



Universal Basic Income Pilot Program Evaluation

Final Report

2025 (v2)

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Executive Summary

Introduction

The pilot universal basic income (UBI) project was evaluated by HARC, Inc. The program provided participants with a guaranteed monthly income of \$800 for 18 months. Residents qualified for the UBI program if they lived, worked, or spent most of their time in the City of Palm Springs and made under \$17,000 a year. A total of 14 participants completed the program, and they could spend the UBI income as they saw fit.

Methods

All but one of the 14 participants took the baseline 2.0 survey, which was launched in March 2024. The 1st quarterly 2.0 survey was launched in June 2024, the 2nd quarterly 2.0 survey was launched in September 2024, the 3rd quarterly 2.0 survey was launched in December 2024, and the final survey was launched in March 2024. Participants received a survey URL link via email to take each of the online surveys.

Results

Demographics

The average age of participants was 54 years old, with a minimum age of 30 and a maximum age of 71. The majority of participants were not Hispanic/Latino (92.0%), whereas 8.0% were Hispanic/Latino. The majority identified as White (54.0%), whereas 23.0% identified as an “other” race and 15.0% identified as Black/African American. A majority identified as male (69.0%), 23.0% identified as female, and 8.0% identified as transgender. Most participants identified as homosexual (62.0%), 23.0% identified as bisexual, and 15.0% identified as heterosexual. Participants typically had either a college degree or higher (46.0%) or some college education (31.0%).

Income and Debt Levels

Participants were extremely low-income. As recorded at baseline 2.0, nearly half (46.2%) had a monthly income between \$500 and \$999, including the UBI income of \$800. Also at baseline 2.0, 30.8% reported having debt between \$25,000 and \$34,999, and 23.1% had debt between \$5,000 and \$9,999.

Community-Based Programs and Resources

At baseline 2.0, a majority (69.2%) reported utilizing healthcare/sexual health care resources at DAP Health. At both baseline 2.0 and the final survey, a majority accessed food support systems or mental health services, with these and other services being used less by the end of the program.

Spending of UBI Money

At baseline 2.0 (i.e., after participants had begun receiving the UBI income), participants reported that none of the \$800 they received was allocated towards tobacco, marijuana, or alcohol. A majority (56.0%)

used the UBI money for housing (rent or mortgage), followed by 22.0% for food, 14.0% for paying off debt, and 12.0% for utilities.

Comparisons: Baseline 2.0, Quarterly, and Final Surveys

Comparisons were made between results from the baseline 2.0 survey, the three quarterly 2.0 surveys, and the final survey. However, because the final survey did not include all participants from the previous surveys and its sample size was sometimes quite small, any interpretations based on comparisons with the final survey results should be made with caution.

Employment Status and Housing

Employment status was approximately the same across the surveys. One participant reported becoming a student by the end of the program. At baseline 2.0, two participants were employed for wages, and by the end of the program, four participants were employed for wages. Housing status largely stayed the same across the surveys, with all but one participant (in the first quarterly survey) reporting that they had a place to live.

Psychological Well-Being, Social Functioning, Satisfaction with Life, and General Health

Average psychological well-being scores rose from 57.1 at baseline 2.0 to 67.5 at the end of the program. Social functioning average scores similarly rose from 58.0 at baseline 2.0 to 73.4 at the end of the program. The satisfaction with life average scores also rose from “neutral” to “slightly satisfied with life.” General health average scores also rose from 63.6 at baseline 2.0 to 78.1 at the end of the program.

Sexual Health, Dental Utilization, and Medical Utilization

The average number of sexual partners rose from 0.9 at baseline 2.0 to 1.7 at the end of the program. Participants were tested for STIs (in the past six months) an average of 0.8 times at baseline 2.0 and an average of 1.0 time at the end of the program. For dental visits, time since last dental visit did not change dramatically between the surveys, aside from almost two-thirds (63.6%) of baseline 2.0 participants who saw a dentist less than six months ago compared to one-quarter (25.0%) of final survey participants who saw a dentist less than six months ago. For doctor and other healthcare provider visits, there were few changes over time, with the large majority (over 70.0%) of participants in each survey seeing a provider less than six months ago.

Only individuals with low incomes could qualify for the study. At baseline 2.0, nearly half (46.2%) reported a monthly income between \$500 and \$999, which included the UBI of \$800. Additionally, 30.8% of participants had debts ranging from \$25,000 to \$34,999, while 23.1% reported debts between \$5,000 and \$9,999.

By the end of the program, community-based services were utilized less frequently. Participants accessed food support systems and mental health services, but engagement with these and other services declined by the end of the program.

The majority of the UBI funds were allocated toward essential needs. Specifically, 56.0% of participants used the UBI money for housing (rent or mortgage), followed by 22.0% for food, 14.0% for paying off debt, and 12.0% for utilities.

One participant reported becoming a student by the end of the program. At baseline 2.0, two participants were employed for wages, and by the end of the program, four participants were employed for wages.

Psychological Well-Being, Social Functioning, Satisfaction with Life, and General Health scores rose, but should be interpreted with caution.

Conclusion

Results have shown several meaningful findings. Those who participated in the program were extremely low income (nearly half earning less than \$1,000 per month) and most had thousands of dollars in debt. The vast majority of UBI income was used for basic obligations and necessities such as housing, food, utilities, and debt payments. By the end of the program, one participant reported becoming a student and two additional participants reported finding wage-paying employment, effectively doubling the number of individuals employed for wages. In addition, all measures of well-being—psychological well-being, social functioning, satisfaction with life, and general health—showed improvements by the end of the program. These results suggest that UBI income, when provided to a financially strained sub-population, has meaningful impacts on participants' financial security and overall well-being.

Full Report

Universal Basic Income Pilot Program Evaluation

Final Report

Introduction

Overview

The pilot universal basic income (UBI) project was evaluated by HARC, Inc. The program provided existing clients of DAP Health or of a now-closed nonprofit known as Queer Works to receive guaranteed income for 18 months. Residents qualified for the UBI program if they were existing clients of Queer Works and/or DAP Health who lived, worked, or spent most of their time in the City of Palm Springs and made under \$17,000 a year. A random selection of 30 clients, consisting of three cohorts, was chosen to receive \$800 per month, and they could spend the income as they saw fit within their prerogative. Although Queer Works was originally in charge of managing the program, there were setbacks with the program, resulting in payment delays and a reduction in the program's participant count from 30 to 14 participants. Following these setbacks, DAP Health took over the program.

Due to delays in making payments to participants and the change in the number of participants, a baseline survey before the start of the program could not be used to compare changes over time. A "baseline 2.0" survey was thus used when the fixed number of 14 participants was set. This was followed by three quarterly surveys and one final survey.

About DAP Health

DAP Health is a 501c(3) organization based in the Coachella Valley and serving patients in Riverside County, Imperial County, and San Diego County. The mission of DAP Health is to enhance and promote the health and well-being of the community. They provide a variety of health, dental health, behavioral health, sexual health, and housing and other services.

About HARC

HARC, Inc. (Health Assessment and Research for Communities) is a nonprofit research and evaluation organization based in the Coachella Valley. HARC has been conducting program evaluations, community health needs assessments, and population surveys for over a dozen years throughout Inland Southern California and specializes in quantitatively and qualitatively measuring a variety of health disparities and community needs.

About Universal Basic Income (UBI)

UBI is a concept in which people are provided a consistent and guaranteed income as an unconditional payment, regardless of need. UBI's primary purpose is to ensure that all residents have the financial means necessary to cover their basic needs, such as food, clothing, and shelter. That said, UBI is often discussed within the context of poverty reduction, income inequality, and economic stability. UBI proponents usually argue that recipients would be empowered to pursue educational opportunities, business ventures, or increased time with family and friends. However, others argue that the notion of UBI is not financeable and disincentivizes people to seek employment.

There is no shortage of a variety of perspectives around the concept of UBI. For instance, as mentioned, some argue that UBI could lead to inflation; however, various economic factors like real income growth and the speed at which money moves through an economy would interact to dictate whether inflation or deflation occursⁱ. Others argue that there are no substantial benefits to UBI in terms of employability or other measures of living standards and will lead to lower economic input and lower tax revenuesⁱⁱ, not to mention enormous costsⁱⁱⁱ.

Despite critical arguments and theoretical models, a variety of piloted studies have found positive outcomes for UBI programs. Specifically, a meta-analysis synthesizing 21 studies found that unconditional income reduced the likelihood of having illnesses, increased the likelihood of being food secure, increased the likelihood of attending school, and increased spending on healthcare in low-to-middle-income countries^{iv}. Another review of available evidence identified that while the investigation of UBI has gaps, shortcomings, and inconclusive findings, there are generally positive outcomes among recipients receiving unconditional income^v. These positive outcomes include alleviating poverty, improvements in physical health, improvements in education, and minimal effects on labor market participation^{vi}.

Methods

All but one of the 14 participants took the baseline 2.0 survey, which was launched in March 2024. The 1st quarterly 2.0 survey was launched in June 2024, the 2nd quarterly 2.0 survey was launched in September 2024, the 3rd quarterly 2.0 survey was launched in December 2024, and the final survey was launched in March 2024. Participants received a survey URL link via email to take each of the online surveys. This was typically done near the end of the month.

A baseline survey, three quarterly surveys (three-month), and final post-survey were developed for this project. The baseline and final post-surveys were all-encompassing of the topical areas. The quarterly survey included many of the same topics but not all, as substantial changes from quarter to quarter were not expected. All topics are listed under their respective surveys below.

1. Baseline survey:

- a. Demographics
- b. Employment Status
- c. Income and Sources
- d. Debt Level and Causes
- e. Housing Status
- f. Utilization of Resources
- g. Community-Based Programs
- h. Psychological Well-being
- i. Physical Health
- j. Social Functioning
- k. Satisfaction with Life
- l. Sexual Health
- m. Dental Health
- n. Medical Usage
- o. Recreation and Leisure

2. Quarterly survey:

- a. Employment Status
- b. Spending of UBI money
- c. Housing Status
- d. Psychological Well-being
- e. Social Functioning
- f. Satisfaction with Life
- g. Physical Health
- h. Sexual Health
- i. Dental Health
- j. Medical Usage
- k. Recreation and Leisure
- l. Parent topics

3. **Final post-survey:** The survey has the *same topics as the baseline and quarterly* but includes a few more. This survey includes additional topics:
- a. Impact of UBI
 - b. Adequacy of UBI
 - c. Mental Health – General Open-Ended
 - d. General Open-Ended

Results

This report includes findings from the baseline 2.0 survey, the three quarterly 2.0 surveys, and the final survey. The sample size for the surveys was 14 participants; however, not all participants took each survey. Demographic information (taken from the baseline 2.0 survey) is available for 13 participants. For comparisons made among the baseline 2.0 survey and the quarterly 2.0 surveys, the same set of 11 participants (who each took each of these surveys) is used to make comparisons. The final survey includes some but not all of these participants. Thus, **conclusions made from comparisons with the final survey results should be made with caution.**

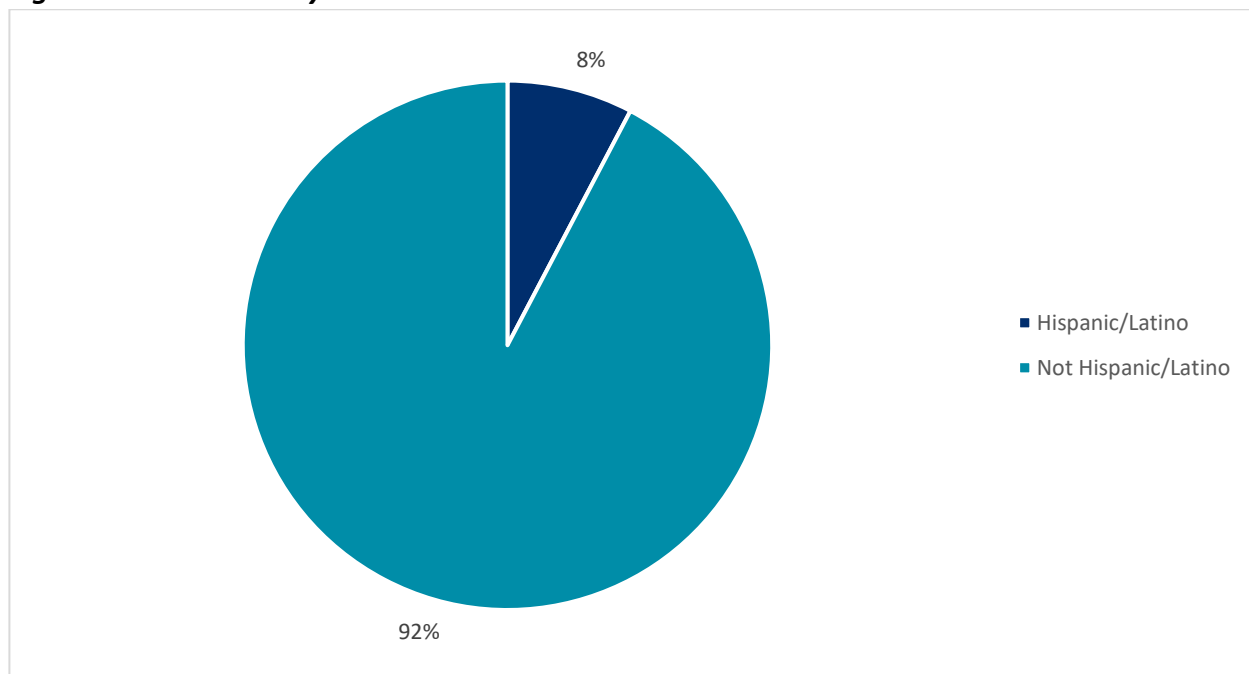
Demographics

The following demographic information was gathered from the baseline 2.0 survey. The following is a summary of the demographic data of the 13 participants who took this baseline survey.

Ethnic and Racial Identity

Participants were asked, “Are you of Hispanic, Latino, or Spanish origin?” As illustrated below, 12 participants (92%) do not identify as Hispanic/Latino, and one participant (8%) identifies as Hispanic/Latino.

Figure 1. Ethnic Identity

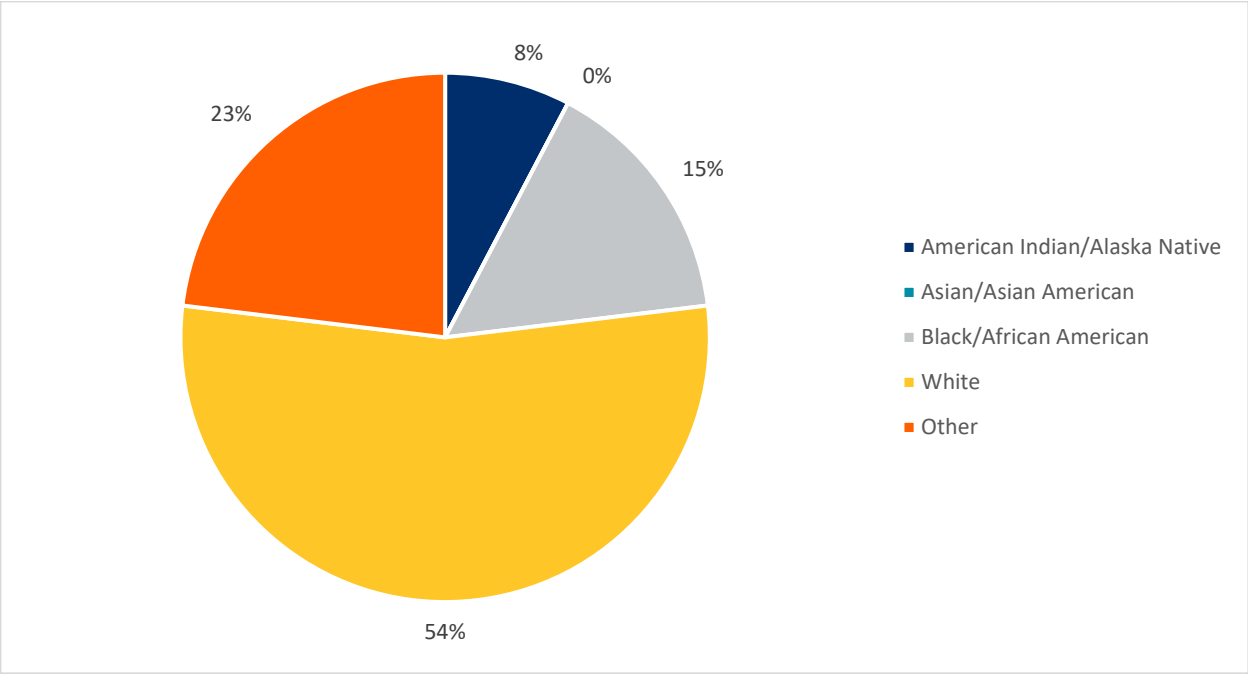


Note: $n = 13$.

