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Guaranteed Income: A Policy Landscape Review of 105 Programs in the United States

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Abstract: Cash assistance programs have been piloted as Basic or Guaranteed Income across the United States. This research asks how programs are being designed and evaluated, with implications for how collective program impacts are understood. To answer this question, we assemble and review 105 programs based in the United States, covering over 40,000 beneficiaries. We compare eligibility criteria, funding sources, distribution amounts, program administration, pilot duration, and evaluation measures. We find that just over half of the programs use income-based qualifications and most (84 %) have some form of place-based eligibility criteria defined by residence. The plurality of programs (28) are based in California (CA) and 16 operate at the county level. We also find that while the development of pilots often uses community development framing, funding and evaluation measures tend to be more aligned with either economic or public health intervention assessments. As multiple fields of study engage with poverty alleviation, our findings add nuance to the complex and continuously developing landscape of interventions and evaluations.

Keywords: basic income; poverty; cash transfer; economic development; social welfare; COVID-19

Overcoming poverty is not a gesture of charity. It is an act of justice. It is the protection of a fundamental human right, the right to dignity and a decent life. While poverty persists, there is no true freedom. – Nelson Mandela

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1 Introduction

Guaranteed Income (GI) pilots are gaining traction as exploratory policy interventions to address poverty. GI provides participants with a guaranteed cash amount at fixed intervals over a designated time frame, following the premise that income security, even over a relatively short time frame, can provide a host of benefits to the recipients and their broader communities. Findings from such pilots have the potential to impact social welfare in multiple ways. For example, receiving GI is associated with improvements in health such as reduced family stress and improved mental health (Gibson, Hearty, and Craig 2020). Similarly, studies document how GI can create opportunities for individuals to invest in their personal capital (e.g. reducing childcare responsibilities or increasing education access) while increasing access to health promoting goods (e.g. food, insurance, medical care) and improving housing conditions by funding a move to a different neighborhood with more – or better – amenities (Bridger and Nettle 2022; Wilson and McDaid 2021).

The design of the numerous GI pilot programs in the United States and the evaluation metrics they use to assess success shape our understanding of what GI is, who and what it is for, and its potential for ameliorating poverty and its associated challenges. Community development (CD) emphasizes that programs should be designed with participants and tailored to meet their stated needs. As a result of the theory of change behind CD processes, CD-driven program design and evaluation often rely on Community Based Participatory Research (CBPR) or Participatory Action Research (PAR), empowering participants to frame program design, research questions, and definitions of program success. Relatedly, the field of social welfare is concerned with how GI will replace or alter traditional social welfare programming (Murray 2008). For example, will GI reduce caseworker loads or improve case management outcomes? The thrust of these questions may differ from those framed in economics and public health. The objective of this review is to describe how GI pilots are designed and evaluated and consider how these choices impact how GI programs are understood in the broader context of the social welfare system.

1.1 State of the Field of Guaranteed Income Studies

In a rapidly developing landscape with multidisciplinary involvement, we start by setting terminology. GI is an umbrella term for cash transfer programs that tend to be unconditional (i.e. receipt of cash is not conditioned on specific actions) and target a specific demographic, such as expectant mothers or low-income individuals (Calnitsky and Latner 2017; Jain Family Institute n.d.; Mayors for a Guaranteed

Income 2021a). By comparison, Universal Basic Income (UBI) is often conceptualized as a nationally or state/provincially organized payment to be made to everyone regardless of wealth, on an individual basis (not household), without qualifying conditions, and at regular intervals (e.g. monthly or annually) (Gentilini, Grosh, and Yemtsov 2019; Hasdell 2020; Widerquist 2011, 2018). In this manner, UBI differs from GI because the latter is either a targeted cash distribution to a certain demographic group – like families with children or people of color – or can be triggered by a qualifying event (e.g. family income below the poverty level) (Gentilini, Grosh, and Yemtsov 2019; Guaranteed Income in the U.S.: A Toolkit 2021). Further, GI often seeks to provide a similar amount to all, where UBI seeks to establish an income floor, providing more to those in deeper poverty. As the descriptive language from pilots is in development, we will rely on the above definitions.

While GI is relatively new to the American welfare context, it is not conceptually new. The first known GI program occurred in Athens over 2,500 years ago (Aristotle, *Ath Con st*). If the Athenian GI program were to have a modern equivalent in the U.S., it would be a safety net program that provides \$20 per day to people with less than \$1,000 USD in savings. To provide additional perspective, about 55 % of Americans do not have \$1,000 or more in savings, and about 20 % of U.S. households have at least one family member who at some point during the year received Temporary Assistance for Needy Families (TANF), Supplemental Nutrition Assistance Programming (SNAP), or Social Security.

Nor is GI a policy of the ancient past. Some of the largest and longest running modern GI programs include Brazil's *Bolsa Familia*, Mexico's *Oportunidades*, India's *Rythu Bandhu* program for farmers in Telangana state, and the decade-long private program in Kenya via the organization *GiveDirectly*. GI programming is also prevalent in European nations even where the welfare system is well-developed. For example, Scandinavian countries offer automatic monthly payments per child (Zelleke 2016). Evaluations of such established GI programs indicate promising outcomes across a range of metrics (e.g. amount in savings, health care utilization, cognitive development, etc.) (Banerjee, Niehaus, and Suri 2019; Carpenter 2020; Downes and Lansley 2018; Gentilini et al. 2019; Thompson 2022; Zelleke 2016, 2019).

1.2 Guaranteed Income Programming and U.S. Social Welfare Programs

In the U.S., GI is often seen as a competing social welfare policy, though it may also be conceptualized as a supporting approach (Gilbert et al. 2018). GI programming interfaces with federal and state social welfare programs, including federal and state welfare transfer payments that support: the elderly and disabled via Retirement,

Survivors, and Disability Insurance (RSDI); the very low-income elderly and disabled via Supplemental Security Income (SSI); disabled veterans via Veteran's Benefits and Social Security Disability Insurance (SSDI); low-income families with children via Temporary Assistance for Needy Families (TANF), the Special Supplemental Nutrition Program (SNAP), Women, Infants and Children (WIC), and the Child Tax Credit; and the temporarily unemployed via Unemployment Insurance. In addition to these programs, wealth redistribution occurs via the Earned Income Tax Credit and progressive income taxation, and sometimes through emergency programming such as COVID-19 economic relief payments (stimulus checks).

GI differs from such federal programs in that there can be fewer barriers to qualify and stay qualified (e.g. no monthly or quarterly benefit reassessments) and programs tend to be of shorter, defined periods of time (e.g. 1–2 years). GI also provides unrestricted cash as opposed to stamps, coupons, or reimbursements. Unrestricted cash is intended to allow for flexibility so that beneficiaries can navigate their own diverse concerns – including childcare, housing, food and other necessities – as defined by the beneficiary. In this way, unrestricted or no-strings-attached cash provided by a GI program allows for a sense of self-agency for the beneficiary to elect how they utilize their program funds without fear of being removed from the benefits program. However, some GI programs require enrollees to participate in federal and state programs; others may trigger requalification events when GI payments result in adjusted income scores. In the latter cases, federal benefits may need to be recalculated (or withheld) for GI participants, should supplemental funding boost their income above federal program thresholds. These considerations are important to GI program design in the U.S. as participants may face added precarity in financial planning by virtue of enrolling in a GI program.

