

**Effects of Recent Guaranteed Income Pilots in the United States:
A Systematic Literature Review and Quality Assessment**

**By Lanjun Peng, Courtney Hahm, Douglas Noonan, and Joanna Woronkovicz
Indiana University**

1. Introduction

Since the Covid-19 pandemic, a wave of unconditional cash transfer pilots has proliferated around the country. The Guaranteed Income Pilots Dashboard, managed by the Stanford Basic Income Lab, lists 31 pilots in different cities as of January 1, 2025 and this number likely misses many pilots that have not received widespread attention. The premise of guaranteed income (GI) is that individuals are provided with ‘no-strings’ attached cash transfers. It contrasts with public welfare programs, like the Earned Income Tax Credit (EITC) and Temporary Assistance for Needy Families (TANF), which have strict eligibility requirements often based on earned income. Guaranteed income is also sometimes referred to as universal basic income (UBI), basic income (BI), or negative income tax (NIT).

Five years after the pandemic's start, many of these GI pilots have published evaluative studies on their effects – on employment, income, financial wellbeing, physical and mental health, and more. A large proportion of these studies are published outside of the academic literature not subject to rigorous peer review that would assess their quality and the validity of their findings. Nonetheless, these studies are referenced in policy discussions, including at conferences, in the academic literature, as well as in newspapers and the popular press – the latter often for their supposed positive impacts. As such, a widespread ‘movement’ continues to grow on a national scale advocating for guaranteed income as public policy without fully understanding its implications.

The analysis in this paper focuses on the recent studies conducted after January 2020, capturing the post-pandemic wave of GI pilot programs in the US. The assembled studies represent the most recent, most relevant studies to the ongoing basic income movement in the US and other high-income economies. There are other literature reviews that have evaluated studies prior to this time period (e.g., Crosta et al., 2024; Pinto et al., 2021; Rizvi et al., 2024).

Understanding this prominent policy and emergent literature requires address key context. Scholars have questioned the limited value of running experiments in the form of guaranteed income pilots, arguing that 1) they take otherwise scarce resources away from potential advocacy and lobbying efforts; 2) GI and UBI policy decisions should be primarily based on ethical, as opposed to empirical factors; and 3) epistemic factors limit the validity of experimental results (Bain, 2022). Counter arguments, however, focus on the gaps that persist in understanding the effects of guaranteed income programs on their targeted populations, as well as historical

misunderstandings that persist in policy regimes that typically disadvantage populations of need (Castro and West, 2022)

In this article, we conduct a systematic literature review of GI pilots implemented since 2020 in the United States to assess both the impacts reported in the studies evaluating these pilots and the quality level of these evaluations. This review not only helps synthesize the results of the plethora of experiments on guaranteed income since the pandemic, but also provides a basis for understanding how additional experiments are actually serving to clarify the empirical evidence on the effects of GI and avoiding a “pile-up” of empirical evidence that just muddies the narrative for whether GI programs are actually effective policy.

Methods

2.1 Literature Search Strategy

The systematic literature search in this study is in accordance with the Preferred Reporting Items for Systematic Reviews and Meta-Analyses (PRISMA) guidelines (Page et al., 2021). Our search strategy included several key stages to ensure a comprehensive and rigorous review process. We used a variety of electronic databases, including EBSCOhost, which includes Academic Search Complete, Global Health, Health Source - Consumer Edition, Humanities & Social Sciences Index Retrospective, MEDLINE, MEDLINE with Full Text, Social Sciences Full Text, and Social Sciences Index Retrospective.

In addition, to keep up with the most recent working papers and reports and following similar work by Rivzi et al. (2024), we used a similar search strategy at the National Bureau of Economic Research (NBER), the Basic Income Earth Network (BIEN) Congress, the BIG Annual Conference, the Stanford Basic Income Lab, and the Center for Guaranteed Income Research (CGIR) at the School of Social Policy and Practice at the University of Pennsylvania to review proceedings, presentations, and reports.

The search was limited to English-language publications to maintain consistency and manageability.