Participants were also asked, “Which one of these groups would you say best represents your race?” and selected from a list of racial categories. As illustrated below, one participant (8%) identifies as American Indian/Alaska Native, two participants (15%) identify as Black/African American, seven participants (54%) identify as White, and three participants (23%) identify as “other.”

Those who selected “other” then specified their race. They wrote in “Mixed,” “Middle Eastern,” and “Mixed Middle Eastern.”

Figure 2. Racial Identity



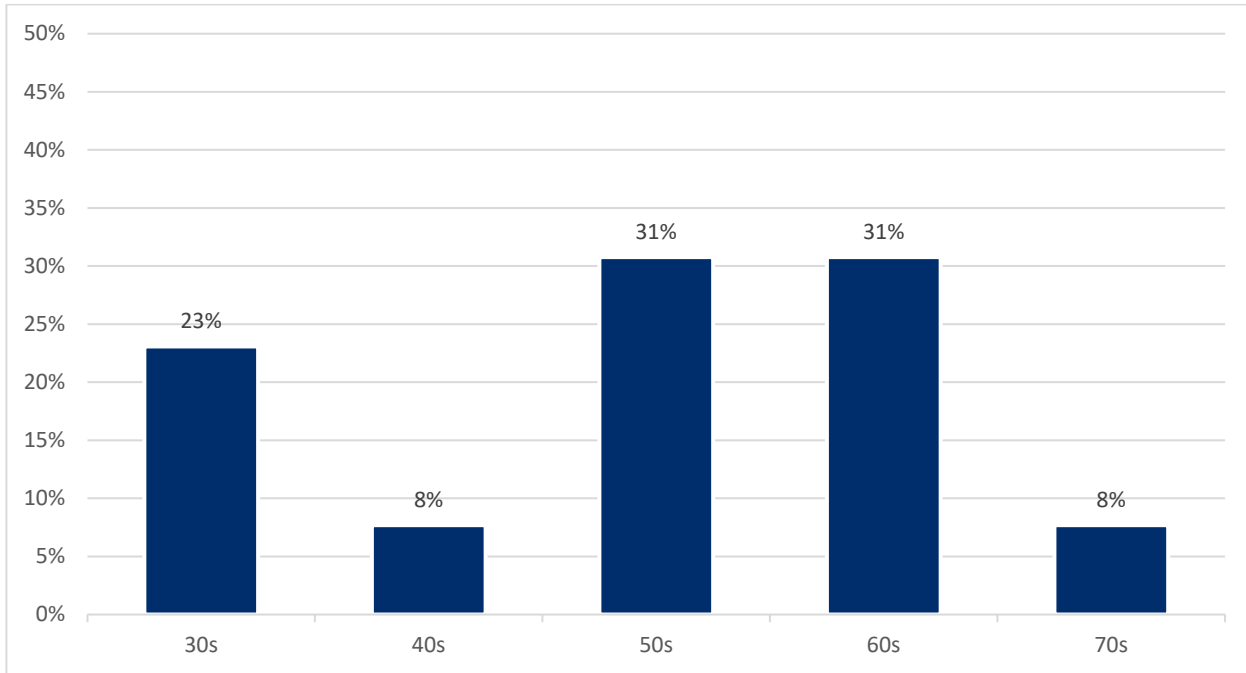
Note: *n* = 13.

Age

Participants were asked, “What is your age?” The youngest age is 30, and the oldest age is 71. The average (median) age is 54 years.

As illustrated below, three participants (23%) are in their 30s, one participant (8%) is in their 40s, four participants (31%) are in their 50s, four participants (31%) are in their 60s, and one participant (8%) is in their 70s.

Figure 3. Age Groups

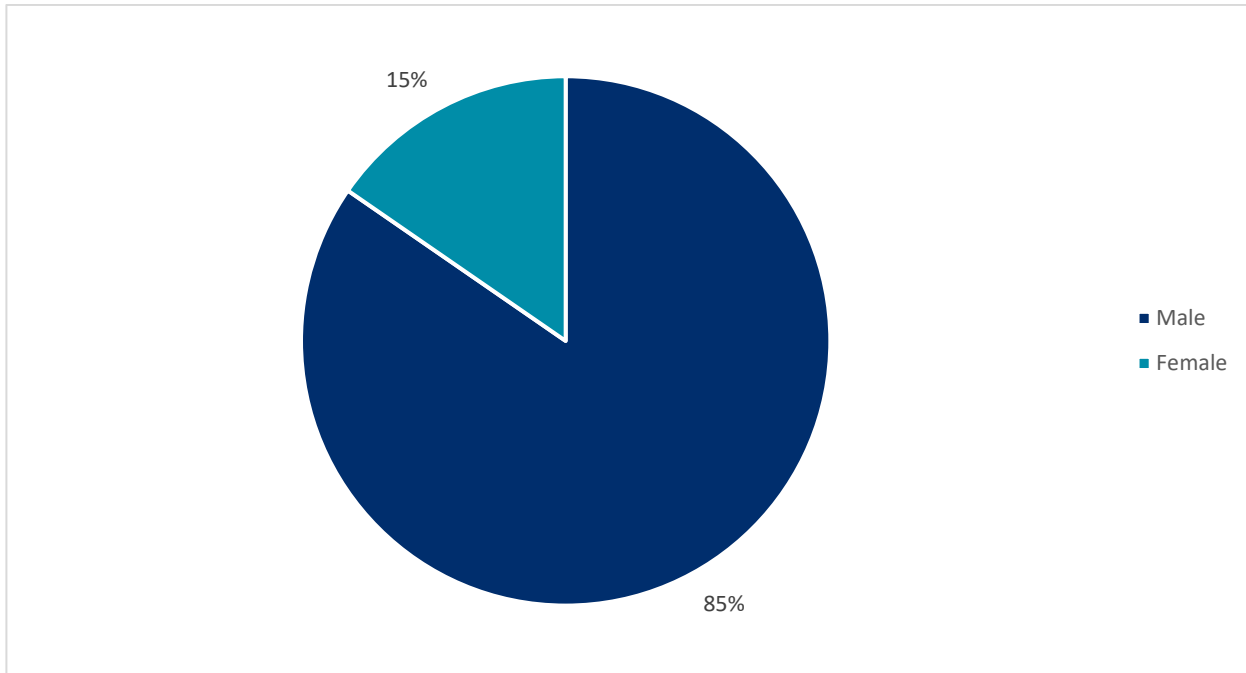


Note: $n = 13$.

Sex and Gender

Participants were asked, “What sex were you assigned at birth, on your original birth certificate?”¹ As illustrated below, 11 participants (85%) were assigned male at birth, and two participants (15%) were assigned female at birth.

Figure 4. Sex Assigned at Birth



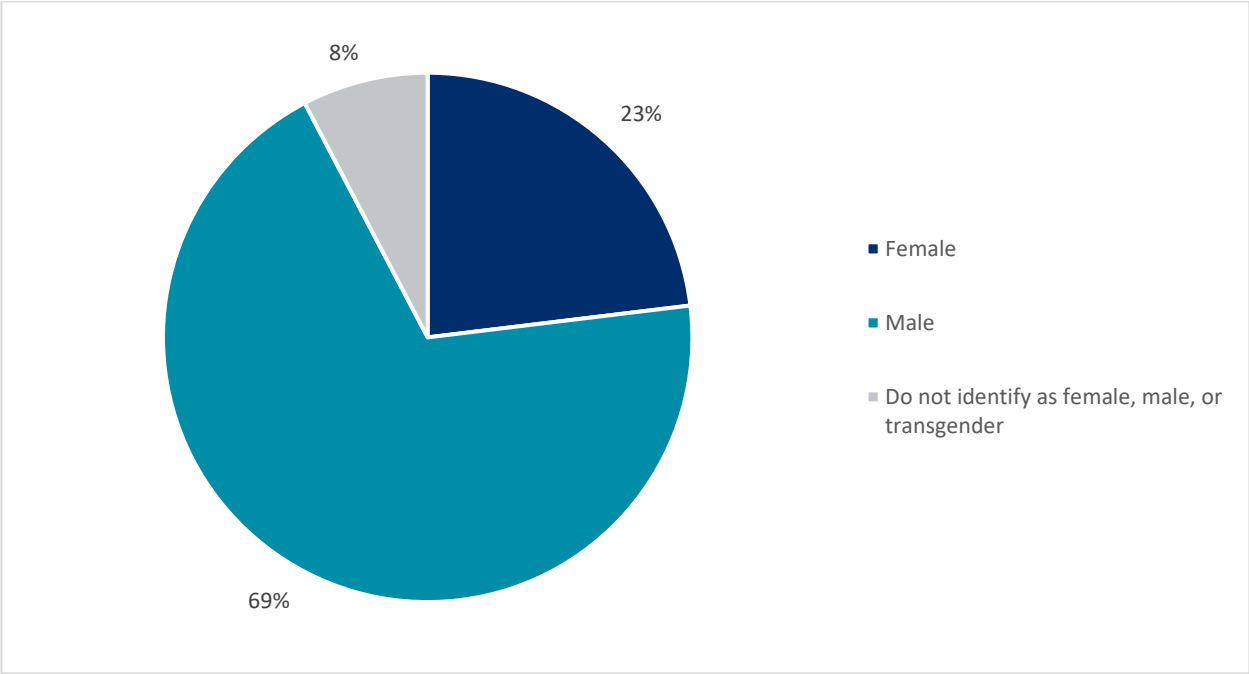
Note: $n = 13$.

¹ Asking two questions for sex assigned at birth and gender identity is considered a best practice by the UCLA Williams Institute and is the method used by the California Health Interview Survey.

Participants were then asked, “How do you describe yourself?” and selected from several options. As illustrated below, nine participants (69%) identify as male, three participants (23%) identify as female, and one participant (8%) does not identify as female, male, or transgender.

Further, among all participants, two identify with a gender that does not match their sex assigned at birth (one participant born male who identifies as female and one participant born male who does not identify as female, male, or transgender).

Figure 5. Gender Identity

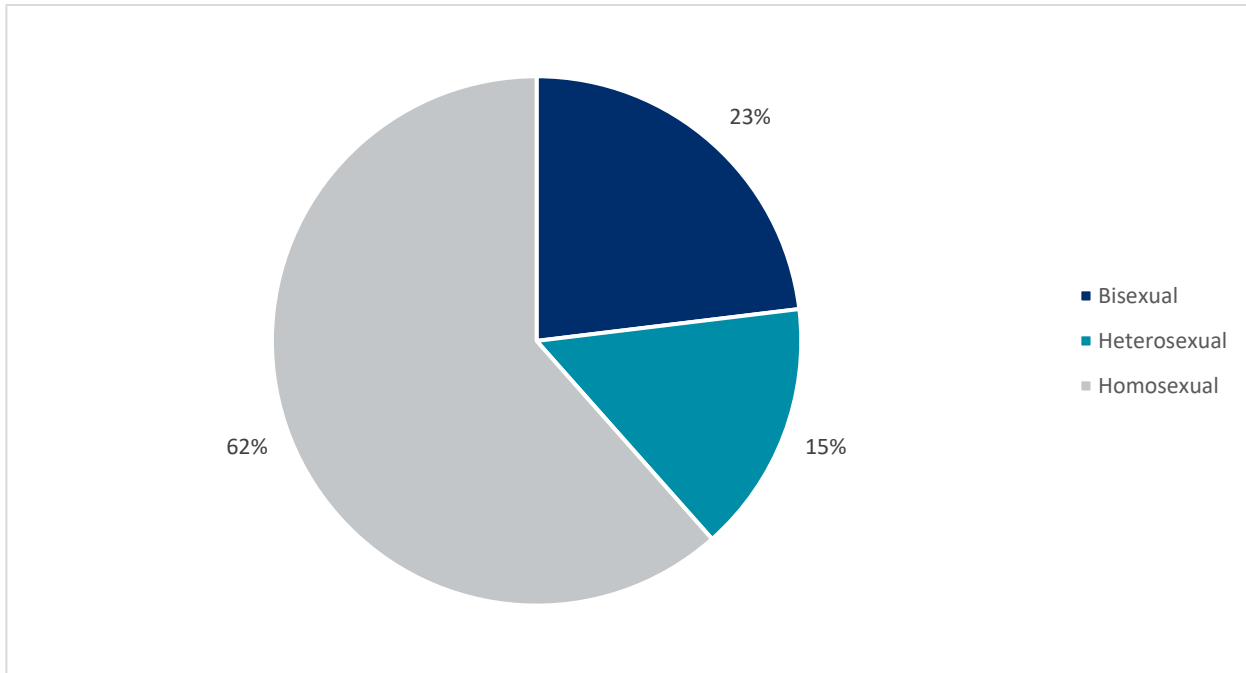


Note: $n = 13$.

Sexual Orientation

Participants were asked, “Do you consider yourself to be...?” and selected from a list of sexual orientations. As illustrated below, eight participants (62%) identify as homosexual, three participants (23%) identify as bisexual, and two participants (15%) identify as heterosexual.

Figure 6. Sexual Orientation

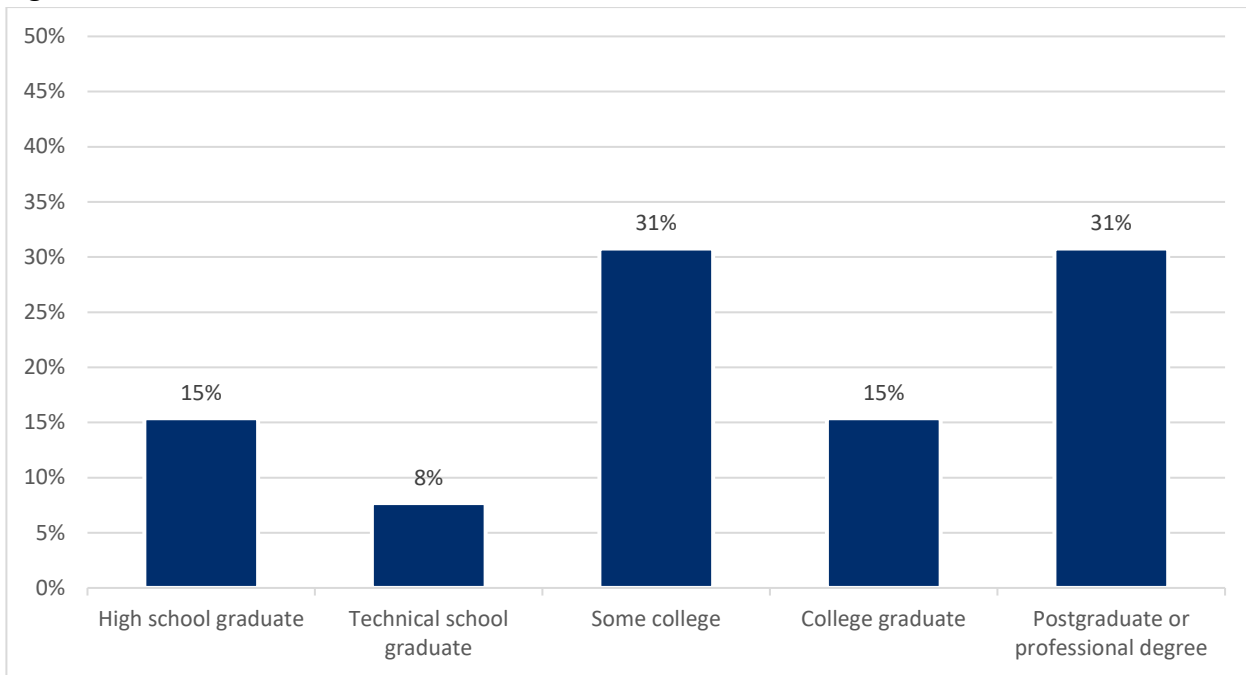


Note: $n = 13$.

