

# DIRECT CASH TRANSFERS (DCT) BEST PRACTICES

*A report by Impact Charitable*

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## REPORT HIGHLIGHTS

- RAPID LIT REVIEW
- 18 QUALITATIVE INTERVIEWS WITH DCT PRACTITIONERS
- ACTIONABLE BEST PRACTICES IN 10 CATEGORIES

*If you have questions about this report or would like to work with a thought partner in direct cash programming, please email us at [info@impactcharitable.org](mailto:info@impactcharitable.org).*

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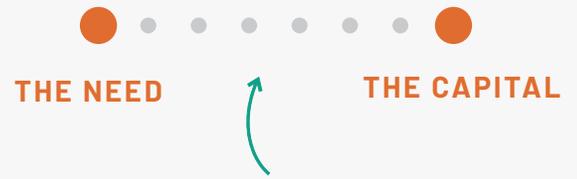
*There is a growing body of evidence to suggest that one of the most effective ways to help people move toward economic security is to **provide direct cash**.*

*Organizations considering direct cash transfers (DCT) can use these findings to guide their recruiting, programming, monitoring and evaluation.*

# BACKGROUND

**Impact Charitable**, a nonprofit and donor-advised fund, offers a suite of philanthropic tools and capital-ready investment opportunities. Impact Charitable recognizes the gaps between traditional investing and traditional philanthropy and the solutions needed to solve complex problems.

The organization is dedicated to helping fill these capital gaps by collaborating with public and private funders who want to mobilize their assets into communities in creative and impactful ways.



 [WWW.IMPACTCHARITABLE.ORG](http://WWW.IMPACTCHARITABLE.ORG)



APRIL 2020 .....

## LEFT BEHIND WORKERS FUND

*Direct cash payments for Coloradans affected by Covid-19*

In April 2020, Impact Charitable launched the Left Behind Workers Fund (LBWF) to provide direct cash payments to those overlooked by federal aid programs in Colorado. The fund has since worked with 30 community-based organizations to distribute:

**\$25M**  
total payments made

**\$1,000**  
per direct transfer

**10,000**  
families assisted

???? 2021

## AIDKIT, LLC

### *Direct cash transfer screening, payment processing & data management*

As a response to launching the LBWF, Impact Charitable built AidKit LLC, a direct cash transfer screening, payment processing, and data management platform. The platform offers the following features:

- AUTOMATED STAKEHOLDER (BOTH APPLICANT AND CHANNEL PARTNERS) ENGAGEMENT AND COMMUNICATION
- FULLY CONFIGURABLE DIRECT CASH ASSISTANCE (DCA) APPLICATIONS
- INTEGRATED DOCUMENT VISUALIZATION AND COLLECTION
- BUILT-IN E-SIGNATURES

AidKit is currently supporting five different assistance programs in Colorado and Utah including the Left Behind Workers Fund, the Denver Basic Income Project, and potentially the Beyond Reentry Initiative.

Leveraging their 501c(3) status, fund management infrastructure, and partnership with AidKit, Impact Charitable has developed a unique capability to develop and execute direct cash/rental assistance programs.

APRIL 2021

## DIRECT CASH TRANSFERS STUDY

### *Finding and sharing opportunities to fill a gap for underserved communities in Colorado*

In April 2021, Impact Charitable initiated a study to proactively identify some of the most pressing opportunities to address the economic insecurity faced by underserved communities in Colorado with direct cash transfers (DCT). The first step in this process was to identify the design, best practices, lessons learned, and partnerships that have made other direct cash transfer models successful elsewhere in the country.

This report describes those findings.

# WHY DIRECT CASH?

*There is a long history demonstrating how large-scale cash assistance programs in the U.S have created positive outcomes for individuals.*

Using 30 years of data, researchers Bastian and Jones concluded that Earned Income Tax Credit is one of the least expensive anti-poverty programs in the U.S.

Founded in 1982, the Alaskan Permanent Fund Dividend pays a yearly dividend of around \$1,600 to state residents. There has been no evidence of a decrease in labor market participation.

The Eastern Band of Cherokee Basic Income, started in 1996, provides \$500 plus per person per year and has shown many positive effects like reduced behavioral and emotional problems in children and less depression, anxiety, and alcohol dependence in adults.

*Since we know that cash transfers don't incentivize people not to work or encourage spending more on "sin" goods, a new DCT initiative should consider what outcomes it seeks to achieve and what contribution it can have on the larger national conversation around cash transfers.*

# METHODOLOGY

*To identify DCT best practices, we performed a rapid literature review and conducted qualitative interviews with individuals from organizations who have designed, advised, assessed, implemented, advocated for or funded other DCT programs in the U.S.*



Distribute cash directly to the end beneficiary



Are based within the United States



We prioritized reviewing literature and interviewing direct cash transfer (DCT) programs that meet the following criteria.



Are unrestricted and have no limitations on how money can be used by recipients



Are targeted to serve a specific population in a time of crisis or life transition



Are relevant to the needs of certain populations or aligned with funders in Colorado

For a complete list of research questions, see [Appendix A](#).