GI gained some political interest after one very notable GI program championed by Mayor Tubbs in 2018 in Stockton, California (Ghuman 2022). The mixed methods randomized controlled trial (RCT) was unique in its design, and promised a Participatory Action Research (PAR) model where nonparticipant community residents “co-construct[ed] a learning agenda focused on what they believe a municipality should know about income volatility and the benefits of a GI [program]” (West and Castro 2023). The COVID-19 pandemic added to the momentum by increasing the prevalence of GI programs nationally, and Mayor Tubbs went on to found the Mayors for a Guaranteed Income (MGI) initiative, which recruited 11 more cities to pilot a GI program upon its initiation (Mayors for a Guaranteed Income 2020). By 2022, the Economic Security Project (ESP) announced that the U.S. had reached 100 new GI projects in the prior five years, spanning 30 states (Economic Security Project 2022). U.S.-based GI pilot programs tend to be smaller in scale, serving a few hundred families or individuals while offering a proof of concept with the aim of convincing U.S. policymakers of the utility and feasibility of such

programs. Pilot programs are necessarily politically motivated, searching for measures of success and stories that will sway a deeply divided nation (Freeland 2019; Gilberstadt 2020). Would a GI program that improved childhood health motivate broad policy adoption in the U.S.? Or would a novel GI pilot need to prove that a participating family could save enough funding to reduce reliance on welfare? Given limited funding for programming and evaluation, and a large amount of press coverage, these GI pilot programs are under immense pressure to deliver a policy breakthrough.

Given the reach of many national organizations involved in GI pilots, we expect they also play a large role in shaping the narrative around GI programs in the U.S. For example, OpenAI CEO Sam Altman financially backed one of the largest GI studies, giving 1,000 families in Illinois and Texas \$1,000 per month for three years. The study focused on job seeking behavior, including working hours and problematic drinking – all questions designed to explore how GI might offset workforce concerns aligned with artificial intelligence rollout (OpenResearch n.d.). The flavor of this intervention and its study design may lead to results that dissuade jurisdictions that do not embrace AI workforce changes.

In aggregate, the many program designs and evaluations collectively influence the perceived promise of GI. For example, where sample size is small, achieving statistically significant findings will be challenging as a result of low statistical power. Conversely, a large, statistically significant finding that is not aligned with a public discourse, may not convince legislators to take action. Similarly, where the duration or amount of funding is not enough to surmount basic needs, results may be modest. Then there is the question of transferability. Is \$1,000 a month for three years enough in Texas, but not California? Likewise, is it reasonable to expect that a program designed for improving self-confidence in New York artists would have similar outcomes for single mothers in Mississippi? Finally, how should long-term success be measured? Could an influx of cash for one year or five years be enough to significantly alter a participant's financial life course? All of these considerations and their complexity should be studied using a range of perspectives and disciplines.

1.3 Social Welfare Programming and Study

Importantly, because GI programs seek to lift up the most marginalized populations, they share a common goal with the field of CD, which is described as “a political and social process of collective education and action to achieve self-determination and social justice for marginalized and subordinated groups” (Emejulu 2011, p. 389). In this effort, CD centers the most impacted people in the public policy process (Arnstein 1969; Schlosberg 2007; Slotterback et al. 2019). Procedural justice refers to

efforts to increase the access of all populations to poverty alleviation decision-making processes through methods like PAR, participant-led steering committees, and peer evaluation of program outcomes through interviews, focus groups, storytelling, videography, and photo essays. Distributional justice refers to the placement of development in relation to historically disadvantaged communities, including efforts like federally recognized Promise Zones that target private funding to traditionally marginalized neighborhoods (Schlosberg 2007). Process-wise, efforts to increase procedural justice feed into distributive justice outcomes. For example, Fitzgerald (2022) followed the planning process in five U.S. cities, noting that achieving equity-oriented policies depended on planning staff fostering representative justice with trust-building and anti-racism training to welcome underrepresented groups to the process and meaningfully value their input. As such, the field of CD is both process- and outcome-oriented by identifying or producing assets and capacities to empower residents and citizens (Kruzynski and Shragge 1999). Such justice-oriented approaches are also utilized in the fields of public health (Acevedo-Garcia et al. 2014; Minkler 2000) and economics (Hoynes and Rothstein 2019; Van Parijs 1991, 2004).

In support, at the federal level, more emphasis has been given to CD efforts in poverty alleviation as evidenced by the creation of programs like the Community Development Block Grant in 1974 – representing one of the longest running programs of the U.S. Department of Housing and Urban Development. Similarly, the U.S. Department of Health and Human Services operates a Community and Economic Development grant program that seeks to target locally tailored efforts. In comparison, early in the nation's history, social welfare programming offered “paternalistic” policies aimed largely at qualifying widows and veterans (Fellowes and Rowe 2004; LeRoux 2009). From this base, social welfare programming has been gradually expanded to other participants and broadened in the 1960s and 1970s to include new theories of action that re-centered those most impacted by poverty. In particular, social welfare reorganization after the civil rights movement included the incorporation of CD methodologies and funding, including self-determination by community groups and Community Block Grants with greater flexibility for how to spend social support funding. At the local level, many Departments of Social Welfare rebranded to “Social Welfare and Community Development” to incorporate this shifting perspective towards CD (Garkovich 2011; Phifer 1990). Similarly, the creation of Community Development Corporations (CDCs) acting as 501c(3) non-profit organizations helped to support and revitalize communities.

Throughout this long history, social welfare programming in the U.S. also shifted from predetermined spending, such as housing or food vouchers, toward more flexible spending options. For example, the federal government recently provided automatic bank payments for COVID-19 pandemic relief. Further, the Community

and Economic Development (CED) approach within CD capitalizes on assets for community-wide economic benefit by “developing social, environmental, and economic change to enhance quality of life” not only for the most impacted, but also for the broader community (Shaffer, Deller, and Marcouiller 2004, p. 45). In CED, emphasis is often placed on local efforts with spillover effects in the broader community aimed at increasing the “infrastructure of opportunity” (Hill 2021). Because of their place-based focus, CED is a feature in many local land-use plans (Brinkley and Stahmer 2024), leveraging local community political will. Because GI pilot programs often offer flexible cash assistance we argue that they are conceptualized as both an effort to fill the social welfare gap left by inadequate federal programming as well as CED with broad spillover for improving local conditions beyond recipients of the programs. Yet, if GI programs are designed through CD, they may also face friction where participants do not want to evaluate the same outcomes as funders or scholars. How GI programs are designed and evaluated will impact the national vision for adopting GI programs into an already complex social welfare landscape. Understanding who are the decision-makers, funders, and administrators of GI programs provides insights into how GI is conceptualized and its future role in US policy. The variation across GI programs and their evaluation approaches reflects the involvement of diverse fields, such as urban planning, sociology, and public health (Doussard and Quinn 2024). The discussion will revisit the importance of interdisciplinary contributions to the field of GI studies.