Education

Participants were asked, “What is the highest grade or year of school you completed?” As illustrated below, two participants (15%) are high school graduates, one participant (8%) is a technical school graduate, four participants (31%) have some college, two participants (15%) are college graduates, and four participants (31%) have a postgraduate or professional degree.

Figure 7. Education



Note: $n = 13$.

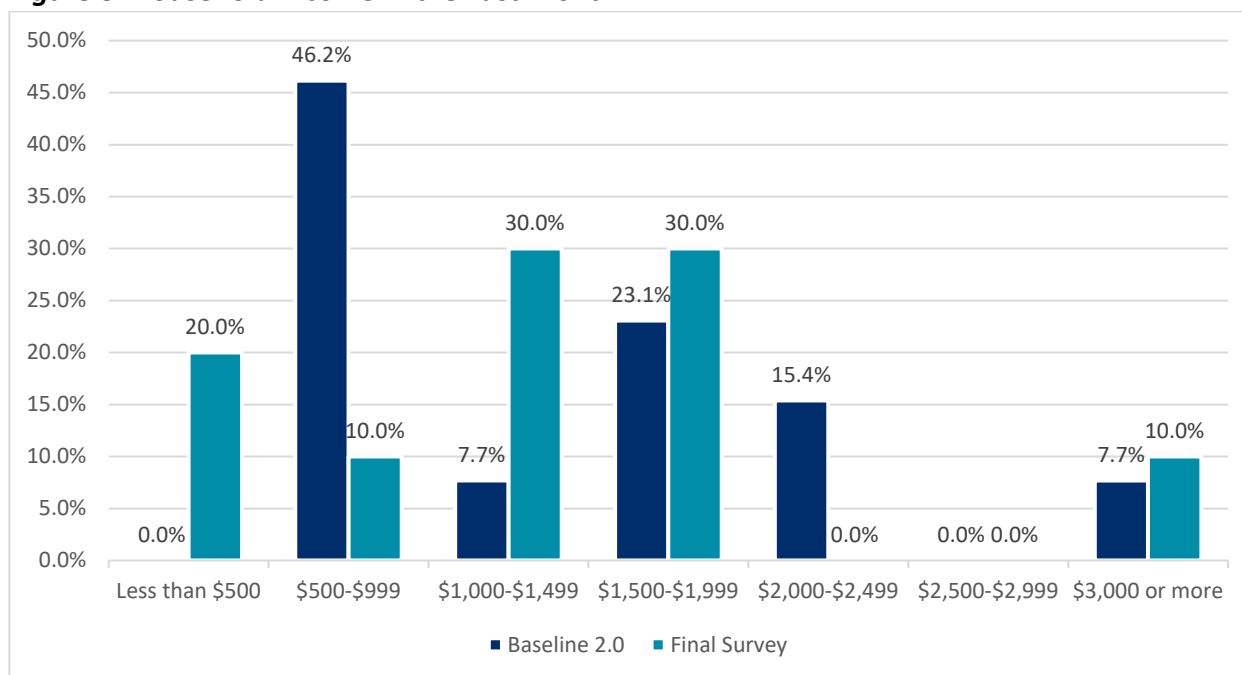
Income and Sources

Monthly Income

Note that because the baseline 2.0 survey was launched after the start of the UBI program, baseline monthly income would include the \$800 per month allotment. Comparisons are made between baseline 2.0 and the final survey.

Participants were asked, “Last month, what was your total household income from all sources?” and could select from several income categories. As illustrated below, among the baseline 2.0 survey participants, six participants (46%) earn between \$500 and \$999, one participant (8%) earns between \$1,000 and \$1,499, three participants (23%) earn between \$1,500 and \$1,999, two participants (15%) earn between \$2,000 and \$2,499, and one participant (8%) earns \$3,000 or more per month. Among the final survey participants, 20.0% made less than \$500,² 46.2% made between \$500 and \$999, 30.0% made between \$1,000 and \$1,499, 30.0% made between \$1,500 and \$1,999, and 10.0% made \$3,000 or more.

Figure 8. Household Income in the Last Month



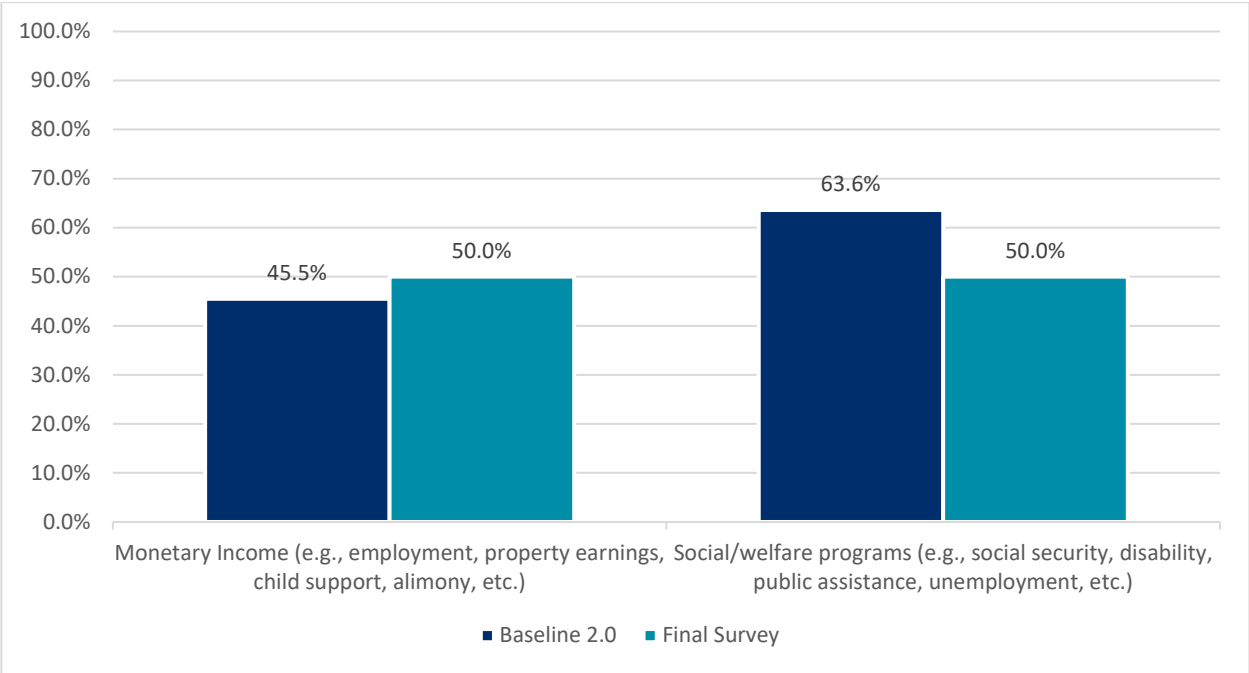
Note: Baseline 2.0 $n = 13$; Final Survey $n = 10$.

In addition to selecting their income category, participants were asked to specify their exact household income in the last month from all sources. Among these baseline 2.0 participants, the average (median) monthly household income was \$1,448, with a minimum of \$700 and a maximum of \$3,199. Among the final survey participants, the average (median) monthly household income was \$1,683, with a minimum of \$500 and a maximum of \$3,900.

² These two individuals took the final survey after they each had received their final UBI payment. Thus, they may not have included the UBI in calculating their monthly income. This may explain why they reported monthly income under \$800. It is possible that other participants may have likewise reported their income as not including the UBI in the final survey. Thus, comparisons of reported monthly income between the baseline 2.0 and final surveys should be made with caution.

Participants were also asked, “Last month, what were your sources of income?” and were instructed to select all that apply. As illustrated below, among the baseline 2.0 participants, more than half (63.6% or seven participants) had social/welfare program income, whereas 45.5% (five participants) had monetary income. Note that among the baseline 2.0 participants, one participant reported having both social/welfare program income and monetary income. Among the final survey participants, half (50.0%) had social/welfare program income, and half (50.0%) had monetary income.

Figure 9. Sources of Income

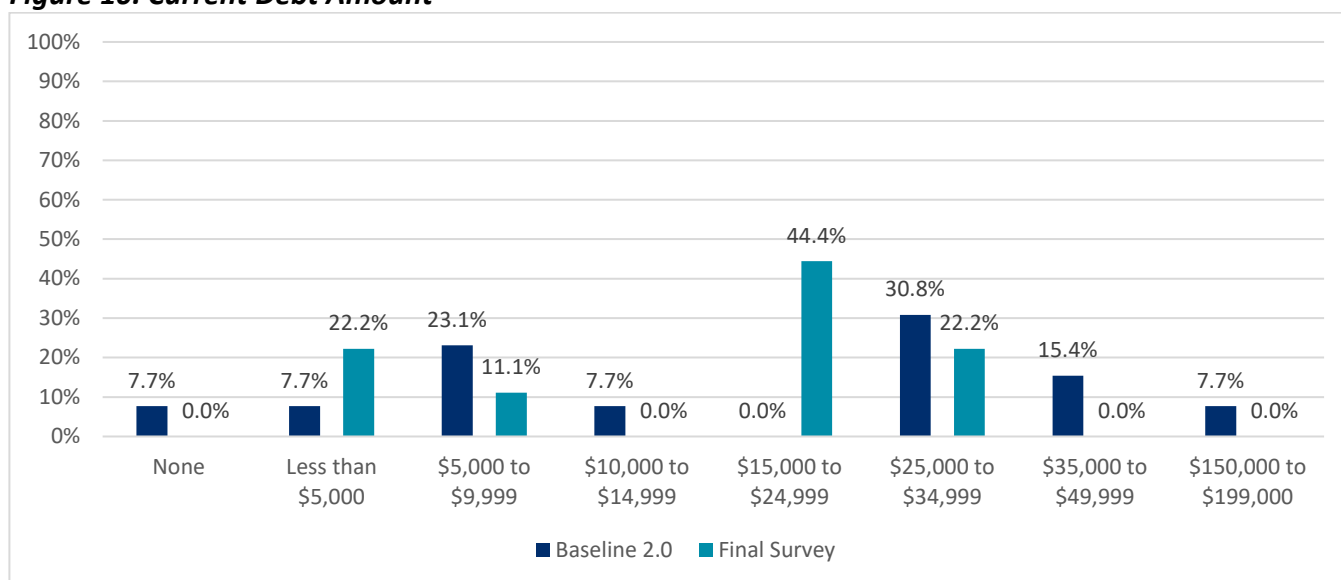


Note: Baseline 2.0 $n = 11$; Final Survey $n = 10$.

Debt Level and Causes

Participants were asked, “What is your current debt amount? This can include credit card debt, car loans, student loans, mortgages, etc.” and could select from several categories. As illustrated below, among the baseline 2.0 participants, 23.1% (three participants) had between \$5,000 and \$9,999 in debt, and 30.8% (four participants) had between \$25,000 and \$34,999 in debt. In all, slightly less than half (46.2%) had less than \$15,000 in debt, and a small majority (53.8%) had \$25,000 in debt or more. Among the final survey participants, 22.2% (two participants) had less than \$5,000 in debt, 11.1% (one participant) had between \$5,000 and \$9,999 in debt, 44.4% (four participants) had between \$15,000 and \$24,999 in debt, and 22.2% (two participants) had between \$25,000 and \$34,999 in debt.

Figure 10. Current Debt Amount

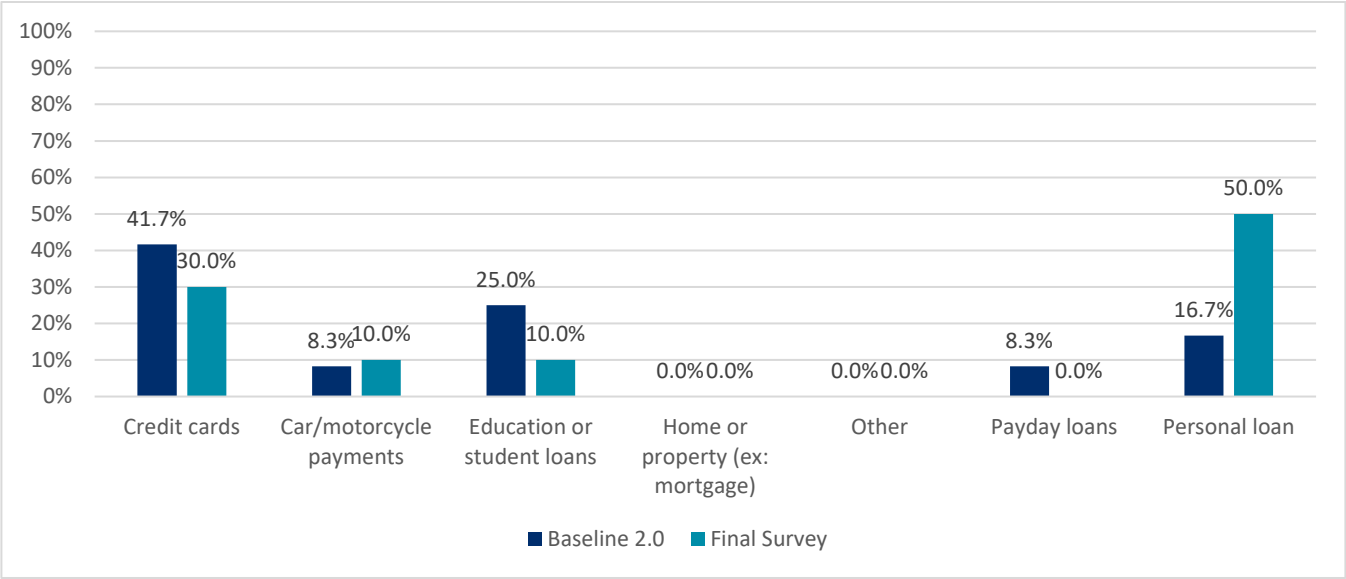


Note: Baseline 2.0 $n = 11$; Final Survey $n = 9$.

In addition to selecting an amount category for their debt, participants were asked to specify their exact debt amount. Among these baseline 2.0 participants, the average (median) amount of debt was \$27,025, with a minimum of \$0 and a maximum of \$170,000. Among final survey participants, the average (median) amount of debt was \$22,473, with a minimum of \$9,000 and a maximum of \$30,000.

Participants were then asked, “What is your largest source of debt? Select only one.” As illustrated below, among baseline 2.0 participants, most participants’ largest source of debt was credit cards (41.7%; five participants), followed by education or student loans (25.0%; three participants). Among the final survey participants, the largest source of debt was personal loans (50.0%; five participants), followed by credit cards (30.0%; three participants).