2.1.1 Search Terms

The search terms employed to identify relevant studies included “guaranteed income”, “universal basic income”, “unconditional cash transfer”, “guaranteed minimum income”, or “negative income tax”. These terms were chosen to capture a broad spectrum of literature pertaining to guaranteed income programs.

2.1.2 Filters and Limits

Initially, the search results were filtered to include only English-language publications, yielding 1,847 papers from EBSCOhost. To refine the search further, we applied a geographical filter focusing on the United States, restricted to those written between January 2020 and December 2024.

When filtered using the specified search terms, the NBER and other databases initially yielded 8,366 papers that contained at least one mention of one or more of the keywords between January 2020 and December 2024. This extensive initial result set underscores the broad relevance and frequent discussion of the specified terms within the academic literature.

In addition to the existing systematic literature review, we considered the increased focus on guaranteed income programs in the post-pandemic era due to stimulus checks and other types of unconditional cash transfers. Therefore, we further restricted our search to studies with cash payments made between January 2020 and December 2024.

2.1.3 Selection Process

The selection process for our systematic literature review was carefully structured and conducted in three groups to ensure that only the most relevant studies were included.

Group 1 consisted of articles filtered from the EBSCOhost database. The selection began with limiting the source types to academic journals, reports, books, and dissertations published between 2020 and 2024, which resulted in 1,847 papers. Next, restrictions of English-only publications and high-income countries, as defined by the World Bank, narrowed the initial search to 251 papers. In the second stage, we removed duplicate results, leaving 150 papers. Next, we focused on identifying US studies that used quantitative methods to assess the impact of guaranteed income programs, reducing the number of documents to 23. Finally, studies with programs that distributed cash before 2020, non-causal studies, simulations, synthetic samples, and purely theoretical papers were excluded, leaving 4 papers that met all eligibility criteria.

Group 2 included papers that were not yet published but available on the National Bureau of Economic Research (NBER), such as working papers and book chapters. Since the website does not offer the same filtering options as EBSCOhost, we manually screened papers by examining their titles and abstracts to identify quantitative studies that specifically analyzed the impact of guaranteed income (GI) programs in high-income economies. Initially, we had 181 papers with the filters. After excluding non-causal studies, simulations, synthetic samples, and purely theoretical papers, focusing on the impact of GI programs in the United States, we identified 11 papers that met all eligibility criteria, illustrating the recent wave of GI evaluations that have either not been published as peer-reviewed studies as of yet, or will only be published in the gray literature.

Group 3 adds reports of governmental GI pilot programs unlisted in either database. These reports were identified through The Guaranteed Income Pilots Dashboard, the Basic Income Earth Network (BIEN) Congress, the BIG Annual Conference, the Stanford Basic Income Lab, and the Center for Guaranteed Income Research (CGIR) at the School of Social Policy and Practice at the University of Pennsylvania website. As a result, 11 more evaluations of GI programs conducted in the U.S. after 2020 were counted to the list. Table 1 lists the names and geographical locations of all 26 papers.

Table 1. Summary Description of Selected Studies and Programs

No.	Authors	Program	Location
1	Bartik et al. (2024)	OpenResearch Unconditional income Study (ORUS)	Ten counties in TX Nine counties in IL
2	Broockman et al. (2024)		
3	Vivalt et al. (2024)		
4	Miller et al. (2024)		
5	Balakrishnan et al. (2024)	Compton Pledge	Compton, CA
6	Collinson et al. (2024)	Federal Emergency Rental Assistance (ERA)	Chicago, IL Houston (Harris County), TX Seattle (King County), WA Los Angeles, CA
7	Ananat et al. (2022)	Child Tax Credit Expansion of the American Rescue Plan	U.S.
8	Enriquez et al. (2023)		
9	Kovski et al. (2023)		
10	Pignatti and Parolin (2024)		
11	Pilkauskas et al. (2022)		
12	Pilkauskas et al. (2023)		
13	Lyu et al. (2024)	2020 CARES Act Stimulus Checks & Child Tax Credit Expansion of the American Rescue Plan	
14	Baker et al. (2023)	2020 CARES Act	
15	Bervik et al. (2024)	Columbia Life Improvement Monetary Boost (CLIMB)	Columbia, SC
16	De Young et al. (2023 December)	Paterson Guaranteed Income Pilot Program (GIPP)	Paterson, NJ