## STEP 1: LIT REVIEW

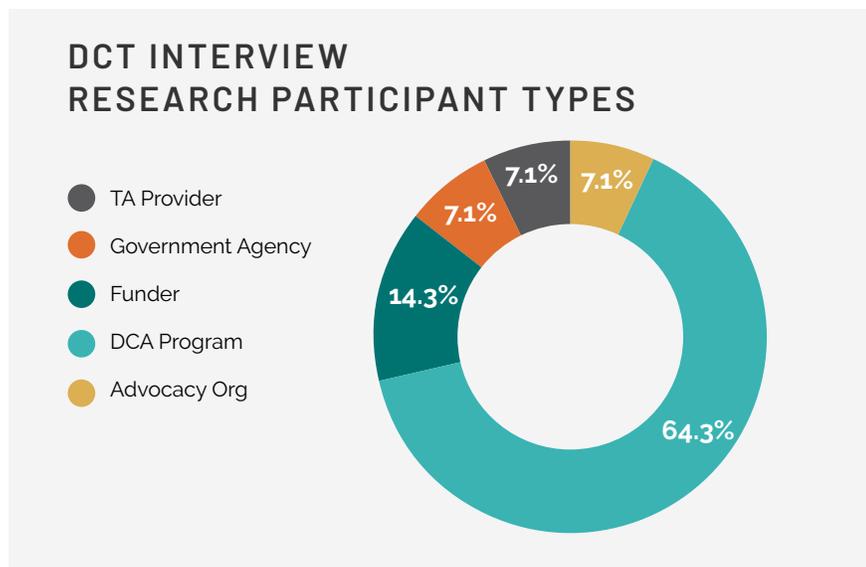
The rapid literature review focused on the evidence from other direct cash transfer (DCT) studies, case studies of other DCT programs, and general principles of direct cash transfers.

We focused our research on literature that described both the general principles of DCT as well as the impact on specific target populations. Roughly 70 articles were identified and about 40 were reviewed for trends and themes that could reveal best practices outlined in the research questions. The remaining articles proved to be irrelevant as the research progressed.

### TYPES OF LIT REVIEWED

- ACADEMIC STUDIES IN REPUTABLE JOURNALS
- PROGRAM EVALUATIONS PUBLISHED BY INDIVIDUAL ORGANIZATIONS
- DCT PROGRAM WEBSITES
- PRESS RELEASES
- OPINION ARTICLES

## STEP 2: INTERVIEWS



We then conducted semi-structured interviews with 18 individuals from 13 organizations working on DCTs. The vast majority were organizations that have implemented a DCT program. See the chart to the left for the breakdown of other types of research participants.

For a complete list of interviewees, see [Appendix B](#).

The interviewees were sourced through our literature review, the Guaranteed Income Community of Practice membership directory, and advocacy organizations that track current and ongoing pilots, like the Stanford Basic Income Lab and Jain Family Institute.

In addition, we used a snowball sampling technique in which each interviewee was asked to help identify and connect us with other research subjects.

Each interview was 45 minutes in length and conducted over Zoom. The audio of all interviewees was recorded and later transcribed with consent from interviewees.

### INTERVIEW METHODS

- 18 INDIVIDUALS FROM 13 ORGANIZATIONS
- 45 MINUTES IN LENGTH
- CONDUCTED OVER ZOOM
- INTERVIEWS RECORDED & TRANSCRIBED (WITH CONSENT)
- DEDUCTIVE CODING INTO 10 CATEGORIES

## STEP 3: CODING

To analyze the interviews, we utilized a deductive coding approach whereby direct quotes from interviews were selected and coded according to fixed categories.

1. PRINCIPLES & OBJECTIVES
2. SOURCING
3. ENROLLMENT
4. PAYMENT MECHANISM
5. FREQUENCY
6. DURATION
7. AMOUNT
8. SUPPORT
9. MONITORING & EVALUATION
10. RISKS

# FINDINGS

*Based on our interviews, we identified 10 key areas of focus for DCT best practices.*

## #1 PRINCIPLES & OBJECTIVES

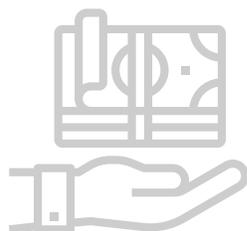
*Each DCT should first align with its core principles and objectives for implementing the program.*

There are many things we still do not know about how best DCTs can function. Pilots play a vital role in answering questions like:

- How much money should an individual receive?
- How often should cash be disbursed?
- What sort of infrastructure is needed to effectively distribute cash?
- What other long-term effects on education, criminal justice involvement, etc. can cash transfers have?
- What are the best programs to pair with cash transfers?

To decide what to test, it is imperative that the community be involved in the design process. DCT program designers should practice **human-centered design** to reveal insights about day-to-day thoughts, feelings, and behaviors of the people they seek to serve. These insights should determine the amount, duration, and frequency at which people are provided cash payments. They should also address any potential risks, barriers to entry, and whether additional programmatic support is needed.

There are several potential components of a cash transfer program. Designers of a DCT program must decide which of the components below are needed to achieve their specific objectives and which align best with the program's guiding principles.



ONE-TIME OR ONGOING?

TARGETED OR UNIVERSAL?

UNCONDITIONAL OR CONDITIONAL?

UNRESTRICTED OR RESTRICTED?

## ONE-TIME OR ONGOING

DCTs that are **one-time cash transfers** play a critical role in mitigating crises and providing emergency relief.

While **on-going cash transfers** may create the same relief, they also aim to provide people with financial stability and the opportunity for economic advancement. Predictable, consistent cash payments provide psychological safety that allows recipients to make decisions about their future. It helps to combat a scarcity mindset—a well-studied psychological concept which explains that a lack of resources causes individuals to overvalue immediate benefits at the expense of future ones.