Figure 11. Largest Debt Source

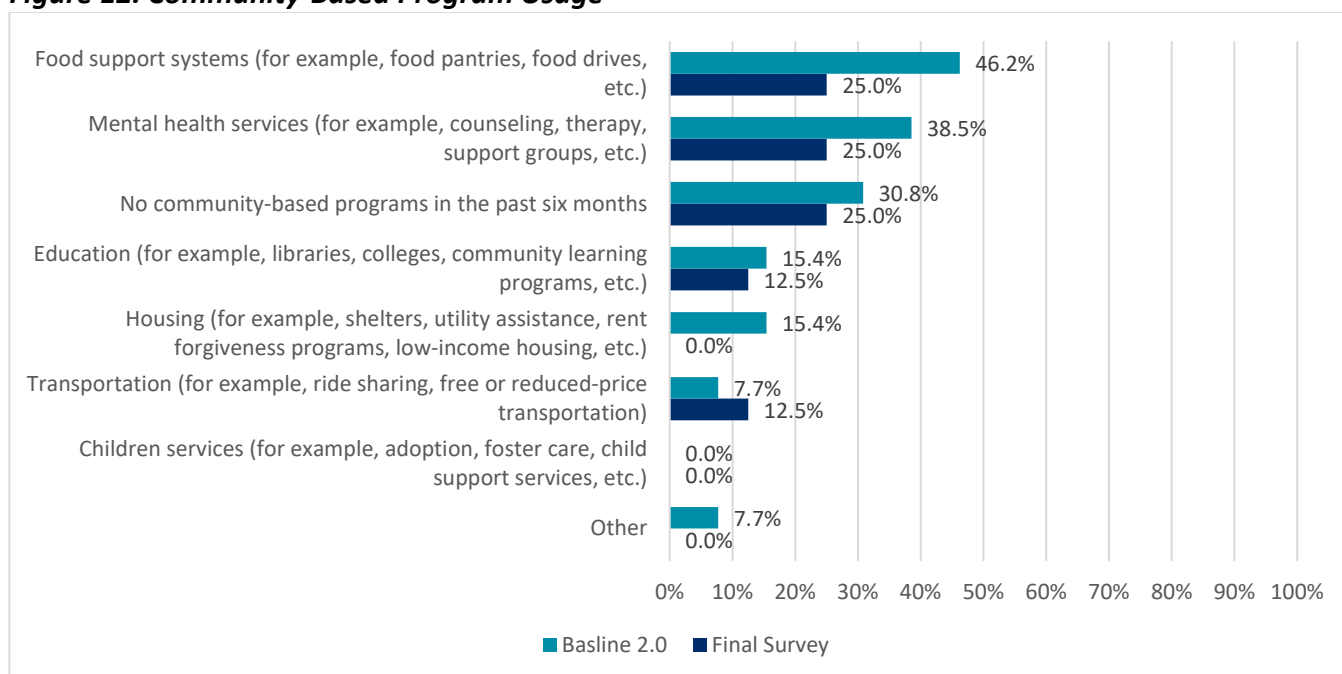


Note: Baseline 2.0 *n* = 11; Final Survey *n* = 10.

Community-Based Programs

Participants were prompted with the following: “Community-based programs are services provided by nonprofits and County agencies. These programs vary widely. Examples are provided in the responses below.” Then, participants were asked, “In the last six months, which of the following general programs have you participated in?” and were instructed to select all that apply. As illustrated below, among baseline 2.0 participants, nearly half (46.2%; six participants) reported using food support systems, followed by 38.5% (five participants) that reported using mental health services and 30.8% (four participants) that reported not using any community-based programs in the past six months. Among final survey participants, one-quarter (25.0%; two participants) reported using food support systems, one-quarter (25%; two participants) reported using mental health services, and another quarter (25.0%; two participants) reported not using community-based programs.

Figure 12. Community-Based Program Usage

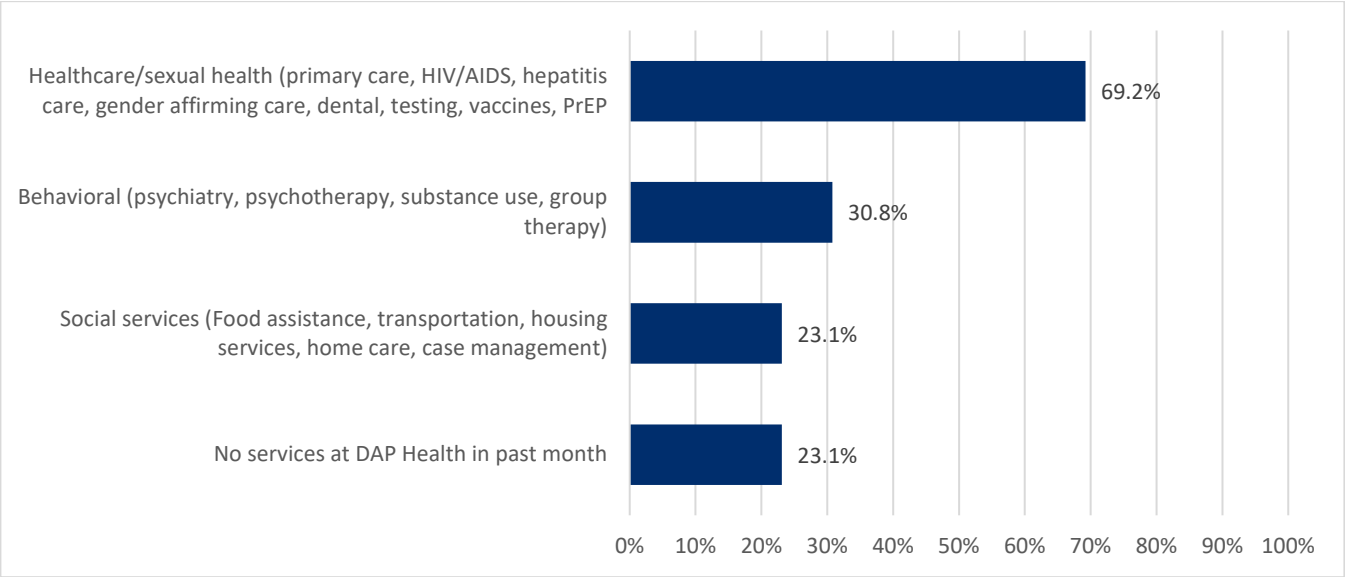


Note: Baseline 2.0 $n = 11$; Final Survey $n = 8$.

Resources

Participants were asked, “Which of the following resources/services have you used within the last month at DAP Health?” and were instructed to select all that apply.³ As illustrated below, among the baseline 2.0 participants, 69.2% (nine participants) used healthcare/sexual health services, 30.8% (four participants) used behavioral health services, and 23.1% (three participants) used social services at DAP Health. Further, 23.1% (three participants) reported using no services at DAP Health in the last month.

Figure 13. Resources Utilized at DAP Health in the Last Month



Note: Baseline 2.0 n = 13

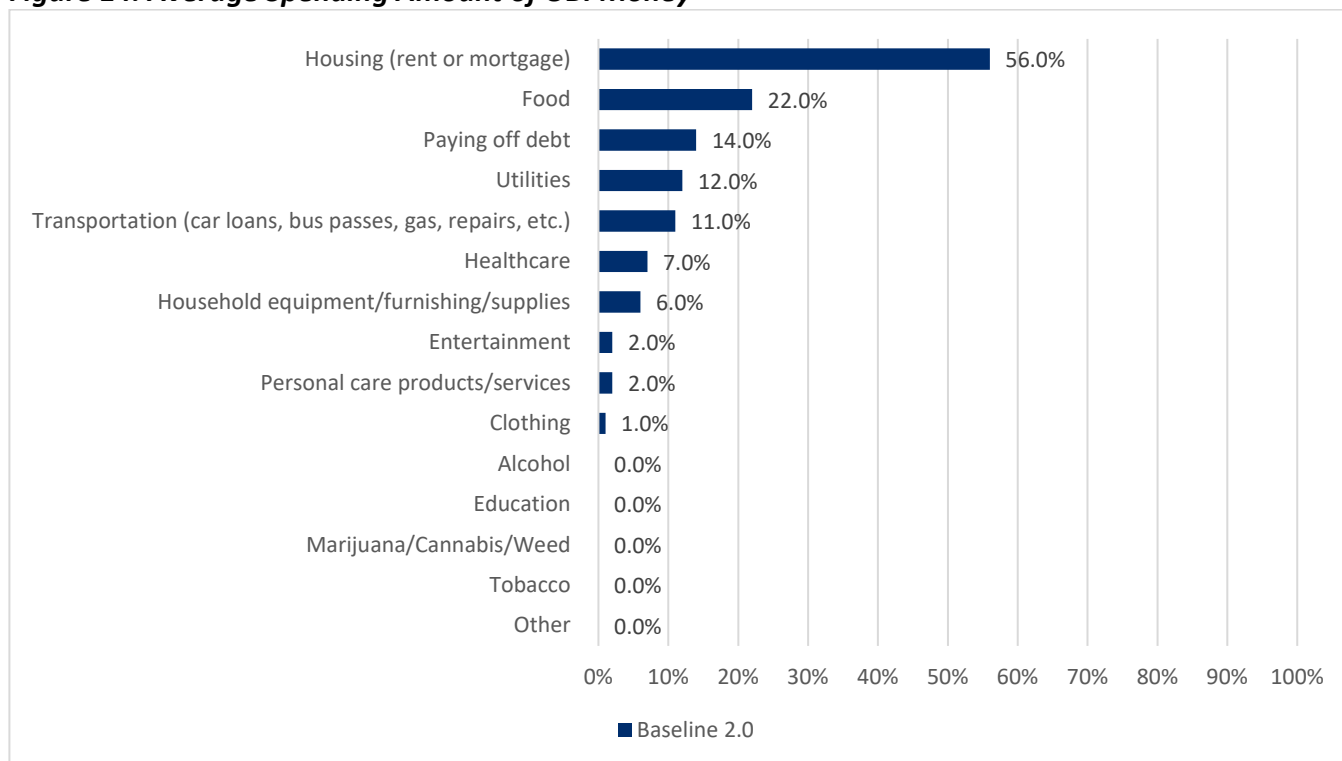
³ The baseline 2.0 survey was launched in March 2024, when Queer Works was still overseeing the UBI program. Thus, the survey also had a question asking what services participants received from QueerWorks. No participants reported receiving services from Queer Works.

Spending of UBI Money

Participants were prompted with a statement to evoke honest reporting in the spending of the monthly \$800: “This next question asks about the spending of the \$800 you’re given each month through the Queer Works/DAP program. **You’re allowed to spend the money on whatever you want, and we respect that. Responses here are confidential and will NOT impact payments.** We just want to learn what money is generally spent on. We’d like to know the percentage of areas you use this money. *Just estimating this is okay.*” Then, clients were asked, “What percent of each category is spent using the \$800 from DAP Health?”

Responses were averaged, and as illustrated below, among baseline 2.0 participants, most participants allocated their monthly \$800 to housing costs. Among the 12 participants who responded to this question, 11 reported spending their monthly \$800 on housing (ranging from 30.0% to 100.0% of their \$800). On average, participants spent 56.0% of their monthly \$800 on housing. Further, participants spent on average 22.0% on food, 14.0% on paying off debt, 12.0% on utilities, and 11.0% on transportation. See the figure below for further details.

Figure 14. Average Spending Amount of UBI Money



Note: Baseline 2.0 $n = 11$.

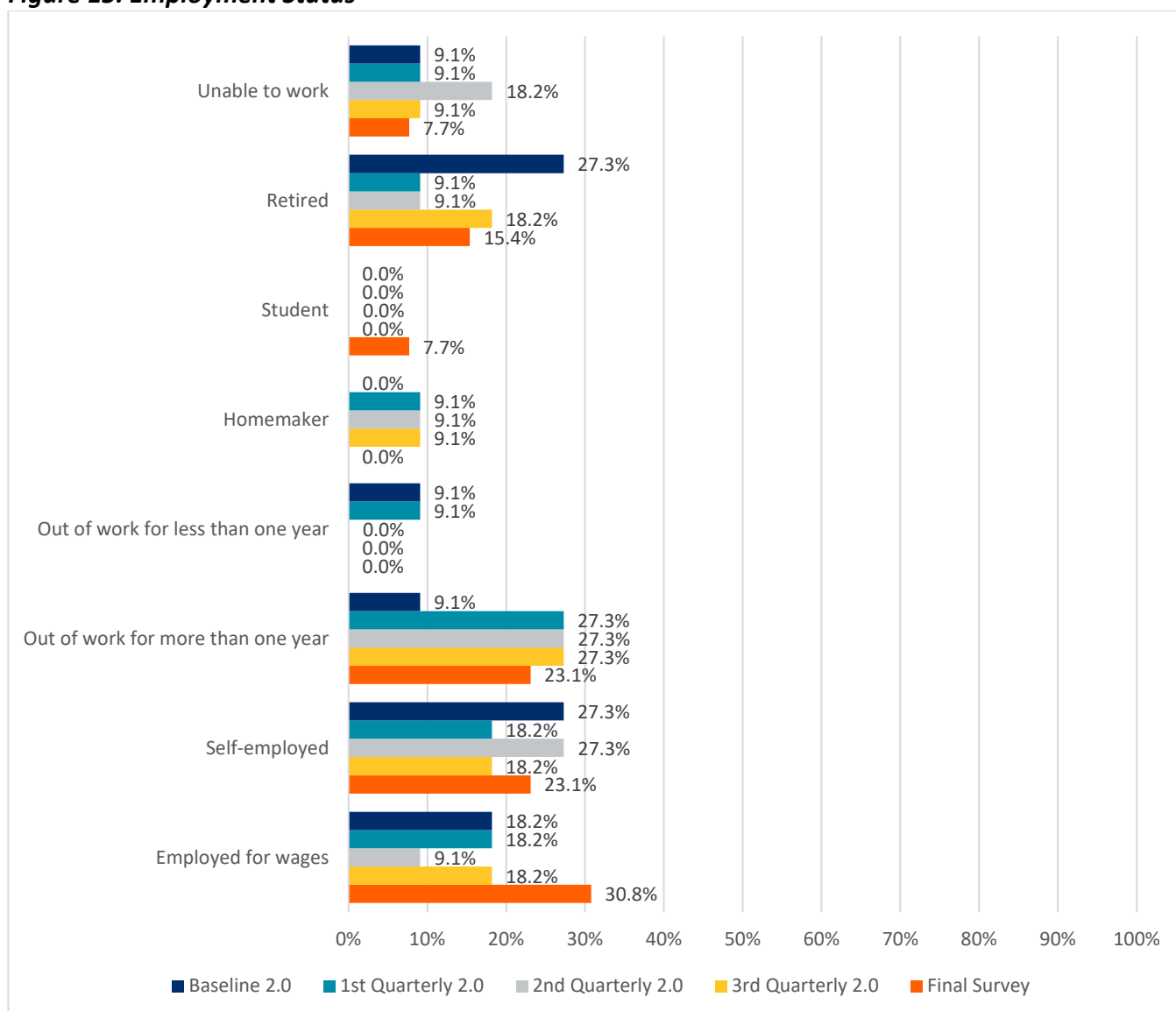
Comparisons: Baseline 2.0 Survey, Quarterly 2.0 Surveys, and Final Survey

This portion of the report details comparisons from the baseline 2.0 survey results, the three quarterly 2.0 survey results, and the final survey results. Note that because the sample size for the final survey results did not include all participants for the previous surveys, interpretations of comparisons with the final survey results should be made with caution.

Employment Status

Participants were asked, “Are you currently...?” and were provided with a list of employment status options. As illustrated below, employment status didn’t vary largely, with many participants being out of work for more than one year, self-employed or employed for wages. One participant (7.7%) reported becoming a student by the end of the program. At baseline 2.0, two participants (18.2%) were employed for wages, and by the end of the program, four participants (30.8%) were employed for wages.

