable of going and finding something in the off season." Susan's thoughts about unemployment benefits were, "It's nice because it's weekly. It gives us that little bit of extra income." Jill expressed her thoughts and feelings about her husband's unemployment experience: "Unemployment is neutral because he pays into that. He's getting back what he put into it."

Two of the families reported receiving help paying their child care bills using the Idaho Child Care Program (ICCP). One family felt neutral about the experience while the other family felt somewhat positive. Becky stated, "I was very happy to get it. That way I knew my kids were being cared for and that whoever was watching them-I wasn't taking advantage of them."

Only one family in the study has lived in federally subsidized housing. She remained neutral about receiving the help from the government but expressed to the researcher, "I would like to move. A lot of stuff goes on at the neighbors and I don't really want my children to grow up here."

One participant also reported their family receives survivor's benefits from the government because her step-daughter's mother died five years ago. She felt neutral about receiving the extra income but was sad about the reason behind the benefit.

About half of the participants had an overall neutral feeling for all government services they used. Susan said, "I feel the same about all of them. I'm thankful for them but it's something that has to be done so it's just kind of a neutral." Martha expressed a similar opinion when she stated, "I look at it as a positive thing because we all pay taxes to the government and to the state, and it's just another way for us to receive it back. But at the same time, we'd still like to be financially doing well enough that we don't have to use those services." While Carol did say she was neutral about getting help from the government she did share her opinion: "I would like to not be on it. I would like to be able to be making enough to be able to do everything on my own because I don't like dealing with the government."

Agency-Based Strategies

Seven of the eight families have relied on local social agencies, both public and private, to help make ends meet. All seven of the families have received a once-a-year payment to help with utility bills from Community Action. The participants have participated in this program for a length of time ranging from one year to three years. The feelings associated with this utility assistance ranged from somewhat negative to somewhat positive, with more people feeling negative about the program. Tracy, who felt positive about the program said, "That was amazing! Because he (husband) gets laid off every winter and before I was working it was hard to scrape it together to pay the electric bill." Becky felt somewhat negative about her experience and expressed, "I was grateful to have the help, but wish I could have done it myself. I felt it was my bill to pay but I needed help with it."

Another social agency half of the families in the study have used is the local food bank. All four of the families who have gone to the food bank have felt negative about their experience and rated it a 2. When asked about her experience going to the food bank, Carol stated, "I'm kind of a competitive person, so I kinda go in there with my head down." Becky had similar feelings and told the researcher, "I didn't like it. I felt like I was taking from other people. But then again, I do what I have to do. I have kids to support."

Jill reported there was one time when local church paid the rent on their house and another time the community thrift store paid her utility bill. She expressed having very negative feelings about both incidences. She said, "I didn't like that. I didn't feel very comfortable with that, especially when they wouldn't let us pay them back. They were very nice, but just the fact of having to do it made me uncomfortable. In fact, I made Luke do it. I just couldn't do it."

Lisa also had help from a local organization when they came and weatherized her home. They helped seal up holes in her basement around the windows and made the upstairs doors and windows more airtight. She was very grateful for the help and said it was a somewhat positive experience.

Individual Strategies

Even though the participants rely on many outside resources to help them make ends meet, they have many strategies they use on their own or within their immediate family. Seven of the families mentioned they shop at thrift stores, Goodwill, discount grocery stores, or go to yard sales. Two of these families mentioned they try not to buy anything new unless they absolutely have to. They buy most things second-hand and also

use hand-me-downs between their children whenever possible. Carol informed the researcher she was the 'yard sale queen' and even made some extra money by buying things at yard sales, such as furniture, and reselling them.