*One-time and ongoing cash transfers share a similar philosophy that we should trust people to make decisions for themselves, remove barriers for people to access support, and reduce costs to administer the support.*

## TARGETED OR UNIVERSAL

A **targeted DCT program** limits participation to those who meet certain eligibility criteria like income, geography, race, occupation, etc. They can also target a group of individuals who are experiencing similar moments of transition or life crises, like those experiencing homelessness, the recently incarcerated, or youth aging out of foster care systems.

In a pilot, targeted DCT programs are generally means tested—determining who receives cash transfers upfront. However, larger scale DCT programs could also choose to target a certain population on the back-end with tax credits or by requiring repayment from those not eligible.

Targeted DCT programs are useful if the program is either limited in funding or seeking to achieve outcomes unique to a specific population.



## UNCONDITIONAL OR CONDITIONAL

**Conditionality** in DCT programs refers to the behavioral requirements that an individual would need to meet in order to continue to receive cash transfers. Conditional DCT programs may require individuals to attend certain meetings, meet with case managers, adhere to medical treatments, respond to surveys, etc. Conditional cash transfers are useful if the goal of the program is to encourage certain behaviors of the target population. They have been widely used in developing countries to encourage behaviors like receiving vaccinations. However, if not designed carefully, conditional cash transfers teeter on becoming paternalistic and manipulative.

To be rooted in the idea that we should trust people to make decisions for themselves requires relinquishing control. For a DCT program to be effective, it must allow people to solve problems for themselves and reduce the costs associated with implementing a program. Likewise, DCT designers should facilitate conversations with their internal teams and key stakeholders about the potential biases and expectations they may have of recipients upfront. Every guardrail placed around the program runs the risk of leveraging power and race to influence certain desired behaviors of DCT program recipients.

Nonetheless, there can be a time and place in which conditional DCT are appropriate, but designers must first decide the purpose of their program and align on guiding principles. The decision to make cash transfers conditional or unconditional and the ethical implications will then be much more readily discernible.

## UNRESTRICTED OR RESTRICTED

A DCT program can also choose whether to place **restrictions** on how money is spent. These restrictions can be narrow (e.g., for educational expenses only) or broad (to put towards pursuing one's personal or financial goals). Regardless, it is generally best to limit restrictions and give people agency over their choices. The power of cash transfers lies in its flexibility and in the unbridled belief that people know best what they need.

There are more subtle ways to encourage spending in certain directions. For example, choosing a program name that speaks to the desired outcomes for participants can encourage positive, focused engagement—in fact, the impact of using empowering and inspiring language/branding versus a more direct language that can potentially stigmatize participants—is well documented and is considered best practice by several DCT programs in the U.S.

Additional strategies to encourage specific spending habits and choices might include facilitating groups of peers to share their experiences, or matching recipients with mentors and financial coaches.

*The power of cash transfers lies in flexibility and the unbridled belief that people know best what they need.*

## #2 ..... SOURCING

*To recruit eligible participants to a DCT program, it is best to do outreach in the typical places where your target population gathers.*

One obstacle to recruiting people is the understandable skepticism of initiatives that want to give away cash. To combat this skepticism, we recommend:

- Working through community-based organizations that have trusted relationships with recipients. Have them identify potential DCT recipients and implement the initial vetting process.
- Leverage peer networks. Create or work through existing social networks. Let recipients know they are a part of a select group receiving cash payments. This establishes a sense of responsibility and personal obligation to be an active participant in a pilot.
- Over-communicate with potential recipients about the program and the enrollment process. Use phone calls, emails, letters, and in-person announcements to establish a personal relationship and credibility with potential recipients.
- Keep screening criteria to a minimum.

## #3 ..... ENROLLMENT

*Whenever possible, reduce barriers for recipients to enroll in a DCT program.*

### SIMPLE & SHORT

Keep applications simple and short. Use simple language. Do not use this as an opportunity to collect data on recipients. Do not ask what recipients intend to use the money for. Recipients often interpret this to mean that they can only use the money for items listed and/or may be held accountable for their responses.

### FACE TO FACE

Best practice for DCT programs recommends that the enrollment process involve face-to-face contact between an administrator and recipient. This establishes trust in knowing the program is not a scam and it gives recipients an understanding of the program's objectives. It thus introduces a level of personal accountability between recipients and administrators—making them more likely to spend the payments in ways that achieve the program objectives. Lastly, it provides an opportunity to vet recipients, connect them to services, and help them set goals for the use of the cash transfer.

## QUICK

Be sure cash payments get into the hands of recipients quickly. The turnaround time from application completion, approval, to cash distribution should be no more than 10 days.

## UPFRONT

Over-communicate with recipients. Provide ALL the information upfront as to how people get paid, what they can/cannot use the funds for, where they can/cannot use the payment methods, when they will get paid, how it might affect benefits, tax liability, how to reach someone for questions, etc. Use all available channels to communicate with recipients; email, text, or even handwritten letters.

## #4 ..... PAYMENT MECHANISM

It is best to give people options for how they want to get paid, whether by direct deposit, cash, check, prepaid debit, Western Union transfer, etc.