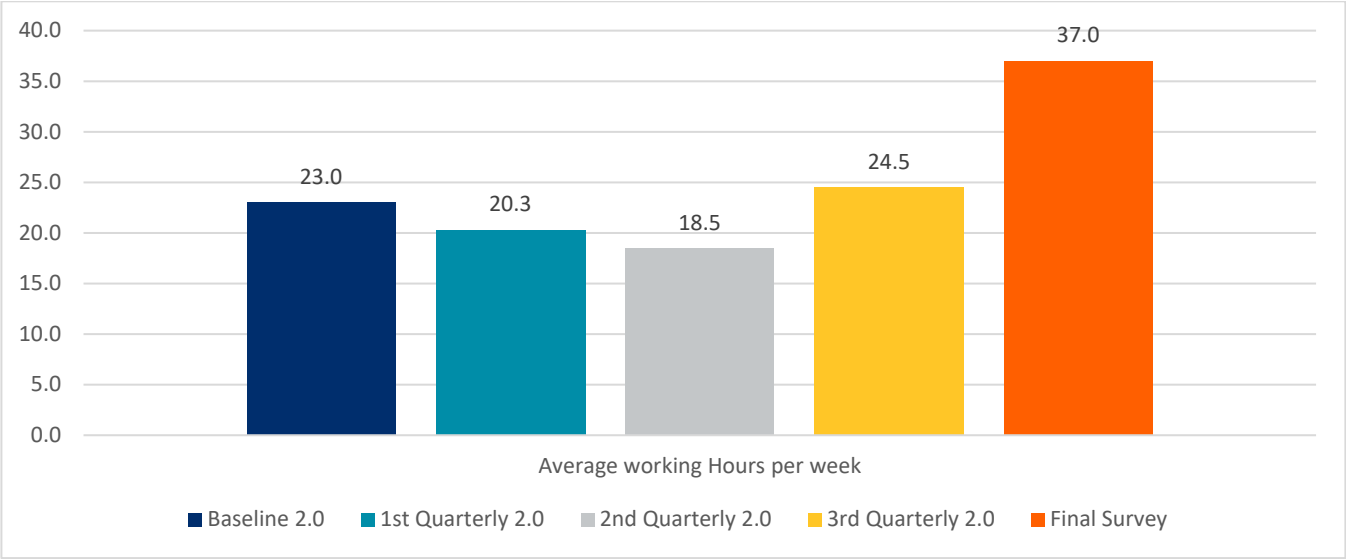
Figure 15. Employment Status



Note: Baseline 2.0 $n = 11$; 1st Quarterly 2.0 $n = 11$; 2nd Quarterly 2.0 $n = 11$; 3rd Quarterly 2.0 $n = 11$; Final Survey $n = 13$.

Participants were also asked, “On average, how many hours per week do you work?” Only four participants provided their number of working hours in the baseline 2.0 survey, only three participants provided this number in the first quarterly 2.0 survey, and only four in the final survey. The number of working hours was averaged for each survey. As illustrated below, the average number of working hours ranged between 23.0 hours and 37.0 hours.

Figure 16. Average Working Hours per Week

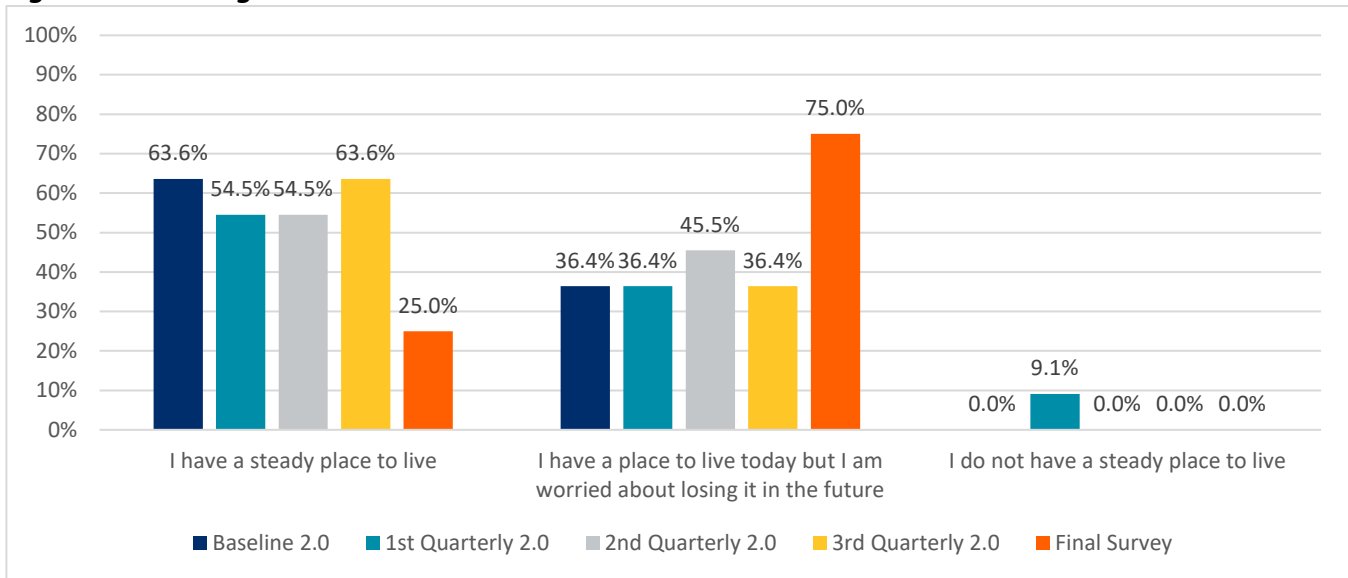


Note: Baseline 2.0 $n = 4$; 1st Quarterly 2.0 $n = 11$; 2nd Quarterly 2.0 $n = 11$; 3rd Quarterly 2.0 $n = 11$; Final Survey $n = 4$.

Housing Status

Participants were asked, “What is your living situation today?” As illustrated below, a majority had a steady place to live in each of the surveys except for the final survey (for which only four participants provided their housing status).

Figure 17. Housing Status



Note: Baseline 2.0 $n = 11$; 1st Quarterly 2.0 $n = 11$; 2nd Quarterly 2.0 $n = 11$; 3rd Quarterly 2.0 $n = 11$; Final Survey $n = 4$.

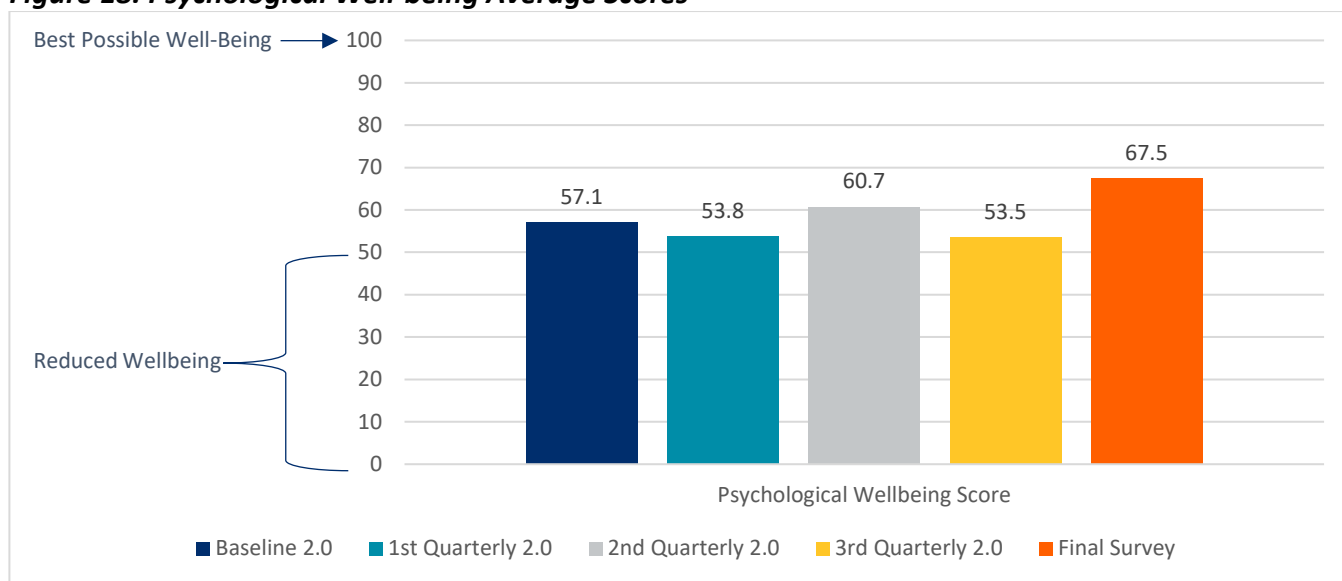
Psychological Well-Being

Psychological well-being was measured through the WHO-5, a well-being index developed by the World Health Organization⁴. The index includes five items of well-being that are rated on a scale ranging from *all of the time* to *at no time*. See the appendix for the five questions and rating options.

The sum of all responses is converted to a percentage score that ranges from 0% (worst possible quality of life) to 100% (best possible quality of life). Altogether, a higher percentage indicates better well-being. A score of less than 50 indicates reduced well-being and a possible marker for clinical depression⁵.

The baseline 2.0 and quarterly surveys included results from the same 11 participants. However, only four participants provided input for this question. As illustrated below, participants had an average well-being score ranging from 53.5 to 67.5.

Figure 18. Psychological Well-being Average Scores



Note: Baseline 2.0 $n = 11$; 1st Quarterly 2.0 $n = 11$; 2nd Quarterly 2.0 $n = 11$; 3rd Quarterly 2.0 $n = 11$; Final Survey $n = 8$.

⁴ Topp, C. W., Østergaard, S. D., Søndergaard, S., & Bech, P. (2015). The WHO-5 Well-Being Index: a systematic review of the literature. *Psychotherapy and psychosomatics*, 84(3), 167-176.

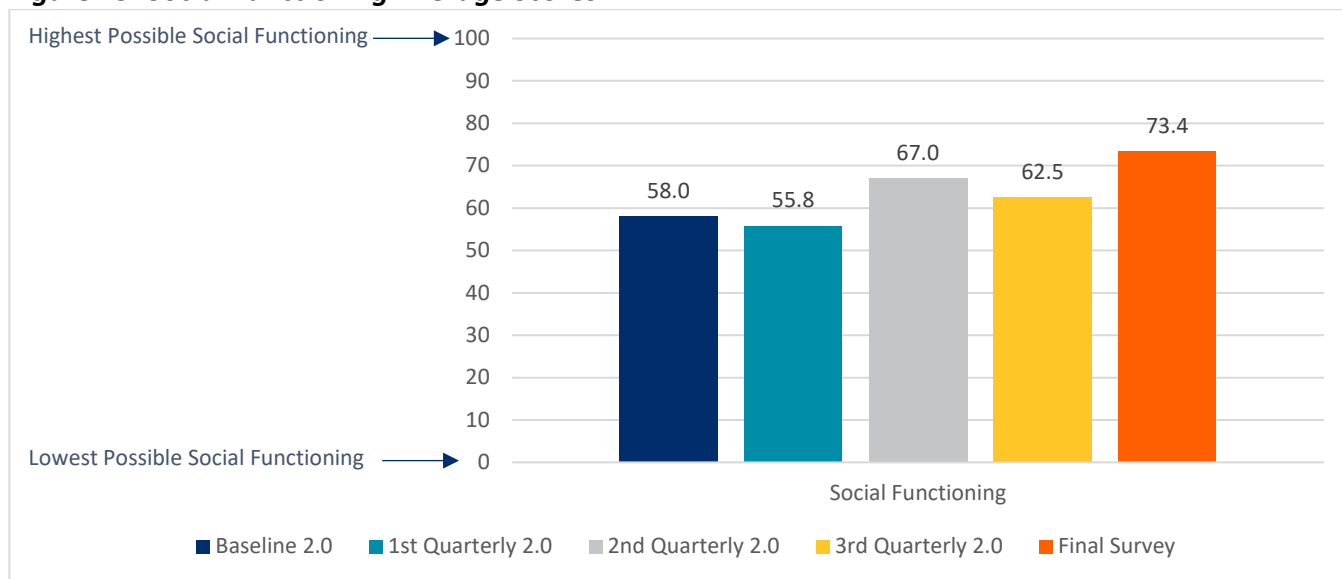
⁵ Ibid.

Social Functioning

Social functioning was assessed using the social functioning subscale from the RAND 36-Item Health Survey⁶. A scale average is computed in which higher scores indicate higher social functioning (e.g., performs normal social activities without interference due to physical or emotional problems) and lower scores indicate lower social functioning (e.g., extreme and frequent interference with normal social activities due to physical and emotional problems)⁷. These scores can range from zero to 100. See the appendix for the five questions and rating options.

Likewise, the baseline 2.0 and quarterly surveys included results from the same 11 participants. However, only eight participants in the final survey provided input for this specific question. As illustrated in the figure below, there appears to be a general trend of improved social functioning from baseline 2.0 to the final survey.

Figure 19. Social Functioning Average Scores



Note: Baseline 2.0 $n = 11$; 1st Quarterly 2.0 $n = 11$; 2nd Quarterly 2.0 $n = 11$; 3rd Quarterly 2.0 $n = 11$; Final Survey $n = 8$.

⁶ RAND Corporation. 36-Item short-form survey instrument (SF-36). https://www.rand.org/health-care/surveys_tools/mos/36-item-short-form/survey-instrument.html

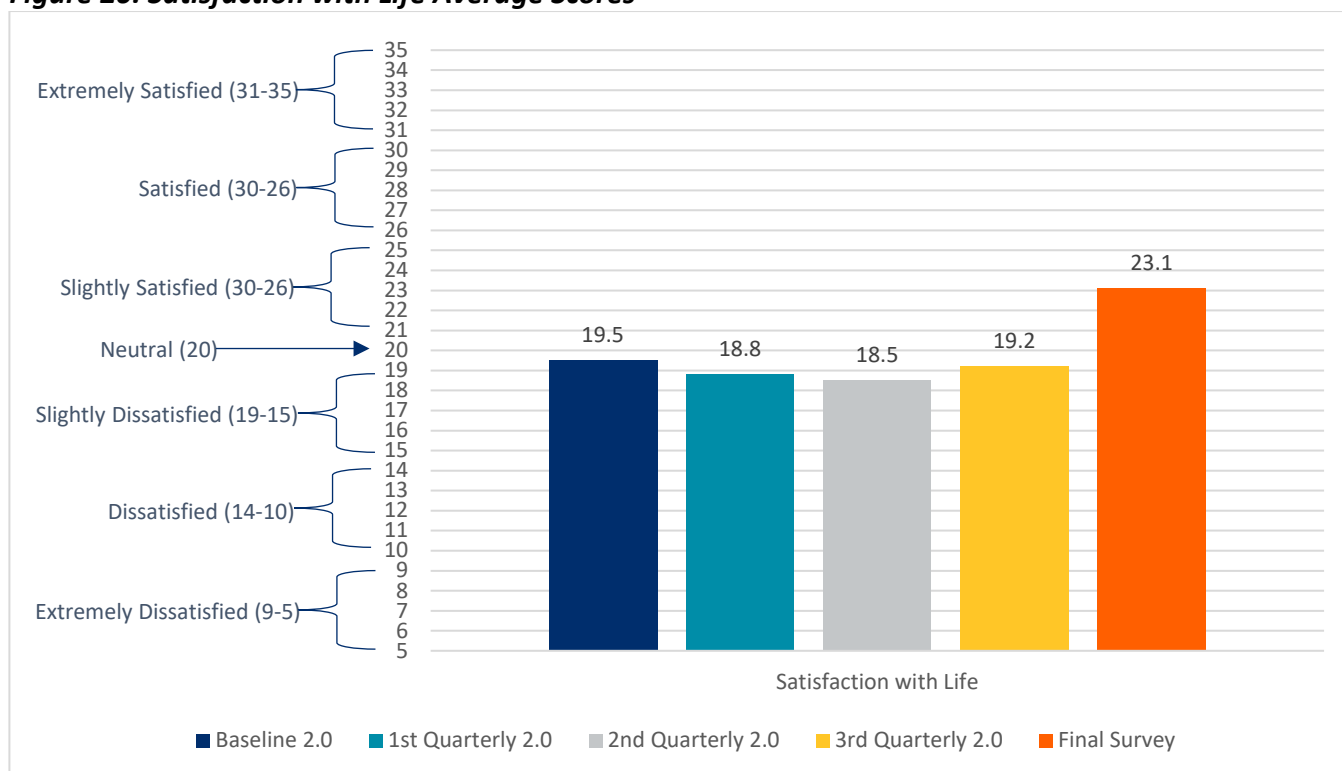
⁷ Ware Jr, J. E., & Sherbourne, C. D. (1992). The MOS 36-item short-form health survey (SF-36): I. Conceptual framework and item selection. *Medical care*, 473-483.