Half of the families rely on partial bill paying to ensure they still have the services and utilities they need. The types of bills the participants reported for partial paying included rent, utilities, car insurance, and phone. One person also mentioned she sometimes pays the fee to have a service suspended and then get it back in a few months when she has the funds. Becky stated, "I didn't apply for community action this year so we're still playing a little bit of catch up with our electricity bill. It seems like we're always a month behind with our gas, electric or phone bills. It seems we've got to pick and choose and just pay a little here and a little there". Some of the participants said they try to pay people back and play catch up on their debt when they get their tax refund back every spring. For example, Carol said a few years ago her mom loaned her money for the deposit on rental, but stated, "I was able to pay that back once we got our taxes."

There were a few different strategies families used to help make some extra income when their financial situation was strained. The strategies mentioned were cutting and selling firewood, babysitting other children, and huckleberry picking. Jill mentioned she would like to get a job in order to help out financially. She said, "I would like to find a job. There's a job open I would like, but I can't do it because it would cost more than I would earn with childcare and gas." Some families also mentioned ways they cut costs, such as cutting back on electrical and gas use as much as possible and trying to find cheaper brands of products they use all the time, such as cat food or diapers.

A few of the participants also utilized individual strategies to help feed their families. Two families mentioned they hunt wild game, such as deer or elk, to put meat on the table. One participant is starting a garden this year so her family can have fresh produce in the summer at a cheaper cost. She also plans to do some canning and freezing with the extra fruits and vegetables she grows so they can enjoy their produce all year long.

Half of the families told the researcher the strategy they use most to try and stay within their budget is to simply do without things they do not need. They do not buy frivolous items and only buy what is absolutely necessary. This means sometimes not having things such as television, cell phones, or brand new clothes. Lisa stated she had no money to buy extra things, but she was able to get what they needed. She said, "We're getting by with just my paying the bills and the food stamps and their Medicaid. That right there just makes it." Tracy talked about how she has ignored some of her own needs in order to provide for her children. She said, "I have gone without things to make ends meet, to get the kids the things that they need versus myself. I haven't had a new pair of shoes in four years! I so want a pair of new shoes!" Susan also shared with the researcher about how her family sometimes goes without things they might want: "We just don't do it. We just go without; if we don't have something we're fine. If we need it, obviously I will find a way to get it—either by asking somebody or the kid's dad, but mostly we just go without." Martha shared her thoughts with the researcher on how her family felt about their lowincome status:

Even though we don't make very much and we constantly struggle, we are still happy for the family that we have, the home that we have, for everything that we do have. Eventually we will be able to not be at the struggling point. But being, I guess, in the poor level, a low-income family, it humbles a person. It makes them very...they don't take things for granted. They are very thankful for everything that they have—most people are. I'm not sad or depressed because of our situation. I try to always look on the brighter side of things. One of these days God will plan for us to have an easier living but for now this is probably something God wants us to learn from.

Chapter Five: Discussion

People living in poverty utilize a variety of coping strategies in order to meet the needs of their families. Their ability to handle the resources at their disposal dictates the current and future well-being of their family members (Mullin & Arce, 2008). These poverty-stricken families rely on the following types of coping strategies: network-based strategies, government-based strategies, agency-based strategies and individual strategies (Monroe et al., 2007; Heflin, London & Scott, 2011).

Various studies have sought to identify which coping strategies are used by these families as they attempt to make ends meet; however, these studies generally lump together all low-income families and rarely, if ever, distinguish between working and non-working families. Surprisingly, many families living in poverty have at least one adult in the family actively participating in the workforce. These families fall under the category of the 'working poor' as long as they have an individual in their household who has spent at least 27 weeks of the past year engaged in the labor force (Bureau of Labor Statistics, 2013).

The purpose of this qualitative study was to determine the coping strategies used by rural working families living in poverty. The researcher also sought to learn about the feelings and attitudes these families associate with each type of coping strategy.

The results of the research indicated rural working families participating in the study have similar levels of education and are engaged in similar types of employment.