17	De Young et al. (2023 September)	Ulster County Guaranteed Income Pilot	Ulster County, NY
18	De Young et al. (2024 February)	Cambridge Recurring Income for Success & Empowerment (RISE) Guaranteed Income Pilot	Cambridge, MA
19	DeYoung et al. (2024 May)	Richmond Resilience Initiative (RRI) pilot	Richmond, VA
20	Francois et al. (2024 August)	New Orleans Guaranteed Income (GI) Program	New Orleans, LA
21	Henwood et al. (2024)	Miracle Money and Miracle Friends	CA
22	Jaroszewicz et al. (July 20 2024)	Unconditional Cash Transfer experiment	U.S.
23	Kim et al. (2024 July)	Basic Income Guaranteed: Los Angeles Economic Assistance Pilot (BIG:LEAP)	Los Angeles, CA
24	Liebman et al. (2022)	Chelsea Eats	Chelsea, MA
25	Roll et al. (2024)	Project Community Connections, Inc (PCCI) Direct Funds Transfer (DFT) Program	Atlanta, GA
26	Stacy et al. (2024)	State of Delaware Department of Health and Social Services (DHSS) After-School Program Paired Cash Transfer	Wilmington, DE

2.1.4 Eligibility Criteria

Inclusion Criteria:

- **Language:** Only studies published in English were included to ensure clarity and consistency.
- **Subject:** The study must examine one or more guaranteed income programs implemented in a high-income country and directly assess the impact of guaranteed income programs.
- **Methodology:** The study must be empirical, utilizing quantitative methods and including one or more quantitative measures to provide robust and reliable data.
- **Date:** Articles must be published in or after January 2020.

Exclusion Criteria:

- **Methodology:** We excluded qualitative studies, non-causal or non-experimental/randomized studies, simulations, synthetic samples, and purely theoretical studies to focus on empirical evidence.
- **Location:** Non-US studies were excluded to focus on domestic programs that take up the largest proportion of studies.
- **Date:** Articles investigating GI programs that distributed cash benefits or were conducted before January 2020 are excluded to focus on post-pandemic studies.