2 Methods

We assembled information about 151 GI programs in November 2022. We describe below the inclusion criteria that yielded the final database of 105 programs. Programs were identified through Google search engine using the key terms “universal basic income” and “guaranteed basic income,” through appendices in books about GI, and on websites catered to sharing information on GI programs (such as research centers at Stanford, University of Chicago and University of Pennsylvania, the advocacy network Mayors for a Guaranteed Income, and the news site Basic Income Today). Scholarly literature, academic researcher networks for scholars of GI, and news reports were also used. Though survey and interview methods were considered, there was often little contact information for programs, which would lead to a non-representative sample. As such, this review relies on public-facing data, press releases, and news media coverage. Additionally, not all programs could be considered for analysis due to incomplete data. We describe below the inclusion criteria that yielded the final database of 105 programs (Supplementary Material).

To be included in our review, programs had to provide cash to beneficiaries over an extended payment schedule (e.g. biweekly, monthly) that could be spent at the beneficiaries' discretion. There were no restrictions placed on the amount of cash, which could for example, be variable depending on income or fixed. Programs that provide non-cash benefits like SSI, SSDI, and TANF funded programs (e.g. food stamps, food-in-kind, health services) and programs that conditioned cash receipt on specific actions or behaviors (e.g. unemployment benefits) were not eligible for inclusion. We also excluded programs that provided only one-time payments to beneficiaries. To focus the analysis on a relatively discrete time period, we limited inclusion of programs to those created in or after 2016.

Finally, for logistical reasons, only programs with publicly available information published on the internet for at least six of the following nine criteria were included: program location, year started, length of program, amount of benefit, payment frequency, size of treatment group, eligibility demographics, administrative types (municipal/county government, non-profit organization, or public-private collaboration), and funding sources (concentrated donor pools, federal government funds, state government funds, local government funds, or research grants).

Two programs were eliminated from our final set of 151 programs (Family Assistance Resource Program for Phoenix Residents, formerly known as the Financial Assistance for Phoenix Families Program, and Family Rewards 2.0) because they did not fit the unconditional cash transfer requirement. Forty-four additional programs were excluded from the analysis due to having not enough information publicly available to complete the search criteria. A total of 105 programs were included in the final analysis.

Multiple cohorts/iterations within a program with distinct changes over time were grouped together under one program title. For example, 10 programs tested more than one experimental cohort type where one group of selected participants would receive a larger/smaller payment than the other group or where one group would be given a larger lump sum of cash over a more extended period of time. Such is the case for Newark Movement for Economic Equity (NMEE) program, wherein 50 % of the cohort received \$250 bi-weekly (\$6,500 total) and the other 50 % received \$3,000 semi-annually (\$6,000 total). Another case is the Black Resilience Fund (BRF) program, in which the number of children in a household impacted the cash award (\$1,000 a month for adults, \$1,500 for adults with 1 or 2 children, or \$2,000 for adults with 3 or more children). Nine programs had more than one cohort location, such as Baby's First Years, which conducted GI programs in New York City, greater New Orleans, the Twin Cities, and the Omaha metropolitan areas – but in this GI program review were all considered to be under one program. Nine programs were repeated or reiterated over time, with perhaps slight modifications of the same program implementation, funder and/or funds available, or cohort size. An example is

Sacramento County's Direct Investment Program (DIP). DIP 1.0 began June 2021 with 100 families and has expanded in partnership with funding from City of Sacramento to conduct DIP 2.0 with 80 additional families beginning Fall 2022. In this case, the two DIP cohorts were still considered to be one program.

Program eligibility requirements and populations of focus were analyzed using an overlapping typology that was inductively generated after collecting information about all programs included for final analysis. Four types of eligibility or population criteria were found to be used among programs: place-based, people-based, income-based, and situation-based criteria. These criteria can be interpreted as reflecting certain values. Place-based program criteria are based on the physical location of an individual or people with respect to their program eligibility, while people-based program criteria focused on sociodemographic eligibility. Income-based criteria relates to how much income an individual, household, or family brought in as a basis for eligibility, and situation-based program criteria specifically referred to a program whose eligibility criteria was dependent on an applicant having experienced a certain situation or scenario. It should be noted that many programs contained multiple eligibility criteria that may have included more than one of these four listed typologies.

Information on program duration, cash amount, and frequency of distribution is used to evaluate the potential for these programs to achieve meaningful results as designed. If cash payments are insufficient or offered for too short a period, we may not expect to observe effects on health outcomes or long-term economic impacts. Similarly, cohort size is understood primarily in terms of whether the study was sufficiently powered to estimate effects. At the same time, such shorter duration or smaller funding amounts may still be deemed impactful when considering short-term outcomes such as participant desire for and appreciation of the program. If the program was evaluated, we reviewed the evaluation criteria and findings. The presence, approach, and evaluation metrics used reflect GI program goals, which may be to improve physical, emotional, or mental health, provide financial stability and sustainability, or to achieve beneficiary empowerment and redistributive justice.

As a final analysis, we reviewed any documentation with publicly available information on program outcomes, status updates, participant stories, and/or end-of-program reflections. Because of our interest in understanding community and participant participation in program planning or implementation, we reviewed program reports for mention of using advisory committees, external reviewers, and/or CBPR and PAR methods. From the original list of all programs, 12 program reports were available for review.

In total, of 151 identified GI programs, 105 programs had publicly available information for at least 6 of 9 program analysis criteria (Table 1) to be included in our analysis.

Table 1: Enumeration table of guaranteed income programs reviewed.

Analysis criteria publicly available, stated + shared	Percentage of total (<i>n</i> = 105)
Program start and end dates	96.2 %
Payment amounts/range	99.0 %
Frequency of payments	99.0 %
Cohort size/number of participants	97.1 %
Control and experimental groups	38.1 %
Information on project funder(s)	98.1 %
Information on project administrator(s)	96.2 %
Program/payment timeline	98.1 %
Participant eligibility requirements	90.5 %

The percentage of GI programs for which we were able to find the corresponding design or evaluation feature is shown.

2.1 Limitations

This review offers a snapshot in time. Many programs under review are new and offer incomplete public information. Some programs had websites and program names while others did not, and press releases and media articles sometimes contained conflicting information. While best efforts were made to correctly identify all accurate and consistent information, inconsistencies in reporting – particularly around program funding – means that some sources were omitted from the search. In addition, program details may have shifted as funding or administrative responsibilities changed after the program announcement. While GI program participant eligibility criteria is included in our review, evaluating if participation in a GI program protects or removes a participant’s ability to receive existing welfare was not assessed.

3 Results

3.1 U.S. Guaranteed Income Programs

First, we discuss characteristics of targeted or eligible populations. Next, we outline trends in program characteristics, including program implementation and administration as well as funding. Since 2016, at least 88 of the 105 GI programs (84 %) included in this study have started dispersing funds to participants or have concluded the program’s payment phase. In the results we cover all planned programs, not only those dispersing funds at the time of our writing.