- If choosing **prepaid debit cards or a check**, recipients should also have the option to choose how cash payments are delivered. In most cases, it is best to deliver cash payments directly to recipients via mail. However, there will be cases when a recipient's mailing address is unreliable and a DCT program should offer a central place to pick up prepaid debit cards or checks.
- **Electronic payments** are preferred in that they require less processing time, reduce "leakage," cashing fees, and can be tracked and safeguarded from fraud.
- **Prepaid debit cards** are useful in they allow administrators to see aggregated, un-identifiable data on how payments were spent.
- There are several **payment vendors** to choose from that specifically serve DCT programs including Aidkit, Community Financial Resources, Hyperwallet, MyPath and the US Bank Focus card.
- Any payment option chosen should ensure that there are **consumer protections** in place. Recipients should not incur exorbitant fees to access their cash transfers. [The Bank on National Account Standards](#) provides helpful guidance for choosing high-quality payments systems that minimize fees and have accessible in-network ATMs.
- If recipients are **unbanked**, a DCT program should offer support in helping them to become banked. Setting them up for long-term success to participate in the banking system should be the goal. Don't design payment mechanisms just to avoid asking people to set up bank accounts.

## #5 FREQUENCY

While the frequency at which cash transfers are delivered is largely dependent on the program’s resources, objectives, and evaluation plan, there are a few guardrails that may be helpful when implementing ongoing cash transfers.

- A DCT program should first **engage the community** to develop consensus on the frequency at which payments be delivered.
- **Bi-weekly installments** may be incredibly useful in helping recipients learn to budget and manage costs.
- **Monthly cash payments** provide a reliable, predictable stream of income that can alleviate income volatility.

## #6 DURATION

The duration of a DCT program is also largely dependent on its resources, objectives, and evaluation plan. There are more than 25 guaranteed income pilots being designed or implemented in the U.S. The duration of these pilots are determined by how much recipients receive, at what intervals, and by the total number of people the program seeks to serve.

### SHORTER HORIZON

Where pilots distribute **\$1,000** or more a month, the duration of a pilot is generally limited to 12 months.

If cash payments are provided on a short-term horizon, it is more likely that a recipient uses the funds for short-term gains or to merely cover their basic needs.

### LONGER HORIZON

Where pilots distribute **\$500** or less a month, the duration of pilot is anywhere from 18 to 36 months.

Knowing that cash payments will continue to come for a significant period of time (more than 12 months) allows recipients to think about their future.

A longer horizon allows recipients to plan, and it encourages them to set a portion aside for savings and/or to invest in opportunities like further education or training.

*If the goal of the program is to mitigate a crisis or to gradually ease an individual into economic stability, remember that it takes time for someone to get back on their feet.*

## #7 ..... AMOUNT

*Like duration and frequency, the total amount recipients receive will be dependent on the program’s funding sources, objectives, and length of the pilot.*

Of the dozens of cash transfer programs in the U.S., recipients receive anywhere from \$300-\$1,000/month. The average and most common amount distributed is **\$500 a month**. This is largely determined by philanthropic funders who point to the success of the Stockton SEED program as sufficient rationale for providing \$500 a month.

If the program’s objective is to intervene during a life crisis or moment of transition, it may be best to consider providing a larger **lump sum** upfront to cover costs needed to create initial stability, like a security deposit.

For cash transfer programs longer than a year, it may be best to **taper payments** towards the end of the program to give recipients time to adjust to not have the recurring payments as part of their monthly budgets.

*A new DCT program can contribute to the field of guaranteed income by testing the impact of different DCT amounts.*

## #8 ..... SUPPORT

*In most cases, a DCT program will have greater success with intended outcomes when paired with “Cash Plus” supports.*



The most common cash plus supports offered in DCT programs are financial coaching, mentoring (either one-on-one or in a peer group), and benefits counseling. These in-kind services help recipients to set goals for themselves and to be held accountable for those goals.

- All supports offered should be **optional** and not required to receive payments.
- Coaches/mentors should be **representative** of the target population to establish a trust-based relationship that reflects the DCT program principles.
- It is important to remember that a direct cash assistance program should be more **cost effective** than alternative interventions. Resist the temptation to build more programs and services. Trust recipients to seek the help they need.
- When cash plus supports are offered, capture **data** to help determine the cost-benefit of the supports vs. the cash transfer.

## #9

## MONITORING AND EVALUATION

While understanding the efficacy of a cash transfer program is essential, there are several nuances to consider.

- An evaluation plan and the program budget are deeply intertwined. A significant sample size is needed to draw reliable learnings from a program. However, the number of people participating in a program will be dependent on the funding resources available.
- The number of people enrolled in ongoing cash transfer programs across the U.S. ranges from 15 to 2,000. The average number of people enrolled in a program is about 250. The most common number of enrollees is about 150.
- Best practice recommends that at least 100 individuals are enrolled in the program to establish causality and typically 800 or more to generate the confidence that program impacts will capture reliability.
- Most pilots reserve about 20% of their program budgets for evaluation and administration.
- If designing a randomized control trial with a small number of recipients, be aware that offering different cash amounts to different people may create tension in a small community. Avoid this by either (1) using other research evaluation methods (2) having a large sample size or (3) being intentional about selecting recipients that won't have interactions with each other. The downfall of the third option is that it also eliminates the possibility of leveraging peer groups to source or provide support to recipients.
- Any participation in an evaluation should be optional. Recipients should never feel obligated to respond to surveys or participate in interviews.
- Seek consent to follow up with recipients just after the first payments are made. It is important to gain consent early on, but doing so after the first payment is made relieves the potential misconception that recipients must consent in order to receive payment.
- It may be tempting to collect an infinite amount of information on recipients, but only collect data that is actionable and/or provide answers to your research questions.
- Do not ask recipients how they spent their cash payments. This question rarely elicits truthful answers and is perceived to be an accountability measure by recipients, which can create distrust. Instead, use aggregated, unidentifiable data from prepaid debit cards to better understand how cash transfers are used.