Satisfaction with Life

Satisfaction with life was assessed using the satisfaction with life scale⁸. A scale sum is computed in which higher scores indicate higher levels of satisfaction with life, and lower scores indicate lower satisfaction with life. Benchmarks are also available for this scale. These scores can range from five to 35. See the appendix for the five questions and rating options.

Likewise, the baseline 2.0 and quarterly surveys included results from the same 11 participants. However, only eight participants in the final survey provided input for this question. As illustrated below, satisfaction with life scores improved from the baseline 2.0 to the final survey. While this improvement is noteworthy, it is important to point out that these scores are still concerningly low. The satisfaction with life scale has cut-offs for some interpretation⁹. The baseline 2.0 average score is considered *neutral*, and the highest average score for the final survey is considered *slightly satisfied with life*.

Figure 20. Satisfaction with Life Average Scores



Note: Baseline 2.0 $n = 11$; 1st Quarterly 2.0 $n = 11$; 2nd Quarterly 2.0 $n = 11$; 3rd Quarterly 2.0 $n = 11$; Final Survey $n = 8$.

⁸ Diener, E., Emmons, R. A., Larsen, R. J., & Griffin, S. (1985). The Satisfaction with Life Scale. *Journal of Personality Assessment*, 49(1), 71-75.

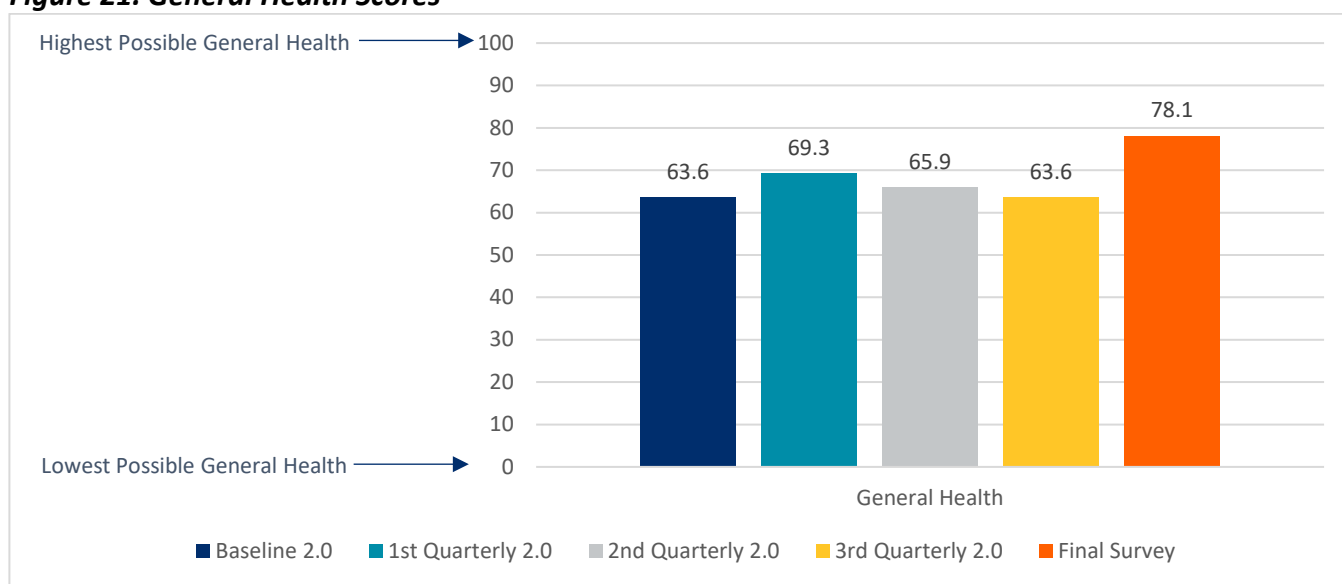
⁹ Ibid: extremely satisfied (31-35), satisfied (26-30), slightly satisfied (21-25), neutral (20), slightly dissatisfied (15-19), dissatisfied (10-14), and extremely dissatisfied (5-9).

General Health

General health was assessed using the general health subscale from the RAND 36-Item Health Survey¹⁰. A scale average is computed in which higher scores indicate higher levels of general health (e.g., believes personal health is excellent), and lower scores indicate lower general health (e.g., believes personal health is poor and likely to worsen)¹¹. These scores can range from zero to 100. See the appendix for the five questions and rating options.

Similarly, the baseline 2.0 and quarterly surveys included results from the same 11 participants. However, only eight participants in the final survey provided input for this question. As illustrated below, general health scores slightly improved from the baseline 2.0 survey to the final survey.

Figure 21. General Health Scores



Note: Baseline 2.0 $n = 11$; 1st Quarterly 2.0 $n = 11$; 2nd Quarterly 2.0 $n = 11$; 3rd Quarterly 2.0 $n = 11$; Final Survey $n = 8$.

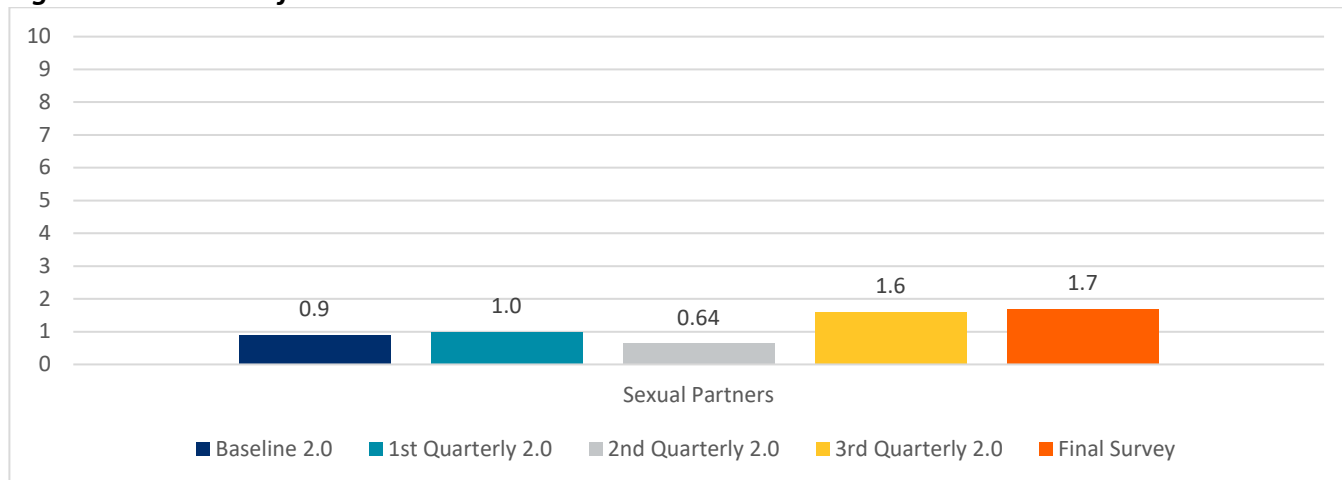
¹⁰ RAND Corporation. 36-Item short-form survey instrument (SF-36). https://www.rand.org/health-care/surveys_tools/mos/36-item-short-form/survey-instrument.html

¹¹ Ware Jr, J. E., & Sherbourne, C. D. (1992). The MOS 36-item short-form health survey (SF-36): I. Conceptual framework and item selection. *Medical care*, 473-483.

Sexual Health

Sexual health was determined by asking for the number of sexual partners and the number of times tested for sexually transmitted infections (STIs). STIs do not always have apparent symptoms, making it possible to infect others or be infected without a person knowing¹². Consequently, STI testing is imperative for all sexually active persons. Participants were asked, “In the past six months, how many sexual partners have you had?” As illustrated below, the average number of sexual partners did not greatly vary, ranging from a low of 0.9 to 1.7.

Figure 22. Number of Sexual Partners

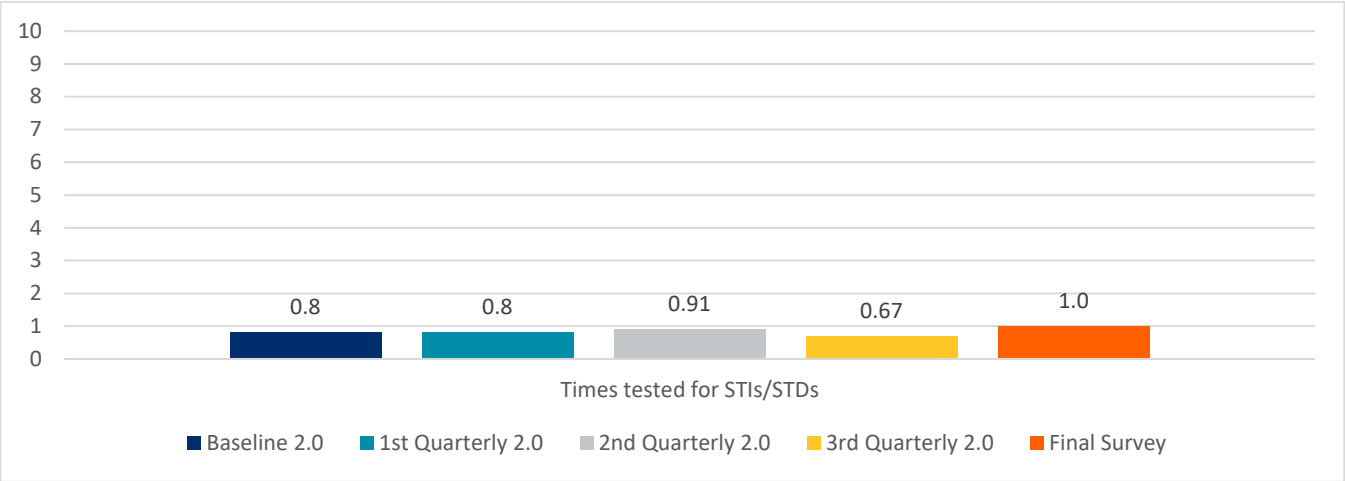


Note: Baseline 2.0 $n = 11$; 1st Quarterly 2.0 $n = 11$; 2nd Quarterly 2.0 $n = 11$; 3rd Quarterly 2.0 $n = 11$; Final Survey $n = 7$.

¹² Sexually Transmitted Diseases (STDs). (2023). Centers for Disease Control and Prevention. <https://www.cdc.gov/std/general/default.htm>

Participants were provided the follow-up question: “In the past six months, how many times have you been tested for sexually transmitted infections/sexually transmitted diseases?” The average number of times participants were tested for STIs ranged from 0.8 times at baseline 2.0 to 1.0 times at the final survey.

Figure 23. Number of Times Tested for STIs/STDs

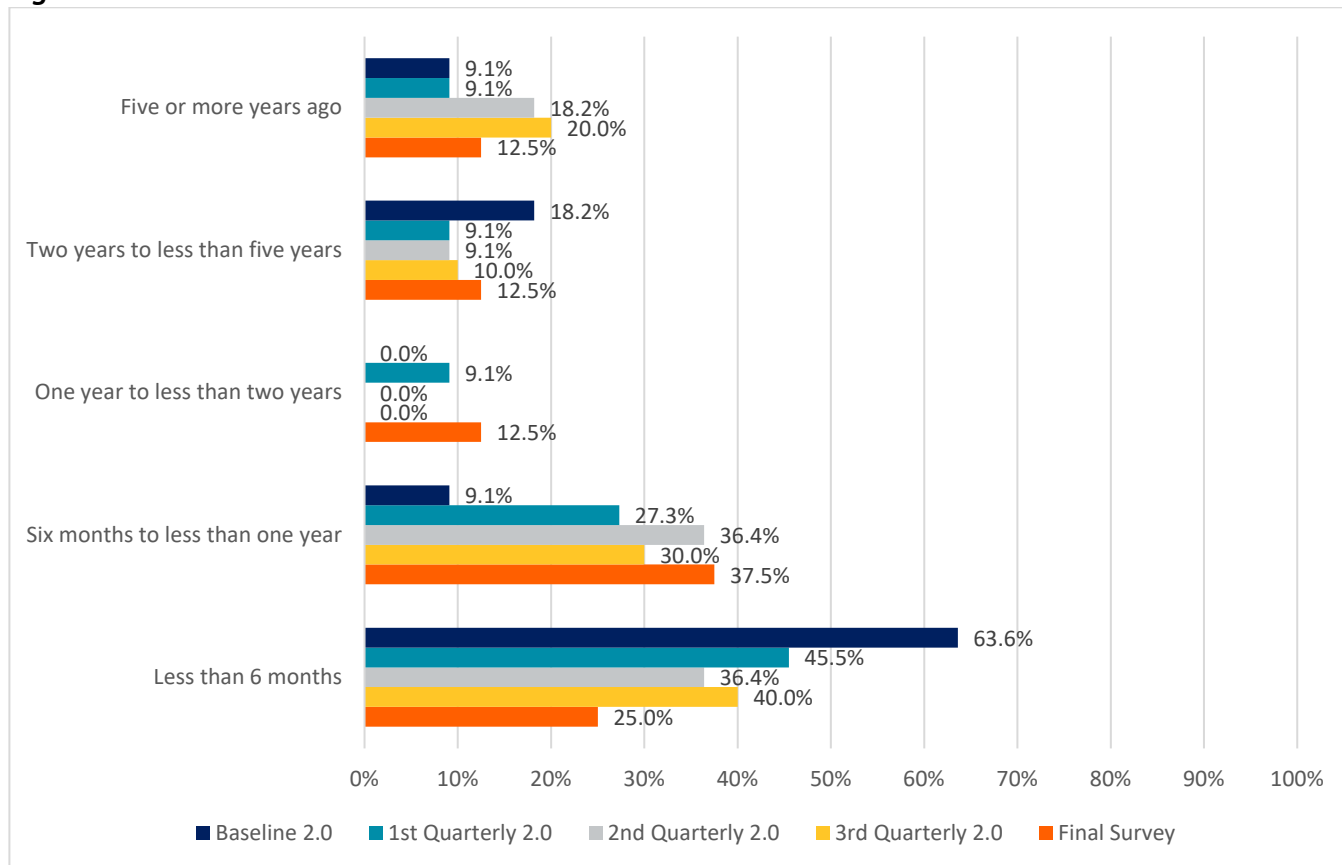


Note: Baseline 2.0 $n = 11$; 1st Quarterly 2.0 $n = 11$; 2nd Quarterly 2.0 $n = 11$; 3rd Quarterly 2.0 $n = 11$; Final Survey $n = 7$.

Dental Utilization

To determine dental visits, participants were asked, “About how long has it been since you last saw a dentist? Include all types of dentists, such as orthodontists, oral surgeons, and all other dental specialists, as well as dental hygienists.” As illustrated below, time since last dental visit did not change dramatically between the surveys aside from almost two-thirds (63.6%) of baseline 2.0 participants who saw a dentist less than six months ago compared to one-quarter (25.0%) of final survey participants who saw a dentist less than six months ago. See the figure below for further details.