3.2 Eligibility Requirements and Target Populations

We find that all programs have a local focus, drawing qualified individuals from a particular geography. Unlike federal programs that focus on individual-based qualifications regardless of location or family circumstances, most GI programs had eligibility criteria that were a mixture of “people-based”, “place-based”, “situation-based”, and “income-based” factors. This contrasts with intervention framing that would aim to test the efficacy of a more universal intervention approach that could be used across a variety of places, demographics, or situations. Of the 105 GI programs with available information for analysis (Supplementary Material), 95 had information available on program eligibility and target populations (Table 1). The majority of programs (62 out of 95 or 65.3 %) that reported this information focused on individuals regardless of household or family status; whereas 20 out of 95 (21.1 %) programs focused on household-level qualifications and 11 out of 95 (11.6 %) on family. Families and households are distinct in that multiple families could live within one household. In the case of households, only the household could apply and not individual families within the household. Even within these categories, some programs (2 out of 95 or 2.1 %) offer multiple eligibility qualifications. For example, the Paterson program based in New Jersey offers enrollment for both individuals and families, and a California-based Sonoma County program is open to individuals, households, and families. These two programs were not tallied in the overall count to prevent double-counting.

3.2.1 People-Based Criteria

Sixty-five of the 95 (68.4 %) programs include “people-based eligibility criteria”, defined by individual, household, or family level demographics. Examples of these demographics include: race/ethnicity, age or age groups (e.g. youth, seniors), languages spoken, and occupation. Several of the programs with people-based criteria have a notable preference for inclusion of socially disadvantaged people as a part of the qualifying criteria. Program design with such recipient criteria provides context for where local efforts anticipate they can improve conditions and motivate fundraising. At the same time, the legality of some “people-based” criteria have come under question. For example, the San Francisco-based Abundant Birth Project is facing an affirmative action lawsuit, for its focus on mothers of color (Californians for Equal Rights Foundation; Ruth Parker; and *Ellen Lee Zhou v. City and County of San Francisco*; Cohen 2023).

The majority of programs (39 of 95 or 41.1 %) included an age requirement with most of those (24 of 95 or 25.3 %) specifying qualifying applicants should be over the

age of 18, likely a restriction based on convenience of consenting legal age in the U.S. Two of the 95 (2.1 %) programs focused on applicants who are youth under age 18; 8 of the 95 (8.4 %) on applicants ages 18–24; and four of the 95 (4.2 %) programs focused on eligible applicants over the age of 50 (Supplementary Material).

Twelve of the 95 (12.6 %) programs focused on a participant's occupations for eligibility. For example, Creatives Rebuild New York Guaranteed Income for Artists as well as Transformational Support for Emerging Nashville-Based Artists & Young Black Creators Through Guaranteed Income both focused on artists, whereas Ithaca Guaranteed Income focused on caregivers. Thirteen of the 95 (13.7 %) programs offered GI based on parenthood and cohabitation status, for example the Black Resilience Fund (BRF) based in Portland, OR which offered GI for single parents. Eight of the 95 (8.4 %) programs focused on race-based applicant qualifications and two of the 95 (2.1 %) programs focused on language-based qualifications.

In some cases, programs would list applicant eligibility criteria, but also include a set of groups that were considered high priority service groups. Seven of the 95 (7.4 %) programs list applicant qualification priorities without making these qualifications mandatory. For example, the Trust Youth Initiative based in New York City, NY provides direct cash transfers to unhoused young adults, with priority given to Black, Indigenous, Latin/o/e/x, and Queer applicants.

3.2.2 Income-Based Criteria

Over half of the programs (51 of 95, 53.7 %) list income-based eligibility criteria based on the annual income of the individual, household, or family applicant. Fourteen of the 95 (14.7 %) programs base qualifications on some threshold of Area Median Income (AMI). For example, the Central Iowa Basic Income Pilot Project uses a household income of up to 60 % of AMI. In comparison, 13 of the 95 (13.7 %) programs use income thresholds. For example, the Abundant Birth Project based in San Francisco, CA requires that applicants have a household income of less than \$100,000 per year and the Coachella Immigrant Families Recovery Program also based in CA requires an applicant having earned less than \$75,000 or have a total household income below \$150,000 per year. The majority (22 out of 95 or 23.2 %) of income-based criteria are based on meeting a percentage of the federal poverty level. For example, Santa Fe Learn, Earn and Achieve Project (LEAP) requires applicants to be making less than 200 % of the federal poverty level (about \$34,000 for a family of two or \$52,000 for a family of four). It is possible that many programs have indirect income qualifications. For example, the Yolo County Basic Income (YOBI) program in California is only open to families within California Work Opportunity and Responsibility to Kids (CalWORKs), which itself has income qualifications; we categorized this as both income-based and situation-based.

3.2.3 Situation-Based Criteria

Sixty of 95 (63.2 %) programs have some form of “situation-based” eligibility criteria, or criteria for eligibility for inclusion into a GI program that is defined by life situations, transient events, or previous or current affiliations with churches, nonprofits, or other organizations. Examples of these external situations include: pregnancy, participation in another program, and the COVID-19 pandemic. Some programs are specifically designed for a narrow set of circumstances, such as My People’s Fund, a cash program sponsored by Dolly Parton and the Dollywood Foundation for families living in Sevier County whose homes were uninhabitable or were destroyed in the Smoky Mountain wildfires. Any family who lost their primary residence (renters and homeowners) due to the wildfires in Sevier County were eligible to receive aid. This example includes place-based, people-based, and situation-based criteria to be eligible for the GI program. Further, 16 of the 95 (16.8 %) programs listed living with a dependent as a qualification. For example, the Coachella Immigrant Families Recovery Program requires households to have at least one child living in the home during the year 2021 and the household has to have been excluded from receiving any federal COVID-19 relief funds in 2020 and 2021.

Another eight of 95 (8.4 %) programs focused on formerly incarcerated people or participants explicitly impacted by the carceral system. For example, the Houston Guaranteed Income program based in Texas gave priority to applicants experiencing homelessness, involved with the justice system, or who have health concerns or other impediments causing them to struggle with income inequality and employment instability. In comparison, seven of 95 (7.4 %) programs focused on pregnant mothers. For example, the Abundant Birth Project based in San Francisco focused on pregnant Black or Pacific Islander mothers. Only nine of 95 (9.5 %) programs noted that proof of citizenship was not required. For example, the International Institute of Minnesota’s Guaranteed Income Program for Refugees offered a GI program for participants with refugee status or Special Immigrant Visa or Humanitarian Parole status. Relatedly, six of 95 (6.3 %) programs focused on unhoused applicants, for example the Trust Youth Initiative based in New York City which provides direct cash transfers to adult youths experiencing homelessness. Further, two of 95 (2.1 %) programs focus on foster youth and youth transitioning out of foster care; for example, the South San Francisco Guaranteed Income Program.