Figure 1. Flow Diagram of Selection Process

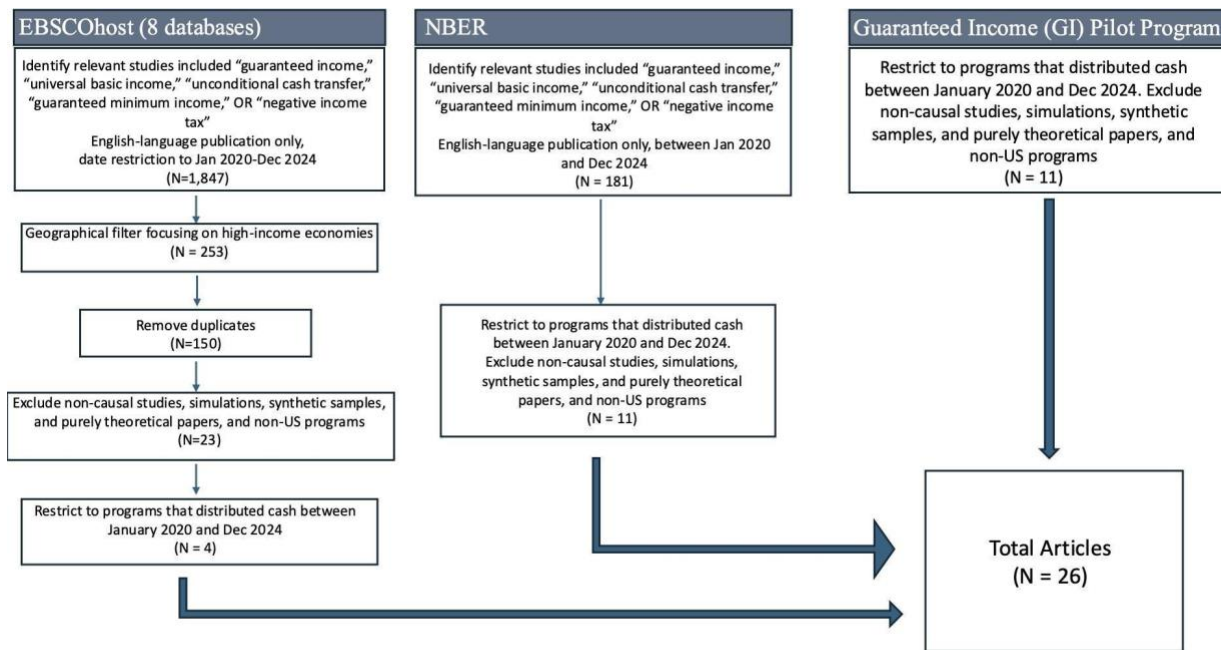


Figure 1 depicts our study selection process, adapted to the unique capabilities and limitations of the EBSCOhost and NBER and other working papers and reports databases, among other sources. For EBSCOhost, the process begins with an extensive keyword search that includes “guaranteed income,” “universal basic income,” and others. The next step is to apply filters for English-language publications. The subsequent refinement involves a geographic filter focusing exclusively on studies in high-income economies. The selection criteria are narrowed to include only quantitative research, specifically excluding non-causal studies, simulations, synthetic

samples, and theoretical papers. Finally, this selection is limited to studies covering the period in or after January 2020, reflecting our focus on the post-COVID era.

Conversely, the NBER and other databases begin with a similar keyword search, but offer a more streamlined filtering process due to their inherent database structures, which lack the layered filtering options available in EBSCOhost. After the initial keyword search, the selection is quickly narrowed by date constraints to focus on recent studies. This is followed by a manual process to exclude pre-2020 studies, qualitative research, non-causal studies, simulations, synthetic samples, and theoretical papers. This manual filtering is crucial to ensure that our focus remains sharply on empirical papers that assess the impact of recent guaranteed income programs, specifically excluding studies that only identify potential beneficiaries of such programs.

Analysis and Results

3.1 Metadata Extraction

We use a standardized form to extract relevant data from the included studies. The information extracted includes authors, year of publication, name of the guaranteed income (GI) program, study location, sample selection criteria, transfers received, study year, sample size, analysis methodology, main findings, and limitations. These extracted data are then used to summarize key features of the literature and synthesize the available evidence across studies. Specifically, we analyze studies based on outcome categories, focusing on comparing studies with similar outcome measures.

3.1.1 Description of Study Outcomes

We classify the studies based on the outcome measures. The five groups of outcome measures include : labor outcomes (including labor supply, labor force participation, etc.), financial outcomes (including economic stability, income volatility, and financial well-being), health outcomes (including physical and mental health assessments and specific health metrics like birth weight), educational outcomes (including impact on educational attainment) and relational outcomes (including social support such as communications with friends and families). Table 3 lists the major outcome focus for each of the studies, along with the direction of the effect reported.

Table 3. Summary Description of Outcomes Measured in the Studies

#	Authors	Outcome Measures				
		Labor	Financial	Health	Educational	Relational
1	Ananat et al. (2022)	[0] Employment status on population survey				