Figure 24. Time Since Last Dentist Visit

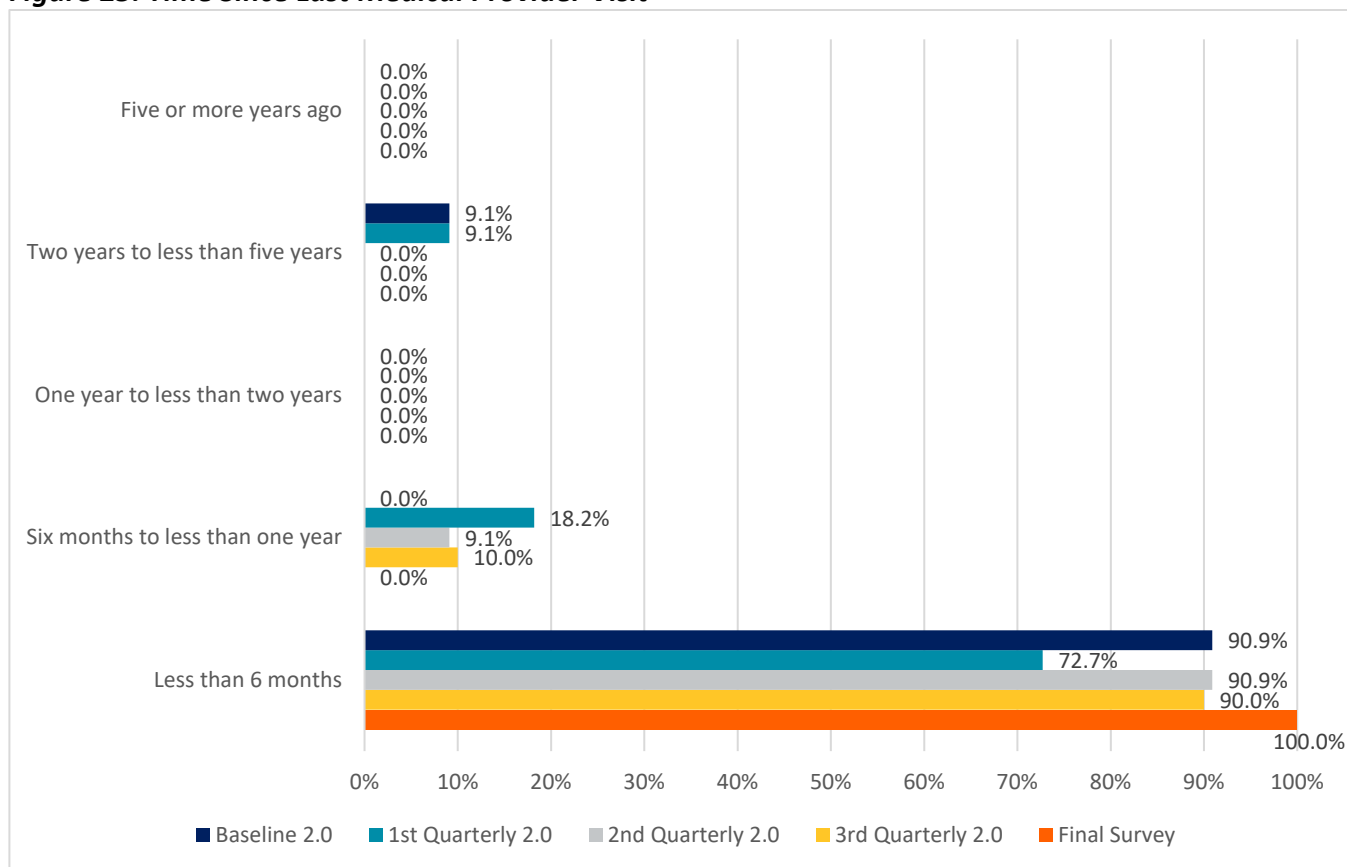


Note: Baseline 2.0 $n = 11$; 1st Quarterly 2.0 $n = 11$; 2nd Quarterly 2.0 $n = 11$; 3rd Quarterly 2.0 $n = 11$; Final Survey $n = 7$.

Medical Utilization

Participants were asked, “About how long has it been since you last visited a doctor, family doctor, nurse practitioner, or other health care provider such as specialists?” As illustrated below, there were a few changes between the surveys. In all of the surveys, a large majority of participants had seen a doctor less than six months ago.

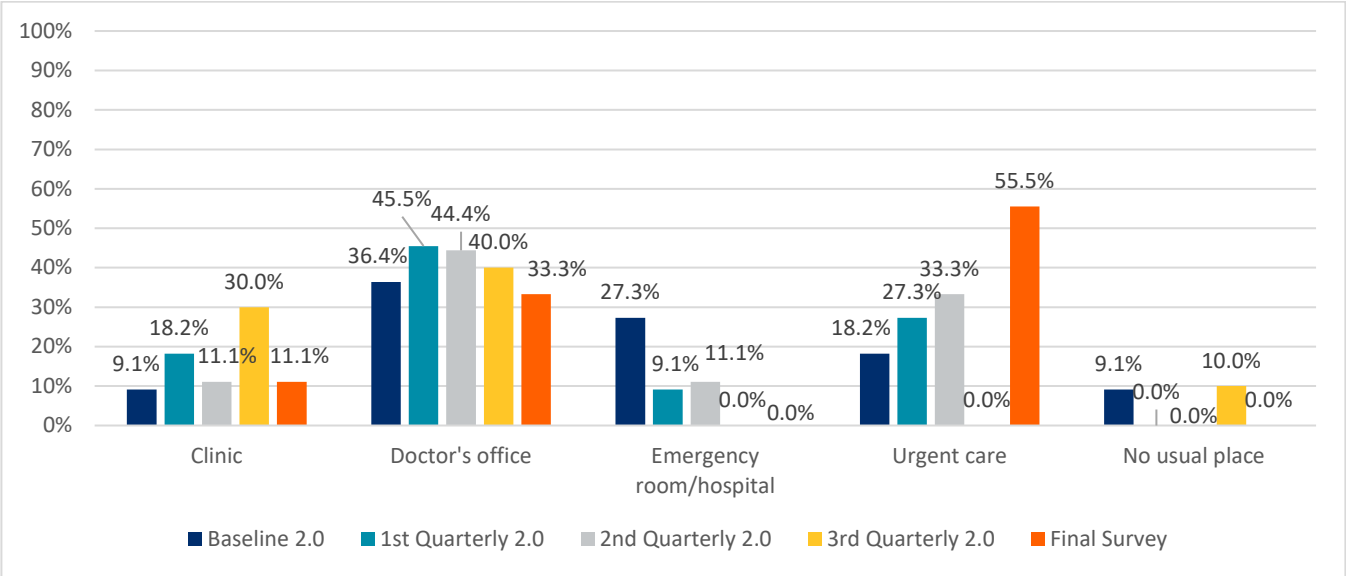
Figure 25. Time Since Last Medical Provider Visit



Note: Baseline 2.0 $n = 11$; 1st Quarterly 2.0 $n = 11$; 2nd Quarterly 2.0 $n = 11$; 3rd Quarterly 2.0 $n = 11$; Final Survey $n = 9$.

Participants were asked, “When you are sick or in need of health care, where do you usually go?” As illustrated below, usual source of care didn’t greatly vary, with a plurality of participants selecting doctor’s office, with the exception of the final survey, where a majority selected urgent care.

Figure 26. Usual Source of Care



Note: Baseline 2.0 $n = 11$; 1st Quarterly 2.0 $n = 11$; 2nd Quarterly 2.0 $n = 11$; 3rd Quarterly 2.0 $n = 10$; final survey $n = 9$.

Participants Comments

Participants were asked if they had any comments they would like to share. As shown in the table below, comments were largely positive, expressing gratitude for the program.

Survey Participant Open Comments

Grateful for the \$800/month. Thank you.

I really hope this program can be extended and expanded because without, I literally wouldn't be able to survive without it.

The extra \$800 sure DOES help out a GREAT deal.

None

I am grateful for your generous assistance.

Not today

It has been an important safety net

Debt reduction

Making me feel supported and safe

It has afforded me the opportunity to change my life's circumstances, it has taken me out of survival mode, it has given me some wiggle room to make more informed choices, and it has helped me to alleviate some financial stress.

It gave me more freedom and created less stress

Gave me more options and less stress

Conclusion

This report has provided findings from the baseline 2.0, quarterly 2.0, and final surveys for participants of the UBI pilot program managed initially by Queer Works and later by DAP Health. The results are limited given the small sample size and the difficulty of collecting consistent reporting for the final survey. Nevertheless, the data collected suggests the potential for UBI to impact recipients' lives meaningfully.

Being a low-income individual was a requirement for this pilot, and the demographic information reflects this: participants were low-income, many of whom with substantial debt burdens. When spending UBI funds, participants prioritized essentials such as housing, food, utilities, and debt payments, and by the last quarter of the program, all had a steady place to live. This all suggests the program aided in providing financial security.

Further comparisons across all surveys showed further promising findings. By the end of the program, one participant reported becoming a student and two additional participants reported finding wage-paying employment, effectively doubling the number of individuals employed for wages. Additionally, all measures of well-being—psychological well-being, social functioning, satisfaction with life, and general health—showed improvements by the end of the program. Participants' open-ended comments reflected these changes. Several participants mentioned that the program reduced their stress, one said it was “an important safety net,” and another said it helped them “feel supported and safe.” These results suggest that UBI income, when provided to a financially strained sub-population with acute basic needs, has meaningful impacts on participants' financial security and overall well-being.

Appendix: Surveys

Baseline Survey

Survey	Section	Notes/Source	Question/Text/Information	Responses/Action
Baseline	Introductory Page		<p><i>[Jacob to include a small blurb for each survey] Possible example provided below.</i></p> <p>This is the [monthly, three-month, six-month survey] for the \$800 provided by Queer Works and DAP Health. This survey is to be completed every month, before the 15th of each month. Please take your time in responding and answer each question to the best of your ability. <i>Different survey links will be sent to you at different months of the year. So only participate in the survey link when sent to you.</i></p> <p>Your answers are confidential with HARC researchers, DAP Health, and Queer Works. We will not share your data; rather, the responses of all participants will be reported. We may pull quotes from your responses to highlight the findings but will not be traced back to you in any way.</p> <p>We may verify that you completed the survey each month using your unique ID password.</p> <p>For any questions about this survey, please contact: [DAP Health and HARC contacts]</p>	

Survey	Section	Notes/Source	Question/Text/Information	Responses/Action
Baseline	Employment Status	HARC	Are you currently...?	Employed for wages (answers question below) Self-employed (answers question below) Out of work for more than one year Out of work for less than one year Homemaker Student Retired Unable to work
Baseline	Employment Status	HARC	On average, how many hours per week do you work?	Drop-down slider for 1-60+ hours
Baseline	Income and Sources	HARC	Last month, what was your total household income from all sources?	Less than \$500 \$500-\$999 \$1,000-\$1,499 \$1,500-\$1,999 \$2,000-\$2,499 \$2,500-\$2,999 \$3,000 or more
			Last month, what was your <i>specific</i> household income from all sources?	[open ended]
			Last month, what were your sources of income? Select all that apply	Monetary Income (for example, employment, property earnings, child support, alimony, etc.) Social/welfare programs (for example, social security, disability, public assistance, unemployment, etc.)

Survey	Section	Notes/Source	Question/Text/Information	Responses/Action
Baseline	Debt Level and Causes	HARC	What is your current debt amount? This can include credit card debt, car loans, student loans, mortgages, etc.	None (skips the next two questions) Less than \$5,000 \$5,000 to \$9,999 \$10,000 to \$14,999 \$15,000 to \$24,999 \$25,000 to \$34,999 \$35,000 to \$49,999 \$50,000 to \$74,999 \$75,000 to \$99,999 \$100,000 to \$149,999 \$150,000 to \$199,999 \$200,000 or more
			What is your specific debt amount?	[open ended]
			What is your largest source of debt? <i>Select only one.</i>	Education/student loans Home/property (ex: mortgage) Car/motorcycle payments Personal loan Credit cards Payday loans Other: please specify
Baseline	Housing Status	HARC	What is your living situation today?	I have a steady place to live. I have a place to live today but I am worried about losing it in the future. I do not have a steady place to live.
Baseline	Utilization of Resources	From Queer Work and DAP Health Services Flyer	Which of the following resources/services have you used within the last month at Queer Works?	Mental healthcare (short-term therapy, crisis intervention, long-term therapy, harm reduction) Housing (rapid re-housing, rental assistance, domestic violence housing relocation) Personal (clothing, hygiene) Healthcare (HIV/STI testing/treatment, insurance enrollment, primary care) No services at Queer Works in the past month

Survey	Section	Notes/Source	Question/Text/Information	Responses/Action
			Which of the following resources/services have you used within the last month at DAP Health?	Healthcare/sexual health (primary care, HIV/AIDS, hepatitis care, gender affirming care, dental, testing, vaccines, PrEP and PEP) Social services (Food assistance, transportation, housing services, home care, case management) Behavioral (psychiatry, psychotherapy, substance use, group therapy) No services at DAP Health in past month
Baseline	Community-based programs	Used this site ^{vii} for inspiration.	Community-based programs are services provided by nonprofits and County agencies. These programs vary widely. Examples are provided in the responses below. In the last six months, which of the following general programs have you participated in?	Children services (for example, adoption, foster care, child support services, etc.) Education (for example, libraries, colleges, community learning programs, etc.) Housing (for example, shelters, utility assistance, rent forgiveness programs, low-income housing, etc.) Transportation (for example, ride sharing, free or reduced-price transportation) Mental health services (for example, counseling, therapy, support groups, etc.) Food support systems (for example, food pantries, food drives, etc.) Other: please specify: No community-based programs in the past six months

Survey	Section	Notes/Source	Question/Text/Information	Responses/Action
Baseline	Psychological Well-being	WHO-5 ^{viii} Measures psychological well-being and can be used to screen for depression and compare to the population. A scale average is computed from these items	Please indicate for each of the five statements which is closest to how you have been feeling over the last month. I have felt cheerful and in good spirits I have felt calm and relaxed I have felt active and vigorous I woke up feeling fresh and rested My daily life has been filled with things that interest me	All of the time Most of the time More than half of the time Less than half of the time Some of the time At no time
Baseline	Physical Health	RAND36 ^{ix} – general health subscale. A scale average is computed from these items	How TRUE or FALSE is each of the following statements for you. I seem to get sick a little easier than other people I am as healthy as anybody I know I expect my health to get worse My health is excellent <hr/> In general, would you say your health is:	Definitely true Mostly true Don't know Mostly false Definitely false Excellent Very good Good Fair Poor
Baseline	Social Functioning	RAND36 ^x – social functioning subscale.	During the past 4 weeks, to what extent has your physical health or emotional problems interfered with your normal social activities with family, friends, neighbors, or groups?	Not at all A little bit Moderately Quite a bit Extremely

Survey	Section	Notes/Source	Question/Text/Information	Responses/Action
		A scale average is computed from these items	During the past 4 weeks, how much of the time has your physical health or emotional problems interfered with your social activities (like visiting with friends, relatives, etc.)?	All of the time Most of the time Some of the time A little of the time None of the time
Baseline	Satisfaction with Life	Satisfaction with Life Scale ^{xi} a scale sum is computed and used to identify benchmarks.	Indicate your agreement with each item. In most ways my life is close to my ideal. The conditions of my life are excellent. I am satisfied with my life. So far I have gotten the important things I want in life. If I could live my life over, I would change almost nothing.	Strongly agree Agree Slightly agree Neither agree nor disagree Slightly disagree Disagree Strongly disagree
Baseline	Sexual Health	HARC	In the past six months, about how many sexual partners have you had?	Drop-down menu for number of partners
			In the past six months, about how many times have you been tested for sexually transmitted infections/sexually transmitted diseases?	Drop-down menu for number of times
Baseline	Dental Health	HARC	About how long has it been since you last saw a dentist? Include all types of dentists, such as orthodontists, oral surgeons, and all other dental specialists, as well as dental hygienists.	Less than 6 months Six months to less than one year One year to less than two years Two years to less than five years Five or more years ago Never
Baseline	Medical Usage	HARC CHIS	About how long has it been since you last visited a doctor, family doctor, or nurse practitioner or other health care provider such as specialists?	Less than 6 months Six months to less than one year One year to less than two years Two years to less than five years Five or more years ago Never been for treatment

Survey	Section	Notes/Source	Question/Text/Information	Responses/Action
			When you are sick or in need of health care, where do you usually go?	Emergency room/hospital Urgent care Clinic Doctor's office No usual place Some other place (please specify):
Baseline	Recreation and leisure	HARC and used some options from American Time Use Survey. ^{xii}	<p>On an average week, how many hours per week do you spend on the following activities?</p> <p>Note: This will be seen as a table with “responses” as the rows and question text as the columns</p> <p>No time at all Less than 1 hour 1 to less than 2 hours 2 to less than 3 hours 3 to less than 4 hours 4 to less than 5 hours 5 to less than 6 hours 6 to less than 7 hours 7 to less than 8 hours 8 hours or more</p>	<p>Watching television (streaming, Netflix, Hulu, cable TV, etc.) Browsing social media (Facebook, Instagram, etc.) Browsing internet videos (YouTube, TikTok, etc.) Physical activity (sports, hiking, walks, etc.) Reading for personal interest Learning/education/self-improvement Volunteering Crafting/creative arts Relaxing and thinking Playing games/video games Spending time with friends/family Other: please specify</p>
Baseline	Parents		<p>Do you have a child or children under the age of 18?</p> <p><i>This can be a biological child, stepchild, adopted child, your unmarried partner's child, etc. This also includes other family/friends' child/children that you may care for, or have temporary/full custody for.</i></p>	<p>Yes (answers question below) No (skips to end of survey)</p>