Many programs that began during or after 2020 were created to in part reduce the impact of the ongoing COVID-19 pandemic. As such, their COVID-19 related eligibility criteria are considered to be situation-based. Fourteen of the 95 (14.7 %) programs specifically ask for demonstration of hardship due to the pandemic as an explicit part of the application or eligibility requirements (Supplementary Material). Let’s Go DMV accepted applications for hospitality workers in the Washington, DC

region who lost their job during the COVID-19 pandemic. The Peoples Prosperity Guaranteed Income Demonstration Pilot noted additional implications of COVID-19 as qualifying situations, such as being laid off, having work hours reduced, being unable to work, losing childcare, closing business, expanding and defining the health and welfare impacts of the pandemic. We will address the use of COVID-19 federal relief dollars for GI programming in later sections.

None of the programs explicitly focused on religious affiliations such as churches, synagogues, or mosques. However, three of 95 programs (3.2 %) were funded and administered by faith-based organizations but did not require participants to be religiously affiliated or join their organization to be considered for eligibility. The National Council of Jewish Women administers two programs, and the Jewish Family Services of San Diego provided administrative support for the San Diego for Every Child program. In comparison, 24 of 95 (25.3 %) programs were affiliated with nonprofit organizations such as United Way, the YMCA, and Miracle Messages. Some of these programs were organized as internal and closed programs for participants already interacting with the organization.

3.2.4 Place-Based Criteria

Eighty of 95 (84.2 %) programs have some form of place-based eligibility criteria defined by a place of residence. In some cases, beneficiaries are chosen at random within a narrowly defined geographic space, often specific zip codes, city district, neighborhood, city, or county. A cogent example is The 37,208 Demonstration in North Nashville, which describes historical urban planning practices that led to severe disinvestment and disruption and to today's extreme poverty and social unrest (Moving Nashville Forward 2021). Similarly, a place-based GI program is currently being proposed to give residents of the 37,208 zip code resources to start overcoming these structural obstacles. Of these programs, the majority focus on a particular city (42 of 95 or 44.2 % of programs); county (15 of 95, or 15.8 % of programs); neighborhood (10.5 %); zip code (8.4 %); state (3.2 % of); region (2.1 %); or school district (2.1 %) (Supplementary Material).

3.3 Program Design

While each program contains its own specifications for who is considered eligible to apply for GI program funds, GI program design tends to follow a similar structure: a beneficiary receives some amount of cash funds in a predetermined reward amount that can be spent on whatever they want. To be included in this program review, GI programs must also offer beneficiaries multiple (more than one) installment of cash

funds, which must be ‘no-strings-attached’. Differences among GI programs largely occurred based on the amount given per transaction, frequency of transactions, and the duration of the payment phase of the program. GI programs also differed in their evaluation designs, including whether or not there were additional experimental, or control/comparison groups included.

3.3.1 Amount of Cash Given per Transaction

Of the 105 programs with available information for analysis, 104 of 105 (99.0 %) had publicly available information about distribution amounts to participants (Supplementary Material).

The majority of programs (84 of 104 or 80.8 %) gave all participants the same fixed amount of cash. The other 20 (19.2 %) programs provided varying amounts of cash to eligible participants enrolled in the program, with the amount determined by different criteria. The Compton Pledge project determined how much an individual would receive based on how many children lived in the household, while Chelsea Eats considered how many total people were living in the household. Similarly, the needs-based PHL Housing Plus provided varying amounts of funding to households by calculating the amount needed to close the gap between the housing costs of what they could afford – generally 30 % of the household’s income – and their actual housing costs.

Of these 104 programs, the majority (84 of 104 or 80.8 %) gave participants the same amount of cash. In this sense, GI programming in the U.S. is largely not offering a Basic Income tailored to individual needs. This contrasts with the minority of GI programs like the Yolo County Basic Income program that offers on average \$1,289 to participants with a range of \$600–\$2,449 – the upper range being an outlier for a very large family.

Half (42 of 84 or 50.5 %) of programs provided a fixed cash stipend in the range of \$450 to \$550 (Figure 1). The median and mode were both \$500 as 41 of 149 (27.5 %) programs provided \$500 in cash, while the mean stipend amount was \$625 with a standard deviation of \$267.77.

3.3.2 Frequency of Payments

Of the 105 programs with available information for analysis (Supplementary Material), 104 of 105 (99.0 %) had publicly available information about cash distribution frequency. Of the 104 programs, most (96 or 92.3 %) provided monthly payments. Only 2 of 104 (1.9 %) offered biweekly payments; for example, the Maryland-based College Park 2021 ARPA Financial Assistance Program for Individuals and Families. Only one program offered quarterly payments: the San Antonio Basic

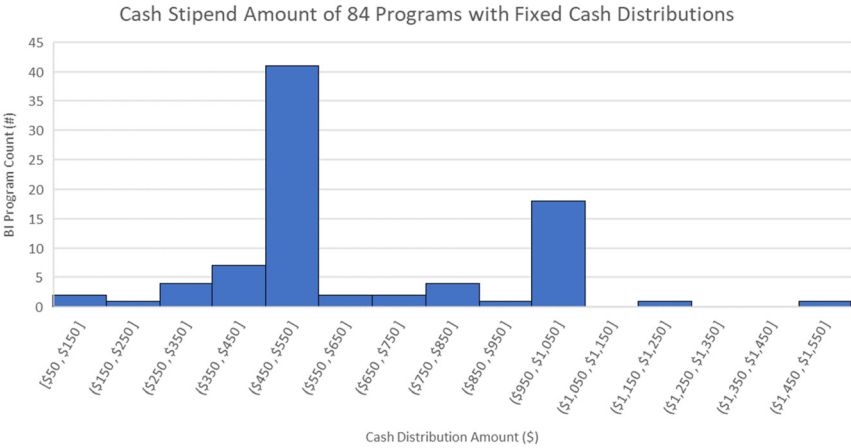


Figure 1: A histogram of the amount of cash given per transaction for the 84 GI programs that offered a monthly fixed cash stipend amount. X-axis is Cash Stipend Amount in USD. Y-axis is the GI program count. Mean: \$625, Median: \$500, Mode: \$500, Standard Deviation: \$267.77.

Income Pilot in Texas. Four of 104 (3.8 %) programs provided varying frequencies and amounts. For example, the LIFT Family Goal Fund included four sites across the country (Los Angeles, Chicago, New York City, and Washington, DC) and provided each family with an initial payment of either \$1,400 or \$1,950 after which families receive \$150 every three months (\$50 monthly).

3.3.3 Duration of Payment Phase

Of the 105 programs with available information for analysis (Supplementary Material), 102 of 105 (97.1 %) had publicly available information about how long the GI program would provide cash transactions to eligible participants enrolled in the program. The payment duration is calculated based on a single individual receiving funds and is not necessarily the same as the total project duration. For example, a program with two consecutive cohorts that each received cash funds for 12 months will have a payment duration of 12 months. Of these 102 programs, the majority of programs (37 of 102 or 36.3 %) offer funding for one year. Next most common was a two-year program (23 of 102 or 22.5 %). Only 6 of 102 (5.9 %) programs pledged funding for fewer than eight months; and 12 of 102 (11.8 %) pledged funding for more than two years, with the longest running programs offering 60 months of payments.