- Cash transfers can be significantly more cost effective than existing solutions to administer funds. Therefore, a DCT program should evaluate how its solution compares to the support recipients might receive in the absence of a cash transfer. This is commonly referred to as "cash benchmarking" and is used to evaluate how much more/less cost effective a DCT program might be.
- Storytelling and qualitative data should be collected to communicate the individual impact of cash transfers. Often, it is these stories (rather than rigorous quantitative data) that inspire legislators to champion DCT programs and to work towards policy-level changes that enhance their efficacy. Additionally, qualitative data collection can eliminate potential culturally insensitive approaches to rigorous research, while still allowing you to gather evidence.

*Cash transfers can be significantly more cost effective than existing solutions to administer funds.*



## #10 ..... RISKS

*Rather than spend excessive time overdesigning a DCT program in anticipation of what could go wrong, center on mitigating barriers and trusting people to solve problems on their own.*

With any new program, there will be unknowns and things that do not go according to plan. Remember that these incidents will be in the minority, and they are not enough of a reason to NOT pursue implementing a DCT program. That said, there are common risks that can be mitigated with a few design considerations.

### LOSS OF BENEFITS

Depending on the amount, frequency, and duration of a DCT program, recipients may become ineligible to receive other public benefits. To avoid this:

- A DCT program should first identify what benefits individuals currently receive. Then, it's important to understand how the cash transfer will interact with other public benefits via the [Federal Reserve Banks of Atlanta's Benefits Cliff Dashboard](#). Use this information to decide on a final cash payment amount. It may also be necessary to:
  - Stand up a "Hold Harmless" fund to compensate individuals who unintentionally do end up losing benefits.
  - Most DCT programs across the U.S have been able to protect the majority of benefits other than SNAP and disability.
  - Offer benefits counseling and provide choices to recipients. Some may choose to forgo certain benefits (like SNAP) in favor of cash, while others may choose to withdraw from the program to protect certain benefits, like disability, which tend to provide higher amounts and are harder to obtain.
- Seek waivers or legislation from respective state and local agencies that exempt the cash transfer to be counted as income that otherwise may push recipients over the income limit of certain benefits. Establish cash transfers as gifts to avoid the IRS considering the payment as income. Provide each recipient a letter stating so.

*For further ideas and recommendations, see the [Guaranteed Income Community of Practice Benefits Cliff Fact Sheet](#).*

## FRAUD

A DCT program should be centered on trust. It should not have excessive guardrails in place requiring people to prove the legitimacy of their eligibility. Nonetheless, there are a few design considerations that can help mitigate potential incidents of fraud or theft.

- Perform periodic spot checks of data captured during enrollment.
- Conduct independent follow-up calls with recipients.
- If mailing prepaid debit cards or checks, send a message via SMS to recipients asking them to confirm whether or not they received their cash payments. This can be a way to monitor incidences in which theft occurs.
- If targeting a specific population, having an in-person enrollment process can help weed out those the program may not be designed for. Likewise, rather than asking simple “yes” or “no” questions on an enrollment form, ask more qualitative questions that may de-incentivize individuals from misrepresenting themselves. For example, a program in California targeting Black women chose to ask the question “How do you identify with being a Black woman?” rather than simply providing a dropdown of pre-selected options.

# CONCLUSION

*While one-off DCT pilot programs undoubtedly have a direct impact on the recipients who receive funding, it is important to not lose sight of a broader mission to create lasting, systemic change.*

While there may be many choices to make in implementing a DCT program, it's essential to stay rooted in the program's objectives and the underlying philosophy that make cash transfers an effective tool.

For DCT programs to be successful in the long-run, they require ongoing sources of funding. Unlocking public dollars to support such initiatives requires programs to begin with the end goal in mind. Having a clear purpose and objective for the program and involving the community in each step will help shape much of the design components.



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# APPENDICES

## APPENDIX A: RESEARCH QUESTIONS

### Program Design

1. Who was/is the target population?
2. What are the target populations' perceived needs? What crises are they facing?
3. Who managed the program? What type of entity?
4. How was it funded?
5. How many recipients?
6. Amount received?
7. Frequency of amount received?
8. Time period of engagement?
9. What are the key design elements that make DCT impactful?
10. What key design elements can lead to unintended consequences of DCT?
11. What role do partners play in the design or delivery of a DCT?

### Program Delivery

12. How are beneficiaries sourced and vetted?
13. How is cash distributed? What are the benefits/limitations/unintended consequences of the payment method?

14. How effective was the delivery method at getting cash in the hands of recipients and used?
15. What (if any) ongoing interaction is there with recipients? Is cash a part of a program or wrap around services?

### Program Impact

16. What are/were the short and long-term expected/actual impacts on the targeted population?
17. What methodology was used to measure impact?
18. To what degree was direct cash assistance more useful than other types of assistance / services programs?

### Program Externalities

19. What were the economic, cultural, or political conditions that led to the success/failure of the program?
20. What interest do government entities or philanthropic orgs have in DCT?