Survey	Section	Notes/Source	Question/Text/Information	Responses/Action
			How many children under 18 do you have?	1 2 3 4 5 or more
			Do you provide <i>any type</i> of care for the child/children?	Yes, I have full custody for my child/children (<i>answers question below</i>) Yes, I have partial custody for my child/children (<i>answers question below</i>) Yes, but I don't live with my child/children (<i>answers question below</i>) No, I do NOT provide any care for my child/children (<i>skips to end of survey</i>)
Baseline	Demographics	HARC and the Census; Williams Institute for the gender identity questions; CHIS for sexual orientation	Are you of Hispanic, Latino, or Spanish origin?	No, not of Hispanic, Latino, or Spanish origin Yes, Mexican, Mexican American, Chicano Yes, Puerto Rican Yes, Cuban Yes, other Hispanic, Latino, or Spanish origin (please specify):
			Which one of these groups would you say best represents your race? For the purposes of this survey, Hispanic is not a race.	White/Caucasian Black/African American Asian/Asian American American Indian/Alaska native Other (please specify):
			What is your age?	Drop-down of years
			What sex were you assigned at birth, on your original birth certificate?	Male Female
			How do you describe yourself?	Male Female Transgender Do not identify as female, male, or transgender

Survey	Section	Notes/Source	Question/Text/Information	Responses/Action
			What is the highest grade or year of school you completed?	Never attended school 8th grade or less Some high school (grades 9-11) Grade 12 or GED certificate (high school graduate) Some technical school Technical school graduate Some college College graduate Postgraduate or professional degree
			Do you consider yourself to be...?	Heterosexual Homosexual Bisexual Questioning Don't know/no response Other (please specify): _____

Quarterly and Final Post-Survey

Survey	Section	Notes/Source	Question/Text/Information	Responses/Action
Quarterly Final Post-Survey	Introductory Page		<p>This is the [quarterly, Final Post-Survey survey] for the \$800 provided by Queer Works and DAP Health. This survey is to be completed every month, before the 15th of each month. Please take your time in responding and answer each question to the best of your ability. <i>Different survey links will be sent to you at different months of the year. So only participate in the survey link when sent to you.</i></p> <p>Your answers are confidential with HARC researchers, DAP Health, and Queer Works. We will not share your data; rather, the responses of all participants will be reported. We may pull quotes from your responses to highlight the findings, but will not be traced back to you in any way.</p> <p>We may verify that you completed the survey each month using your unique ID password.</p> <p>For any questions about this survey, please contact: [DAP Health and HARC contacts]</p>	

Survey	Section	Notes/Source	Question/Text/Information	Responses/Action
Quarterly Final Post-Survey	Employment Status	HARC	Are you currently...?	Employed for wages (answers question below) Self-employed (answers question below) Out of work for more than one year Out of work for less than one year Homemaker Student Retired Unable to work
Quarterly Final Post-Survey	Employment Status	HARC	On average, how many hours per week do you work?	Drop-down slider for 1-60+ hours
Final Post-Survey	Income and Sources	HARC	NOT including the monthly \$800 from Queer Works/DAP, last month, what was your total household income from all sources?	Less than \$500 \$500-\$999 \$1,000-\$1,499 \$1,500-\$1,999 \$2,000-\$2,499 \$2,500-\$2,999 \$3,000 or more
			NOT including the monthly \$800 from Queer Works/DAP, last month, what was your <i>specific</i> household income from all sources?	[open ended]
			NOT including the monthly \$800, last month, what were your sources of income? Select all that apply	Monetary Income (for example, employment, property earnings, child support, alimony, etc.) Social/welfare programs (for example, social security, disability, public assistance, unemployment, etc.)

Survey	Section	Notes/Source	Question/Text/Information	Responses/Action
Final Post-Survey	Debt Level and Causes	HARC	What is your current debt amount? This can include credit card debt, car loans, student loans, mortgages, etc.	None (skips the next two questions) Less than \$5,000 \$5,000 to \$9,999 \$10,000 to \$14,999 \$15,000 to \$24,999 \$25,000 to \$34,999 \$35,000 to \$49,999 \$50,000 to \$74,999 \$75,000 to \$99,999 \$100,000 to \$149,999 \$150,000 to \$199,999 \$200,000 or more
			What is your specific debt amount?	[open ended]
			What is your largest source of debt? <i>Select only one.</i>	Education/student loans Home/property (ex: mortgage) Car/motorcycle payments Personal loan Credit cards Payday loans Other: please specify

Survey	Section	Notes/Source	Question/Text/Information	Responses/Action
Quarterly Final Post-Survey	Spending of UBI money	Based on some items in BLS expenditure tables ^{xiii}	<p>This next question asks about the spending of the \$800 you're given each month through the Queer Works/DAP program. You're allowed to spend the money on whatever you want, and we respect that. Responses here are confidential and will NOT impact payments. We just want to learn what money is generally spent on.</p> <p>We'd like to know the percentage of areas you use this money. <i>Just estimating this is okay.</i> For example, if you spend half of the \$800 on healthcare, then you would put 50% in the box.</p> <p>What percent of each category is spent using the \$800 from Queer Works/DAP?</p>	<p>Food Housing (rent or mortgage) Household equipment/furnishing/supplies Utilities Clothing Transportation (car loans, bus passes, gas, repairs, etc.) Healthcare Entertainment Personal care products/services (deodorants, shampoo, manicures, etc.) Education Alcohol Tobacco Marijuana/Cannabis/Weed Paying off debt Other (If selected, respondent sees question below)</p>
			You indicated you spend the \$800 on "other" areas as well. What are those areas?	Open-ended
Final Post-Survey	Impact of UBI	Placed this question right after spending to possibly prompt some ideas in their open-ended responses.	How has the \$800 a month changed your life? <i>Feel free to write as much as you'd like.</i>	Open-ended

Survey	Section	Notes/Source	Question/Text/Information	Responses/Action
Final Post-Survey	Adequacy	HARC	How well does the additional \$800 a month serve your needs?	Open-ended
			What areas of your life are difficult to meet your needs with the \$800 a month?	Open-ended
Quarterly Final Post-Survey	Housing Status	HARC	What is your living situation today?	I have a steady place to live. I have a place to live today but I am worried about losing it in the future. I do not have a steady place to live.
Final Post-Survey	Utilization of Resources	From Queer Work and DAP Health Services Flyer	Which of the following resources/services have you used within the last month at Queer Works? Select all that apply	Mental healthcare (short-term therapy, crisis intervention, long-term therapy, harm reduction) Housing (rapid re-housing, rental assistance, domestic violence housing relocation) Personal (clothing, hygiene) Healthcare (HIV/STI testing/treatment, insurance enrollment, primary care) No services at Queer Works within the past month
			Which of the following resources/services have you used within the last month at DAP Health? Select all that apply	Healthcare/sexual health (primary care, HIV/AIDS, hepatitis care, gender affirming care, dental, testing, vaccines, PrEP and PEP) Social services (Food assistance, transportation, housing services, home care, case management) Behavioral (psychiatry, psychotherapy, substance use, group therapy) No services at DAP Health in past month

Survey	Section	Notes/Source	Question/Text/Information	Responses/Action
Final Post-Survey	Community-based programs	Used this site ^{xiv} for inspiration.	<p>Community-based programs are services provided by nonprofits, churches, and/or County agencies. These programs vary widely. Examples are provided in the responses below.</p> <p>In the last six months, which of the following general programs have you participated in?</p>	<p>Children services (for example, adoption, foster care, child support services, etc.)</p> <p>Education (for example, libraries, colleges, community learning programs, etc.)</p> <p>Housing (for example, shelters, utility assistance, rent forgiveness programs, low-income housing, etc.)</p> <p>Transportation (for example, ride sharing, free or reduced-price transportation)</p> <p>Mental health services (for example, counseling, therapy, support groups, etc.)</p> <p>Food support systems (for example, food pantries, food drives, etc.)</p> <p>Other: please specify:</p> <p>No community-based programs in the past six months</p>

Survey	Section	Notes/Source	Question/Text/Information	Responses/Action
Quarterly Final Post-Survey	Psychological Well-being	WHO-5 ^{xv} Measures psychological well-being and can be used to screen for depression and compare to the population. A scale average is computed from these items	Please indicate for each of the five statements which is closest to how you have been feeling over the last month. I have felt cheerful and in good spirits I have felt calm and relaxed I have felt active and vigorous I woke up feeling fresh and rested My daily life has been filled with things that interest me	All of the time Most of the time More than half of the time Less than half of the time Some of the time At no time
Final Post-Survey			How, if at all, has the \$800 a month changed your mental health?	Open-ended
Quarterly Final Post-Survey	Physical Health	RAND36 ^{xvi} – general health subscale. A scale average is computed from these items	How TRUE or FALSE is each of the following statements for you. I seem to get sick a little easier than other people I am as healthy as anybody I know I expect my health to get worse My health is excellent	Definitely true Mostly true Don't know Mostly false Definitely false

Survey	Section	Notes/Source	Question/Text/Information	Responses/Action
			In general, would you say your health is:	Excellent Very good Good Fair Poor
Quarterly Final Post-Survey	Social Functioning	RAND36 ^{xvii} – social functioning subscale. A scale average is computed from these items	During the past 4 weeks, to what extent has your physical health or emotional problems interfered with your normal social activities with family, friends, neighbors, or groups?	Not at all A little bit Moderately Quite a bit Extremely
			During the past 4 weeks, how much of the time has your physical health or emotional problems interfered with your social activities (like visiting with friends, relatives, etc.)?	All of the time Most of the time Some of the time A little of the time None of the time
Quarterly Final Post-Survey	Satisfaction with Life	Satisfaction with Life Scale ^{xviii} a scale sum is computed and used to identify benchmarks.	Indicate your agreement with each item. In most ways my life is close to my ideal. The conditions of my life are excellent. I am satisfied with my life. So far I have gotten the important things I want in life. If I could live my life over, I would change almost nothing.	Strongly agree Agree Slightly agree Neither agree nor disagree Slightly disagree Disagree Strongly disagree
Quarterly	Sexual Health	HARC	In the past six months, about how many sexual partners have you had?	Drop-down menu for number of partners

Survey	Section	Notes/Source	Question/Text/Information	Responses/Action
Final Post-Survey			In the past six months, about how many times have you been tested for sexually transmitted infections/sexually transmitted diseases?	Drop-down menu for number of times
Quarterly Final Post-Survey	Dental Health	HARC	About how long has it been since you last saw a dentist? Include all types of dentists, such as orthodontists, oral surgeons, and all other dental specialists, as well as dental hygienists.	Less than 6 months Six months to less than one year One year to less than two years Two years to less than five years Five or more years ago Never
Quarterly Final Post-Survey	Medical Usage	HARC CHIS	About how long has it been since you last visited a doctor, family doctor, or nurse practitioner or other health care provider such as specialists? <hr/> When you are sick or in need of health care, where do you usually go?	Less than 6 months Six months to less than one year One year to less than two years Two years to less than five years Five or more years ago Never been for treatment Emergency room/hospital Urgent care Clinic Doctor's office No usual place Some other place (please specify):

Survey	Section	Notes/Source	Question/Text/Information	Responses/Action
Quarterly Final Post-Survey	Recreation and leisure	HARC and used some options from American Time Use Survey. ^{xix}	<p>On an average week, how many hours per week do you spend on the following activities?</p> <p>Note: This will be seen as a table with “responses” as the rows and question text as the columns</p> <p>No time at all Less than 1 hour 1 to less than 2 hours 2 to less than 3 hours 3 to less than 4 hours 4 to less than 5 hours 5 to less than 6 hours 6 to less than 7 hours 7 to less than 8 hours 8 hours or more</p>	<p>Watching television (streaming, Netflix, Hulu, cable TV, etc.)</p> <p>Browsing social media (Facebook, Instagram, etc.)</p> <p>Browsing internet videos (YouTube, TikTok, etc.)</p> <p>Physical activity (sports, hiking, walks, etc.)</p> <p>Reading for personal interest</p> <p>Learning/education/self-improvement</p> <p>Volunteering</p> <p>Crafting/creative arts</p> <p>Relaxing and thinking</p> <p>Playing games/video games</p> <p>Spending time with friends/family</p> <p>Other: please specify</p>
Final Post-Survey	General open-ended	HARC	In what ways has the \$800 most impacted your life?	Open-ended
Quarterly Final Post-Survey	Parents		<p>Do you have a child or children under the age of 18?</p> <p><i>This can be a biological child, stepchild, adopted child, your unmarried partner’s child, etc. This also includes other family/friends’ child/children that you may care for, or have temporary/full custody for.</i></p>	<p>Yes (answers question below)</p> <p>No (skips to end of survey)</p>

Survey	Section	Notes/Source	Question/Text/Information	Responses/Action
			How many children under the age of 18 do you have?	1 2 3 4 5 or more
			Do you provide <i>any type</i> of care for the child/children?	Yes, I have full custody for my child/children (answers question below) Yes, I have partial custody for my child/children (answers question below) Yes, but I don't live with my child/children (answers question below) No, I do NOT provide any care for my child/children (skips to end of survey)
			How have you used the \$800 a month for your child/children? <i>Select all that apply</i>	I pay for childcare I am able to pay for better childcare now I am able to buy more food for them I am able to buy healthier food for them I am able to support their extracurricular needs (buying uniforms for team sports, paying money for sports team trips, etc.) I am able to get them more things (for example, books, toys, gifts, etc.) they want I am able to take them on more trips I am able to spend more time with them I am able to get them better medical healthcare I am able to get them better mental healthcare Other: Please specify: I did not use the \$800 for child-specific things

Endnotes

- ⁱ Miller, Joshua, Universal Basic Income and Inflation: Reviewing Theory and Evidence (June 14, 2021). Available at SSRN: <https://ssrn.com/abstract=3920748> or <http://dx.doi.org/10.2139/ssrn.3920748>
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- ⁱⁱⁱ Hoynes, H., & Rothstein, J. (2019). Universal basic income in the United States and advanced countries. *Annual Review of Economics*, 11, 929-958.
- ^{iv} Pega, F., Pabayo, R., Benny, C., Lee, E. Y., Lhachimi, S. K., & Liu, S. Y. (2022). Unconditional cash transfers for reducing poverty and vulnerabilities: effect on use of health services and health outcomes in low-and middle-income countries. *Cochrane Database of Systematic Reviews*, (3).
- ^v Hasdell, R. (2020). What we know about universal basic income. *A cross-synthesis. Standfor Basic Income Lab*.
- ^{vi} Ibid.
- ^{vii} <https://rivco.org/community>
- ^{viii} <https://www.karger.com/Article/Pdf/376585>
- ^{ix} https://www.rand.org/health-care/surveys_tools/mos/36-item-short-form/survey-instrument.html
- ^x https://www.rand.org/health-care/surveys_tools/mos/36-item-short-form/survey-instrument.html
- ^{xi} <https://fetzer.org/sites/default/files/images/stories/pdf/selfmeasures/SATISFACTION-SatisfactionWithLife.pdf>
- ^{xii} <https://www.bls.gov/charts/american-time-use/activity-leisure.htm>
- ^{xiii} <https://www.bls.gov/cex/tables/calendar-year/mean/cu-all-multi-year-2021.pdf>
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- ^{xvi} https://www.rand.org/health-care/surveys_tools/mos/36-item-short-form/survey-instrument.html
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- ^{xix} <https://www.bls.gov/charts/american-time-use/activity-leisure.htm>