3.3.4 Cohort Size

The average cohort size was 400 participants with a range from five to 5,000. The smallest cohort was hosted by Rochester New York's Artist Grant Program and included five participants receiving \$200 monthly, followed by the Los Angeles, California NCJWLA Guaranteed Income for Caregivers program with 12 participants receiving \$100 monthly. The largest programs included the Chicago Resilient Communities Pilot with 5,000 participants each receiving \$500 monthly, followed by Cook County Promise Guaranteed Income with 3,250 participants also receiving \$500 monthly. Most programs included more than 100 participants. There was no clear relationship between funding amount and number of participants.

3.3.5 Program Evaluation

Of the programs evaluated, only 29 of 105 (27.6 %) were presumed to have concluded at the time of writing. Of these 29 programs, 12 (41.4 %) have publicly available reports outlining measures of success, participant stories, research and program evaluation methods, and findings. Programs that have shared publicly available findings have focused on health and economic outcomes from GI programing. Some examples found include Louisville's YALift! program which interviewed participants monthly on six domains like health, housing, employment and personal finances, as well as Santa Clara County's Baby's First Years program which regularly publishes study findings spanning public health topics like reproductive health, child brain activity, and education outcomes.

Three of the 12 (16.7 %) publicly available GI program reports mention having some form of advisory committee involved in the design of the evaluation and interpretation of results. Thrive East of the River based in Washington, DC (Bramhall 2022) listed the following advisory committee representatives "THRIVE coordinators, other key implementation staff, Urban and LISC DC representatives, and external project advisors met on a near-monthly basis to discuss findings from the feedback loop memos and any action steps required in response" (p. 5). Notably, such advisory roles did not explicitly include program participants. In comparison, the Transition-Aged Youth Basic Income Pilot included a "Children, Seniors and Families Committee" who worked closely with the project on design and evaluation data analysis. New Mexico Appleseed designed survey and interview questions with input from school staff and evaluation experts. However, New Mexico Appleseed reflected on their external program advisors and recommended "developing [survey] questions in advance with input from the community to ensure they make sense, are understandable, and provide actionable information" (Appleseed 2021, p. 19). Their program evaluation report (2021, p. 19) also includes the following recommendation:

A best practice when developing a CT program, particularly one with conditionality, is to involve the community that is the focus of the program in the pilot design. Depending on the population and time available to design the program, this can include focus groups, interviews, or a full design team that includes people with lived experience. If it is possible to create a design team prior to the intervention, include those who meet participant qualifications or have lived experience. School employees cannot be proxies for the students' perspectives when it comes to intervention design, in particular when creating requirements to receive money for basic needs. Participants have a perspective that must be considered when designing an intervention like this. The use of CCTs may have a continued role to play in cash transfers, but the development of conditions should generally incorporate meaningful input from the affected community and have a demonstrable benefit.

In general, MGI-funded studies emphasized a mixture of economic, CD, and public-health focused evaluations. For example, the Stockton-based evaluation focused on measuring income volatility, lifestyle affordability, physical and mental health, and employment (West and Castro 2023). Though not published at the time of this study, and therefore not counted in the 12 evaluations, Stockton's evaluation plan included sequential participatory action research (PAR) methodology with the following components: Phase 1: a community-facing dashboard to document participant stories and findings from focus groups with stakeholders not enrolled in the intervention, Phase 2: a community led process of developing an evidence-based policymaking agenda to inform the National League of Cities Basic Income Toolkit (Martin-West et al. 2019, p. 4). This makes the Stockton SEED program the only GI program in our study to explicitly include PAR or CBPR methodologies.

Even where programs did not build PAR or CD into their program or evaluation, lessons learned are framed in CD methods. For example, Thrive East of the River in Washington, DC recommends "methods like standing up a community advisory board to bring the perspectives of participants directly into a study's design and implementation can help evaluation funders and implementers better weigh the importance of what they seek to learn against the burden that learning often places on study participants" (Bramhall 2022, p. 64). This recommendation is also echoed by Magnolia Mother's Trust in Jackson, Mississippi recommendation to engage with program participants (Moore et al. 2022; Onifade et al. 2023).

3.4 Administration and Funding

3.4.1 Program Administrators

Publicly available information on the program's implementation or administrative partner was available for 101 of 105 (96.2 %) GI programs. The roles of these administrative partners varied. Some programs had several nonprofits listed as

program administrators, each specializing in one task within the GI program. For example, the Minneapolis Guaranteed Income Program is being led by staff from the City of Minneapolis, with additional support on financial education from a local Royal Credit Union and the Federal Reserve Bank of Minneapolis to lead the research and results investigation. Some programs operate with a steering committee; while others are run through government agencies like the local Department of Human Services (Arlington’s Guarantee in Arlington County, VA). Nonprofit organizations like UpTogether (formerly known as Family Independence Initiative) specialize in the technical administration of GI programs, which allows for their programs to be co-piloted by another organization (such as the Trust and Invest Collaborative (TIC) program in Boston and Cambridge, MA).

Many (42 of 149 or 28.2%) reporting programs included in this review were affiliated with Mayors for A Guaranteed Income (MGI), thus adding emphasis to city-level government administration of GI programs. While MGI lists over 100 mayors who have pledged to create a program, not all MGI-listed programs were included in this study due to lack of publicly available information. Ultimately, only 30 of the 42 (71.4 %) MGI programs had sufficient program information to warrant inclusion in the current study. While we identify MGI as a driving force behind GI programming since its inception, the lack of current data means we are limited in our assessment of how MGI programs are being administered and implemented. Based on their annual report from 2020 to 2021, pilots ranged in cash amounts delivered, number of participants, program administrators and funders (Mayors for a Guaranteed Income 2021a, 2021b).

Despite the media attention to city-level administration, we find that the majority of program administrators were nonprofits (Table 2) followed by municipal governments. Such a focus administratively speaks to the longer trend of relying on local actors and place-based programming for poverty alleviation in the U.S. (Fellowes and Rowe 2004).

Table 2: Types of GI program administrators.

	Number of programs	Percentage of total
Municipal government	22	22 %
Nonprofit organization(s) or private foundations	55	56 %
Public-private collaboration	20	20 %
Research universities	2	2 %
Total	99	100 %

A breakdown of the types of GI program administrators. Column headers denote the number of programs and the percentage of the overall total of $n = 99$ programs with publicly available information provided about program administrators. Four categories (rows) for administrator types are: municipal government, nonprofit organization(s) or private foundations, public-private collaboration, and research universities.

3.4.2 Funding Providers

Of the 105 programs with available information for analysis (Supplementary Material), 103 (98.1 %) had publicly available information about funders. There were six major categories of funding for these GI programs:

- (1) Private GI program funders such as Fund for Guaranteed Income (F4GI) or Mayors for Guaranteed Income (MGI).
- (2) Public federal funds designated to local governments for COVID-19 relief.
- (3) Public government funds from approved county department, state, or city coffers, or from a city mayor's budget.
- (4) Private donations via nonprofits, crowdfunding platforms, and foundations.
- (5) Private large-scale philanthropic donations from individuals, corporate sponsorship, or philanthropy coalitions.
- (6) University or federal research grants.