## APPENDIX B: INDIVIDUALS & ORGANIZATIONS INTERVIEWED

ORGANIZATION NAME	CONTACT	TITLE	ABOUT
Community Financial Resources	Parisa Esmaili	Executive Director	Provides financial products for basic income projects. CFR is the product provider for SEED and the County of Santa Clara initiative.
Community Works West	Rahkii Holman	Program Manager	Empowers people impacted by incarceration and advocates for a more humane criminal justice system. CW/W is implementing the first DCT program for reentry in the U.S.
Community Works West	Patrick Leonard	Grants Manager	
Federal Reserve Banks of San Francisco	Bina Shrimali	Advisor to the Abundant Birth Project	ABP provides unconditional cash transfers to Black and Pacific Islander mothers to reduce preterm birth and improve economic outcomes. The Federal Reserve Banks of SF is a key sponsor and advisor of the project.
Gerald Huff Fund for Humanity	Dr. Gisele Huff	Executive Director	Works to raise awareness of Universal Basic Income (UBI) and to promote its understanding, acceptance, and implementation.
Gerstner Philanthropies	Sarah Persily	Program Director	Provides grants to service organizations that are used to directly support individuals who have suffered a temporary setback and could use a "helping hand" to restore their equilibrium.
Gerstner Philanthropies	Kara Klein	Executive Director	
GiveDirectly	Alex Nawar	Director Humanitarian + U.S	The first — and largest — nonprofit that lets donors send money directly to the world's poorest people. GiveDirectly facilitates DCTs to low-income individuals in the U.S and provides TA to other orgs implementing DCTs.
LIFT Family Goal Fund	Gabe Scheck	Chief Advancement Officer	LIFT builds families' well-being, financial strength, and social connections to lift two generations at once by providing DCTs and financial coaching. LIFT also provides TA to implement their financial coaching model.
LIFT Family Goal Fund	Helah Robinson	Senior Vice President, Program and Strategy	
Magnolia Mother's Trust	Aisha Nyandoro	CEO	Provides low-income, Black mothers in Jackson, Mississippi \$1,000 cash on a monthly basis, no strings attached, for 12 months straight.

ORGANIZATION NAME	CONTACT	TITLE	ABOUT
McGovern Medical School at UT, Houston.	Cynthia Bell	Assistant Professor	Developing RCT to study how continuous cash transfers impact health outcomes for families with children suffering from end stage renal disease.
Mile High United Way	Molly Yost	Director of Early Childhood Initiatives	Provides \$2,500 one-time cash transfers to FFN child care providers in Denver.
Santa Clara County Foster Youth	Cindy Chavez	Supervisor District 2	Provides \$1,000 monthly cash transfers to youth aging out of the foster care system.
UpTogether Fund	Tiarra Comer	Interim Partnership Director, Midwest Region	An online platform that leverages community to facilitate DCTs.
UpTogether Fund	Grace Peter	National Director of Partnerships	
UpTogether Fund	Mary Durden	Partnerships Manager	

## APPENDIX C: TYPES OF ORGANIZATIONS INTERVIEWED

ORGANIZATION NAME	TYPE
Community Financial Resources	TA Provider
Community Works West	DCT Program
Federal Reserve Banks of San Francisco	DCT Program Advisor
Gerald Huff Fund for Humanity	Advocacy Org
Gerstner Philanthropies	Funder
Gerstner Philanthropies	Funder
GiveDirectly	DCT Program, TA Provider
LIFT Family Goal Fund	DCT Program, TA Provider
Magnolia Mother's Trust	DCT Program
McGovern Medical School at UT, Houston.	DCT Program
Mile High United Way	DCT Program, Funder
Santa Clara County Foster Youth	DCT Program, Government Agency
UpTogether Fund	DCT Program, TA Provider
Women's Foundation Colorado	Funder

## APPENDIX D: DCT PROGRAMS & PILOTS CURRENTLY IN THE U.S.

Open this file as a [Google spreadsheet](#).

PROGRAM NAME	TARGET POPULATION / ELIGIBILITY REQUIREMENTS	NUMBER OF RECIPIENTS	AMOUNT RECEIVED	FREQUENCY	DURATION	MAX AMOUNT RECEIVED BY INDIVIDUAL	MAX AMOUNT DISTRIBUTED	LOCATION	TIME PERIOD	PROGRAM FUNDER	CASH PLUS	LINK
Abundant Birth Project	Low-income Black and Pacific Islander pregnant women in San Francisco	100	\$1,000-\$1,500	Monthly	13 months	\$19,500	\$1,950,000	San Francisco, CA	2021	San Francisco Department of Public Health, Hellman Foundation, and University of California - San Francisco	No	<a href="#">Link</a>
Advance Peace Richmond	Youth responsible for the city's high rates of gun violence.	84	\$1,000	Monthly	18 months	\$18,000	\$1,512,000	Richmond, CA	Ongoing. Started in 2010.	Private grants	Yes	<a href="#">Link</a>
Artist in Long Beach	Artist	150	\$500	Monthly	6 Months	\$3,000	\$450,000	Long Beach, CA	2021	Spearheaded by Mayor Robert Garcia	Unknown	<a href="#">Link</a>
Assured Cash Experiment of Pittsburgh	Families earning <50% of area median income. Half of the funds are to be sent to households run by black women.	200	\$500	Monthly	2 Years	\$12,000	\$2,400,000	Pittsburg, PA	2021	Spearheaded by Mayor Bill Peduto	Unknown	<a href="#">Link</a>
Baby's First Years	Low-income mothers with babies 0-3 years old	400 (1,000 in study)	333 (600 receive \$20/mo as a	Monthly	3 years	\$13,320	\$133,200	Minneapolis-St. Paul, New Orleans, New York City, Omaha		NIH and multiple private foundations	No	<a href="#">Link</a>