Four of the families had at least one member that pursued some education after graduating high school, but no one earned any type of degree. The majority of the participants had a high school diploma as their highest level of education completed. This

information supports the findings of the Bureau of Labor Statistics (2013) that the higher the level of education completed, the less likely a person is to be living in poverty. The Bureau of Labor Statistics has also found the type of employment most often linked with the working poor included service jobs, maintenance and construction, and agricultural jobs. All of the workers interviewed were engaged in these types of occupations. Six of the eight families had at least one family member engaged in full-time employment, while the other two families had someone working at least part-time, but year-round. Even with each family having members active in the work force, all families had incomes falling below the poverty threshold. As a result, this lack of finances forced these families to utilize a variety of coping strategies to fulfill their needs.

All of the families relied on extended family, such as their parents or siblings, to help with things like child care. Most families felt it was acceptable to ask their family members to help with child care because finding reliable child care can be very costly.

Many of the families also relied on extended family to help purchase needed items, such as clothing, shoes, and school supplies. If the items purchased were things the children needed, then the participants felt much better about asking for help from their relatives.

Additionally, most families received loans from their extended family to help them out when their financial situation was strained. The participants felt fairly good about this as long as they were able to pay back the loan; however, if the money came in the form of a gift, the experience was somewhat negative. This negativity often led to feelings of failure or guilt from the participant. Even though they were grateful for the money, they were ashamed their extended family might view them as needy.

Childcare was the only type of help received from friends and neighbors. Even when friends provided child care, it was only occasional help and rarely on a regular basis. The participants felt positive about receiving help with child care, mainly because many of them had the opportunity to reciprocate and provide child care for their friends from time to time; therefore, this was perceived as an exchange of services rather than having someone do them a favor.

Every family in the study has had to rely on government services either currently or in the past. When the service was something that provided benefits for their children, such as WIC or Medicaid, the families usually felt somewhat positive because they felt they need to provide for their children no matter what. All participants were either currently enrolled in the Supplemental Nutrition Assistance Program, referred to by participants as Food Stamps, or have used the program in the past. A few people had neutral feelings regarding the program, but most had negative feelings. It appeared these feelings were usually associated with the experiences people had when purchasing food at the supermarket. Living in a rural area means other people at the store, quite often acquaintances, could see them using their food stamps. This side effect of living in a small town makes anonymity difficult. These results are similar to what Sherman (2006) found when researching families living in the rural area of Golden Valley, California. She found families receiving help from the government were sometimes looked upon with a negative stigma. Some participants also had negative feelings about the food stamps program because they knew of people who abused the system and traded their food stamps for things such as drugs or alcohol, rather than purchasing food for their family.

The majority of the families, six of the eight, have relied on unemployment benefits to help make ends meet financially. This was looked at positively because they felt they were getting back the contributions they made when they were working.

The participants expressed mixed feelings about receiving help from private and public social agencies. Seven of the families have received help with their utility bills from the Community Action agency. This assistance comes as a one-time annual utility payment based on current income. The payment comes in the winter when utility bills are higher to increased heating costs. All the families were thankful for the help, but a few families expressed negativity about the aid because they felt it was their own debt to pay. Most families are reluctant to use local social agencies to acquire items such as food, clothing or help with finances. This reluctance seemed to be associated with the face-to-face interaction required to get this type of help.

The families in the study all used a variety of individual survival strategies to help make ends meet. They all used money-saving strategies, such as doing without goods or services, only buying necessary items, or purchasing second-hand whenever possible.

Engaging in these activities allowed the families to have more autonomy and reduced their reliance on outside resources.

The findings of this study demonstrate that rural low-income families will use any coping strategy necessary for their family's survival. Maintaining self-pride is important, so they will usually first utilize strategies within their own and extended family before relying on government-supported strategies, while assistance from local social agencies seems to generally be a last resort.

Limitations

Although much was learned about the coping strategies used by rural working families living in poverty, there were limitations to the study. The first limitation was related to the sample and sample size. The sample size was small, consisting of only eight families. This was because of the specific participant qualifications as well as a small population sample consisting of only Head Start families. The study was also limited in that only the adult females in the family chose to participate, even though the males had been invited.