Almost half of the programs were privately funded (51 of 103 or 49.5 % drew from funding categories, 1, 4 and 5) whereas 41 of 103 (39.8 %) programs received a mix of private and public funding sources, and 11 of 103 (10.7 %) were 100 % publicly funded. The majority of publicly funded programs received aid from COVID-19 federal relief dollars, while others used revenue from local sales tax dollars or a public office such as the City's Office of the Mayor. At least 20 of 103 (19.4 %) cities used American Rescue Plan Act (ARPA) funds to either partially or fully finance their GI program, while two programs reported using Coronavirus Aid, Recovery, and Economic Security (CARES) Act funds to partially or completely cover the costs of their programs. MGI was one of the most common associated funders (30 of 103 or 29.1 %). This effort is supplemented by large philanthropic donations from Silicon Valley technology leaders contributing to and through the 501(c) (4) Humanity Forward (Carter, Garcetti, and Tubbs 2021); similarly, former Twitter social media platform owner Jack Dorsey donated more than \$15 million as of December 2020 (Konish 2020). MGI is continuing to grow in number, with more than 63 city mayors pledged to start a GI program at the end of 2021, 15 of which have already begun dispersing funds (Mayors for a Guaranteed Income 2021a, 2021b). Programs with mixes of private and public funding sometimes also had more than two funding sources. For example, LA County's Breathe program has roughly 23 program partners, among which are private foundations, city and county officials, the University of Pennsylvania, and various County departments. In sum, while there is a large cohort of programs that rely on centralized, organized funding tied to standardized program designs and evaluations, the plurality of programs draw from community-based funding sources as well as federal and local public funds to create GI programs.

4 Discussion

Our review aims to bring the multiplicity of GI pilot programs into focus. We anticipate that the outcomes resulting from such pilots will influence future program design and evaluation methods, theory, and practice. We hope that future studies build from our appendix of programs, and that existing and future programs will add greater detail about fiscal and administrative responsibilities when sharing program details. Such transparency is key to understanding how programs operate, what kind of operational goals they espouse (explicitly or implicitly), and what impact they have on multiple levels (individual, family, social networks, neighborhoods, and federal policy).

4.1 Social Welfare and GI in the United States

Though GI is often contrasted with social welfare programming in the U.S. context, our review highlights complementarities. For example, we find that over half the GI pilots in this review emphasize income-based qualifications for participants, aligning GI with the broader arc of federal poverty alleviation programming. Several programs also explicitly combine social welfare programming with GI for a “yes, and” approach to poverty alleviation. This is exhibited by programs like the Yolo Basic Income program which pairs CalWORKs recipient families in the Housing Support Program with monthly cash stipends to boost them above the California poverty line. Another example is the Preserving Our Diversity (POD) program in Santa Monica, eligible for seniors who are long-term residents of rent-controlled apartments in the city. This program assures applicants that SSI benefits will not be affected in the program FAQs, reflecting a broader concern as pilot programs navigate how to ensure that participants will not lose other benefits through enrollment, including health insurance and tax credits. Nesting GI within other welfare supports is practical. When GI is treated as countable income, participants may face a “benefits cliff” due to the sudden loss or reduction in other supports. This potential cliff is a painful psychological obstacle for would-be GI participants who have already sunk energy into lengthy applications, long wait times, and documentation requests in the process to access traditional welfare programs.

4.2 State-level Variance

Making way for GI to further complement existing programming, in 2023, the state of California updated exemption and eligibility for GI participants in the California

Work Opportunity and Responsibility to Kids (CalWORKs) and CalFresh programs (Welfare & Institutions Code, WIC, Section 18997, Assembly Bill 120). This welcoming policy environment likely contributes to California's position as a frontrunner in GI policy formation. In support, we find that California hosts the most GI projects of any state.

In contrast, the policy environment in other states is at times antagonistic to GI programing, limiting or altogether preventing GI programs. Relatedly, some states also divert TANF seekers or provide lower TANF distributions amounts in relation to the cost of living (Knowles et al. 2023), practices that indicate less overall support for poverty alleviation programming, and GI by extension. Future research should explore how these state-level factors interface with GI program distribution as well as the creation and alleviation of poverty.

Our results highlight that pilot designers are sensitive to these concerns and differences across each state. Relatedly, variance across states in cost of living influences poverty alleviation more broadly. Program designers must consider whether the amount of GI distribution is enough to exert an impact in each context. Half of the programs provided a fixed cash stipend in the range of \$450 to \$550 (Figure 1), but for California, a state with a cost of living that is 30 % higher than the national average, the median distribution amount is \$800, roughly 35 % higher than the average GI pilot distribution and in keeping with the increased cost of living (Supplementary Material).

4.3 Filling the Gaps

Our review documents where GI fills gaps in more traditional poverty alleviation efforts. We highlight where GI programs are designed for specific populations, including people experiencing homelessness, those returning to community from prison, foster youth, and those affected by severe weather events. This focus suggests GI is being used to fill gaps in the existing social welfare net. Further, we show that the majority of programs do not require proof of citizenship, indicating that GI programming takes a broader approach to poverty alleviation than most federal and state welfare programming. Alongside governmental programs, faith-based groups have a long history of leading poverty alleviation efforts in the U.S. context (Tarpeh and Hustedde 2021; Winkler 2008). Yet, our findings show that few GI programs are affiliated with faith-based organizations-perhaps indicating room to engage in the future. In relation to the traditional faith-based and governmental approaches to poverty alleviation, the creation of GI programs that are specific to narrowly-defined

populations highlights where communities have rallied for causes and people they consider worthy of investment.

4.4 COVID-19 Impacts

Notably, COVID-19 created a gap in services and support that GI programming sought to fill. Our review shows that COVID-19-related ARPA and public health funding spurred the creation of new GI programs since 2020. This finding of a recent influx of public health funding and evaluation of GI is echoed in other studies (Doussard 2024a, 2024b). Our review questions how the COVID-19 funding shifts focus from earlier economic-based evaluations (e.g. East and Page 2019; East et al. 2023; Hum and Simpson 1993) toward more public health framing (e.g. McIntyre et al. 2016). More broadly, pandemic-related GI programs employed GI as an emergency response tool, a less-known format for GI programs, and one that highlights GI's flexible application. The lessons from pandemic-era GI studies will likely inform the future of both poverty alleviation and health equity.

4.5 Funding Sways GI Programming

In another example of how centralized funding shaped program design and reported outcomes, OpenAI Chief Executive Officer and Founder Sam Altman launched the multi-site, multi-year OpenResearch GI program platform in 2016, noting, "I'm fairly confident that at some point in the future, as technology continues to eliminate traditional jobs and massive new wealth gets created, we're going to see some version of this at a national scale" (Holder and Ghaffary 2024). OpenAI's funding and evaluation framework aim to answer questions that employers have about what impact a guaranteed payday might have on the workforce. Yet, this vision of GI is distinct from typical poverty alleviation programs or health promoting efforts devised in disciplines like CD or public health.