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Cambridge RISE	Single-parent households earning 80% of area median income (AMI) who have children under age 18	120	\$500	Monthly	18 Months	\$9,000	\$1,080,000	Cambridge, MA	2021	Spearheaded by Mayor Sumbul Siddiqui with support from Cambridge Community Foundation, Harvard University, MIT, and Boston Foundation	Unknown	<a href="#">Link</a>
Chelsea, MA	Low-income families	2000	\$200-\$400	Monthly	10 Months	\$4,000	\$8,000,000	Chelsea, MA	2020	City of Chelsea & the Shah Family Foundation	Unknown	<a href="#">Link</a>
College Bound Dorchester	Students with criminal records	40	\$400	Weekly	Multi-year. Until they finish school.	Unknown	Unknown	Dorchester, Boston	Unknown	Unknown	Unknown	<a href="#">Link</a>
	Families participating in the "CollegeBound Saint Paul" program	150	\$500	Monthly	18 Months	\$9,000	\$1,350,000	St. Paul, MN	2021	Spearheaded by Mayor Melvin Carter	Yes	<a href="#">Link 1</a> <a href="#">Link 2</a>
Colombia Life	Black fathers in Columbia within an existing program	100	\$500	Monthly	1 Year	\$6,000	\$600,000	Colombia, SC	2020	Founded by Mayor Stephen Benjamin alongside Midlands Fatherhood Coalition, and supported by private funds.	Yes	<a href="#">Link 1</a> <a href="#">Link 2</a>
Community Works West	Recently incarcerated	25	\$500	Monthly	1 year	\$6,000	\$150,000	Bay Area, CA	2021	Privately funded	Yes	<a href="#">Link</a>
Compton Pledge	Low-income, formerly incarcerated, and undocumented residents	800	\$300-\$600	Varies	24 Months	\$14,400	\$11,520,000	Compton, CA	2020	Spearheaded by Mayor Aja Brown in collaboration with the Fund for Guaranteed Income.	Unknown	<a href="#">Link 1</a> <a href="#">Link 2</a>
EAT	Formerly incarcerated individuals in the neighborhood	30	\$500	Monthly	18 Months	\$9,000	\$270,000	West Garfield Park, IL	2020		Unknown	<a href="#">Link</a>
Family Health Project	New Mothers	15	\$400	Monthly	36 Months	\$14,400	\$216,000	Lynn, MA	2020	Privately funded	Yes	<a href="#">Link</a>

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Family Independent Initiative (FII)	Low-income Families	2,500	Up to \$1,200. The majority of draws are less than \$1,000.	Yearly	2 Years	\$2,400	\$5.8M	14 sites across the US		Privately funded	Yes	<a href="#">Link</a>
Give Directly Project 100	Low-income US households receiving SNAP.	183,000	Up to \$1000	One Time	N/A	\$1,000	Up to \$183M	Anywhere, US	2020 - unknown	Individual donors, corporate foundations (Google.org), private foundations	No	<a href="#">Link</a>
GiveDirectly Natural Disaster Relief	Hard-hit, low-income individuals in the aftermath of major natural disasters	6363	\$1,500	One Time	N/A	\$1,500	\$10M		8-9 weeks after disaster	Laura and Arnold Foundation	No	<a href="#">Link</a>
GRIT	Tacoma residents, single head of household, and Asset-Limited-Income-Constrained while Employed (ALICE)	100	\$500	Monthly	1 Year	\$6,000	\$600,000	Tacoma, WA	2021	Partnership between Mayor Victoria Woodards and United Way of Pierce County, and part of Mayors for a Guaranteed Income (MGI). It will rely on private funds.	Unknown	<a href="#">Link 1</a> <a href="#">Link 2</a>
Hilltop	Young parenting mothers of Hilltop School	50	\$330	Monthly	6 Months	\$1,980	\$99,000	San Francisco, CA	2021	Unknown	Yes	
Hudson, NY	Income <\$35k	25	\$500	Monthly	5 Years	\$30,000	\$750,000	Hudson, NY	2020	Funded by two non-profits: The Spark of Hudson and the Humanity Forward Foundation.	Unknown	<a href="#">Link 1</a> <a href="#">Link 2</a>
LIFT Family Goal Fund	Parents of young children	700	\$150	Quarterly	2 Years	\$1,200	\$340,000	Chicago, Los Angeles, New York, and Washington D.C	On-going	Privately funded	Yes	<a href="#">Link</a>

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Magnolia Mother's Trust	African American single mothers living in affordable housing	130. Adding 100 in 2021	\$1,000	Monthly	1 year	\$12,000	\$1,560,000	Jackson, Mississippi	Yr1: Dec 2018 -2019.	Privately funded	No	<a href="#">Link</a>
MOMentum	Low-income mothers of color with children under 18 years of age, with priority for those ineligible for federal benefits	125	\$1,000	Monthly	2 Years	\$24,000	\$3,000,000	Marin County, CA	2021	Funded by the Marin Community Foundation and Family Independence Initiative as an administrative partner for payments.	Unknown	<a href="#">Link</a>
New Leaf	Youth (19+) and adults who have recently become homeless. Canadian citizen or permanent resident. Low risk of mental health challenges and substance abuse	Initial pilot = 50 Expansion = 200	Pilot: \$7,500. Expansion Project: \$8,500	One Time	Pilot: 1 year. Expansion: 2 years	Pilot: \$7,500. Expansion Project: \$8,500	Expansion project fundraising goal: \$10M	Vancouver, Canada	Initial pilot: Spring 2018 -2019. Expansion Project: 3 years. Start date TBD.	Unknown	Yes	<a href="#">Link</a>
New York, NY	Low-income Black and immigrant mothers during first 1000 days of life	100	\$500-\$1,000	Biweekly	3 Years	\$36,000	\$3,600,000	New York, NY	2021	Funded and implemented by the Monarch Foundation.	Unknown	
Oakland Resilient Families	BIPOC families earning <50% of area median income, with half earning below 138% of the federal poverty line	600	\$500	Monthly	18 Months	\$9,000	\$5,400,000	Oakland, CA	2021	Led by Mayor Libby Schaaf, one of the Mayors for a Guaranteed income, supported by the Family Independence Initiative.	Unknown	<a href="#">Link</a>