The study had resource and personnel restrictions. Lack of financial resources may have led to a lack of incentive to participate. This study was conducted solely by the primary investigator, which also contributed to a limited time frame.

Another limitation was related to the data collection process. The participants were only interviewed once, which prevented the researcher from any follow-up questions they might have had at a later date. These inquiries could have been answered had there been a second interview or an ongoing line of communication between the researcher and the participants.

Recommendations for Future Research

Based on the results of this study, there are several recommendations for future research. First, some of the limitations previously outlined may be minimized by increasing the sample size and expanding the sample population. To improve the accuracy of the data collection, follow-up interviews with study participants could prove to be quite beneficial.

The validity of the study could also be increased by ensuring males also be interviewed, as their opinions may vary from their female counterparts.

Future studies could include two groups of low-income participants, rural working families and rural non-working families, to compare the coping strategies used by both groups and compare the feelings associated with those strategies. Another option would be to have two groups of low-income working families, one rural and one urban, to compare use of coping strategies and the feelings associated with each type of strategy.

Recommendations for Policy Makers

There are some recommendations that can be made to local policy makers that represent rural communities. The first recommendation is that it would be beneficial to have better educational supports and more available access to colleges and universities thus allowing rural workers to obtain higher levers of education. This would allow these workers to seek employment with higher wages and more stability, thus raising their income about the poverty threshold and lessening their dependence on government assistance programs.

The second recommendation would be to find ways to educate the public about government services available to families and why these services are necessary. Educating the general public can lead to less stigmatization.

The third recommendation would be to find ways for families to better maintain their anonymity when utilizing government resources in their local communities. This would decrease the stress and negative feelings low-income families feel when using these services.

Conclusion

Several conclusions can be made based on the results of this study. First, rural low-income families will use all three types of coping strategies to support their family, even if they have negative feelings about the experience. Second, when rural low-income families are forced to rely on agency-based strategies, they prefer to use strategies where they can retain some anonymity to help ensure their peers are unaware of the outside help they are receiving, thus avoiding negative stigmas. Third, when most rural low-income families have an increase in income, they minimize their use of agency-based resources as soon as possible, even if they still meet program qualifications.

The results of this study indicate rural low-income working families are resilient and can be quite successful in discovering coping strategies they can use to ensure the survival of their family members. Rural low-income working families are filled with pride and strive to maintain their positive social image; however, they will sacrifice their pride to provide for their children and ask for help outside of their immediate family, if necessary.

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Appendix A

Interview Questions

- 1. Please provide information about the people living in your household. Include age, gender and the relationship to other household members.
- 2. What is your highest level of education completed?
- 3. What was your annual income for the year 2013?
- 4. Who in your household worked in the year 2013? How many hours per week? How many months? What type of work did they do?
- 5. What types of support have you received from family members? (i.e. child care, financial, food, housing, etc.) How often?
- 6. How do you feel when receiving support from family? (using Likert Feelings Scale)
- 7. What types of support have you received from friends and/or neighbors? How often?
- 8. How do you feel when receiving support from friends and neighbors? (using Likert Feelings Scale)
- 9. What types of support have you received from the government including unemployment benefits, SSI, Medicaid, food stamps, WIC, etc.? How often?
- 10. How do you feel when receiving support from the government? (using Likert Feelings Scale)
- 11. What types of support have you received from private and public social agencies? (i.e. food bank, clothing closet, ministerial association, etc.) How often?
- 12. How do you feel when receiving support from private and public social agencies? (using Likert Feelings Scale)
- 13. What strategies do you use to make ends meet without getting assistance from others? (i.e. partial bill paying, doing without goods & services, etc.)
- 14. Is there any additional information that you would like to provide that might be beneficial to this study?

Appendix B

Likert Feelings Scale