More generally, we find that private dollars are most frequently used to support GI programs and that nonprofits are the most frequent program administrators. Currently, GI programs largely operate outside of existing welfare and government structures, though MGI and the growing number municipal governments involved in program administration suggest GI programming could feasibly join other large scale government welfare programs in the future. Indeed, policy change is a major evaluation thrust for many GI programs.

4.6 Variation Across Programs

Our review also draws attention to how variations across programs and evaluations pose a challenge for communicating the impacts of GI. The amount of cash, program duration, participant eligibility criteria, and cohort size can all shape GI effectiveness. Program duration will also impact outcomes as participants may receive funding only for 6 months or less, or for several years. As international studies have shown, evaluations can require decades to observe the longer-term intergenerational and place-based impacts of GI, when they exist (Papanastasiou, Papatheodorou, and Petmesidou 2016). Programmatic differences in participant qualifications will also require a nuanced narrative, rather than a single headline for GI. For example, could the Columbia Life Improvement Monetary Boost (CLIMB) program focused on serving single fathers be transferable to another participant group and achieve similar outcomes? Cohort size is also critical to interpreting the results. Cohorts that are too small may yield null or imprecise results when in fact program impacts exist, while cohorts that are large may swamp nuanced findings from smaller evaluations. While some organizations, like the Shriver Center on Poverty Law (2024), claim that “we know guaranteed income works” – others argue for more evidence of the impacts, not only on participants, but on local economies. Researchers will need to be mindful of their positionality as brokers of this information, especially given a divided public (Richards and Steiger 2021).

The multiple fields involved in GI help to provide a complete picture of its role and effectiveness. Economists may evaluate the ability of families to financially save to navigate emergencies (e.g. West and Castro 2023) while drawing on funding from groups like the MGI. Public health literature argues success in terms of improving mental and physical health (e.g. Gibson, Hearty, and Craig 2020) while drawing funding from public health dollars, like ARPA and COVID-19 relief. Both approaches may be – but may not always be – complementary to the CD-focused poverty alleviation framework with its reliance on CBPR. Purely quantitative studies may miss stories about spending more time with children or having the funds to fix up a broken down car and thus get to a better paying job across town. Some studies evaluating impacts across a range of outcomes aim to bridge this divide. For example, Baby’s First Years includes qualitative questions about feelings of pride while documenting early childhood neural development and household income changes. Different audiences will weigh different pieces of evidence differently, with the potential to create a confusing cacophony or a holistic picture.

Unlike the challenges of variance across programs, we caution that uniform approaches may also limit our understanding of GI programming. For example, we

show that over 90 % (96 of 104) of programs reviewed focus on monthly distributions. The monthly approach to distribution is important given findings from a 12-year GI experiment in Kenya that found that lump sum payments had similar, if not larger, impacts—using an economic framing that emphasized how GI could operate as a microloan for starting small businesses (Banerjee et al. 2023). More evidence is needed to better understand different disbursement strategies in the U.S. context and across a range of outcomes.

4.7 Community Participation in GI Planning

This review also aims to center the role of GI participants in program design and evaluation. First, it is important to recall a limitation of this study: many programs had either just started or made limited information available. Regardless, our findings show that of the 12 programs with evaluation information, there were very few that listed community advisors, participant feedback, or CBPR or PAR methodologies as part of their program design. The only program that reported using PAR methods specifically was the Stockton SEED program, a catalyst for the revival of GI programs in the American context through the MGI network. Because civil rights activist groups striving for racial justice have called for GI, the movement is conceptualized as a policy by the people, for the people (Mayors for a Guaranteed Income 2021a, 2021b). To achieve this goal of justice, it is critical that GI programs strive to include participant and local resident voice at all stages of a GI program.

Our review draws attention to three programs beyond SEED that utilized some form of advisory or steering committee to help throughout the GI program development and implementation processes. Nashville's The 37,208 Demonstration in partnership with the Nashville Economic Justice Alliance (NEJA) held "community information sessions and focus groups in order to educate the community about the 37,208 Demonstration and allow community input to shape the project" (Moving Nashville Forward 2021). Such inclusion is important because GI programs are also often designed for specific populations. This focus on specific and narrowly defined groups suggests GI is being used to fill gaps in the existing social welfare and charity work, as described above. Unique circumstances also highlight that there is room to grow our collective knowledge around the specific challenges these individuals and families are facing and the ways in which GI might be designed to better meet these challenges and fill the noted gaps in traditional welfare programming. These aims can be achieved through more widespread utilization of community engagement methods between program organizers and local residents, potential or would-be participants, and/or current and former GI program participants. This call to action

should be of concern for practitioners and researchers seeking to incorporate community voice into traditional top-down, expert-driven, centralized, and prescriptive policies.

Our findings draw attention to how GI is aimed at distributive justice, but not yet procedural justice. Thus, at the same time that GI seeks to empower participants with dependable, flexible cash to make funding decisions to navigate the unique multifaceted complications of living in poverty – we find that current program designs and evaluations do not always empower participants to engage in the remaking of U.S. poverty alleviation programming. Where PAR can be used early in program design, GI participants can potentially help better define the many complex theories of change associated with GI or design programs to more effectively meet desired outcomes. PAR could practically and easily be promoted as Standard Operating Procedure by the many funding networks like MGI that help motivate GI pilots and standardize evaluations across studies (Doussard 2024b).

5 Conclusions

Our review shows the most recent GI programs in the United States are flexibly designed to address poverty and its sequelae for a wide range of often narrowly-defined populations like people returning to community from prison in a specific county, pregnant Black individuals in a city, or those facing housing challenges following an environmental disaster. The challenges people face are shaped by interlocking systems of power and oppression (e.g. racism, sexism, ableism). The wide array of motivations for providing cash assistance to specific populations in need suggest GI is responding to the intersectional nature of poverty and flexibly filling gaps in the larger social welfare system.

At the same time, we expect this suite of GI programs will be challenged to show large impacts on quantitative measures; most programs provide monthly stipends in the range of \$450–\$500 over a one to two year period to people facing significant financial needs in the context of layered social and economic disadvantage. This amount cannot be expected to cover living expenses, and even two years may not provide sufficient time to stabilize *and* achieve the changes needed to sustain any benefits observed while receiving GI. There is also likely regional variation in how far a participant can stretch those extra few hundred dollars a month.

This is all important context to remember as researchers, practitioners, and policymakers articulate the role, effectiveness, and future of GI in the United States. As GI programs continue to emerge and coalesce, researchers play a critical role in the collective ownership of the GI “movement” in sensemaking across the many differing eligibility criteria, local contexts, funders, program designs, and evaluation

findings. Any given study or summation will necessarily discuss GI within the deeper history of poverty alleviation in the U.S. context to determine if a course correction is needed to address growing income inequality (Trisi 2024). With critical reflection on where we have been, we can begin to anticipate the future of GI programming in the context of US anti-poverty policy.

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