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Resilient	Random selection of low-income families with children under 12 within hardest-hit zip codes for COVID-19 and child poverty	150	\$500	Monthly	2 Years	\$12,000	\$1,800,000	San Diego, CA	2021	Supported and housed by Jewish Family Service of San Diego	Unknown	<a href="#">Link</a>
Richmond Resilience Initiative	Low-income families in existing anti-poverty programs; employed but excluded from traditional benefits programs	55	\$500	Monthly	2 Years	\$12,000	\$660,000	Richmond, VA	2020	Initially funded through CARES Act funds, but it has since been expanded to add 37 families as part of Mayors for Guaranteed Income.	Yes	<a href="#">Link</a>
Rise Colorado / Bridge Network	Low-income families in Denver Metro. Career development	30	\$333	Monthly	2 years	\$8,000	\$240,000	Denver Metro	May 1, 2021- May 1, 2023	Privately funded	Yes	
Santa Clara County Foster Youth	Former foster youth ages 21-24 who were in the foster care system between the ages of 16 and 21 and live in Santa Clara county	72	\$1,000	Monthly	A year	\$12,000	\$900,000	Santa Clara County, CA	Initial Pilot: May 2020 - May 2021	City of Santa Clara	No	<a href="#">Link</a>
Stockton Economic	Low-income families	125	\$500	Monthly	24 months	\$12,000	\$1,500,000	Stockton, California		City of Stockton	No	<a href="#">Link</a>
UpTogether Platform	Households earning 50% – 150% of FPL	200,000		Determined by funder	Determined by funder	Determined by funder	Unknown	Nationwide		Multiple private donors	Yes	<a href="#">Link</a>
Workers Strength Fund	Gig workers experiencing financial emergencies	350	\$1,000	One-Time	N/A	\$1,000	\$350,000	Dallas, Detroit, San Francisco and New York		Unknown	No	<a href="#">Link</a>

## APPENDIX E: FURTHER READING & RESOURCES

### A. STAKEHOLDER GROUPS

#### GUARANTEED INCOME COMMUNITY OF PRACTICE (GICP)

<https://gicp.info/>

The Guaranteed Income Community of Practice is a working group of guaranteed income stakeholders convened to facilitate communication and collaboration between guaranteed income programs, pilots, funders, advocates, and policymakers across the country.

GICP is co-convened by the following partners: Economic Security Project, Springboard To Opportunities, Mayors for a Guaranteed Income, Stanford Basic Income Lab, the Center for Guaranteed Income Research, and Asset Funders Network. Dr. Aisha Nyandoro of Springboard To Opportunities and Madeline Neighly of Economic Security Project will co-chair, with Hope Wollensack as the Senior Strategist.

#### GICP Structure and Participation

The Guaranteed Income Community of Practice hosts monthly convenings in addition to regularly updating the website with useful materials including meeting agendas, read-outs, white papers, and issue and policy briefs. GICP also facilitates both an email listserv and Slack workspace.

- **Convenings.** Each monthly meeting is held on the second Tuesday of the month at 1pm ET.
- **Website.** Members are free to email any materials (white papers, press clips, videos, etc.) to be included on the website to Hope Wollensack, [hope@economicsecurityproject.org](mailto:hope@economicsecurityproject.org).
- **Email.** There is a listserv for GICP members. To join, contact Madeline Neighly, Director of Economic Guaranteed Income, Economic Security Project, [madeline@economicsecurityproject.org](mailto:madeline@economicsecurityproject.org)
- **Slack.** GICP manages an active Slack community to share best practices, resources, and make connections. To join, use this link.
- **Directory.** Members may add their information to the GICP Directory. Headshots and bios are listed on our public directory, while contact information is shared only with other Community members.

## MAYORS FOR A GUARANTEED INCOME

<https://www.mayorsforagi.org/>

## STANFORD BASIC INCOME LAB

<https://basicincome.stanford.edu/>

### B. FACT SHEETS

- [The Use of Public Funds for Guaranteed Income Programs](#)
- [Benefits Cliff and Guaranteed Income](#)

### C. BEST PRACTICE TOOLKITS

- [Guaranteed Income Messaging Literature Review: How to frame guaranteed income for policy change](#)
- [Guaranteed Income in the U.S: A toolkit of best practices, resources and existing models of planned and ongoing research in the U.S](#)
- [Basic Income in Cities](#)
- [A Learning Agenda for Basic Income](#)

*For more information or support designing your DCT programming, email the Impact Charitable team.*

[info@impactcharitable.org](mailto:info@impactcharitable.org)