2	Balakrishnan et al. (2024)	[0] Labor supply	[+] Housing security [0] Financial well-being	[0] Psychological well-being		
3	Bartik et al. (2024)		[+] Food and car expenses [+] Asset values (financial assets) [0] Financial health Credit limits Delinquencies Utilization, Bankruptcies Foreclosures [+] Credit scores			
4	Bervik et al. (2024)	[+] Employment security	[+] Food security [+] Food quality [-] Income volatility [-] Housing security [-] Housing quality	[+] Emotional well-being Courage Future planning aptitude		
5	Broockman et al. (2024)					[+] Political attitudes [0] Political participation or engagement
6	Collinson et al. (2024)		[+] Rent payment ability [0] Financial and housing stability	[+] Mental health survey measures		
7	De Young et al. (December 2023)	[+] Self-employment [+] Employment	[+] Financial relief and resilience [+] Food security [+] Financial well-being Savings Emergency expenses			[+] Parenting and caregiving roles [-] Household distress and chaos
8	De Young et al. (September 2023)	[+] Employment stability	[+] Housing [+] Food security [+] Financial well-being HH income Savings Emergency expenses	[+] Physical health Physical functioning [-] Physical limitations [+] Mental health Self-determination Goal-setting		[+] Time with family and friends
9	De Young et al. (February 2024)	[+] Work outside caregiving responsibilities	[+] Income [+] Income stability [+] Emergency expenses		[+] Child's educational outcomes	[0] Household chaos and distress [0] Goal-setting [0] Future

			[+] Savings			planning
10	DeYoung et al. (May 2024)		[+] Homeownership [+] Strategic asset-building [+] Financial Well-Being Emergency expenses		[+] Certification and education for a stable job	[+] Quality time with family [+] Sharing GI with the community
11	Enriquez et al. (2023)	[0] Labor participation [0] Actual worked hours				
12	Francois et al. (August 2024)	[+] Seasonal shifts in labor market participation	[+] Financial well-being [0] Housing cost burden [0] Food insecurity [-] Financial volatility	[+] Mental health Resilience Goals Strengths	[+] Educational opportunities Training program Internships	[+] Financial support for family [+] Familial interdependence
13	Henwood et al. (2024)		[+] Housing status [+] Financial wellbeing			Social isolation Social support
14	Jaroszewicz et al. (July 20, 2024)		[+] Expenditure [0] Savings stock [0] Work performance [0] Earned income [0] Liquidity constraints	[0] Cognitive capacity Raven's standard short-form matrices Sense of memory Thought of money [0] Physical health Sleep quality Self-reported health: Food security Nutrition Exercise [0] Psychological wellbeing Sense of agency Life satisfaction		[0] Relationship with partner or spouse
15	Kim et al. (July 2024)	[+] Full-time employment	[+] Food Security Eating preferred food [+] Financial Well-Being Emergency expenses			[+] Parenting Maintaining child's extracurricular activities [+] Positive interactions with neighbors [-] Severity and frequency of intimate partner violence

						[-] Fear of neighborhood violence
16	Kovski et al. (2023)		[+] Financial security	[+] Mental health		
17	Liebman et al. (2022)	[0] Employment [0] Work hours	[+] Food security [+] Pregnancy from financial security [-] Residential moves [-] Financial distress	[+] Consumption of fresh meat and fish [+] Food satisfaction [0] Self-reported physical health [0] Self-reported mental health	[0] Child school attendance	
18	Lyu et al. (2024)			[0] Birthweight [0] Incidence of low birth weight [0] Gestational age and fetal growth		
19	Miller et al. (2024)		[-] Food security	[+] Stress improvement [+] Hospital and emergency department care, [+] Medical spending [+] Office-based dental care [0] Physical health survey measures [0] Biomarkers derived from blood draws		
20	Pignatti and Parolin (2024)	[0] Labor supply		[+] Mental health		
21	Pilkauskas et al. (2022)	[0] Labor supply (employment)	[+] Food security [+] Utility payment ability [-] Reliance on friends/families for food	[-] Medical hardships		
22	Pilkauskas et al. (2023)		[+] Residential independence from partner [-] Number of people residing in their household [-] Past-due rent/mortgage [-] Moving reported			[+] Residential independence from partner

2 3	Baker et al. (2023)	Interaction term with unemployment expectation	[+] Savings [+] Durable spending [+] Consumption Food Rent Mortgages [+] Credit card short-term debt overhang			
2 4	Roll et al. (2024)		[+] Consumptions in: Food Transportation Prof. services: Hair care Car maintenance [+] Financial stability Disposable income Reduced bank overdrafts [+] Housing	[+] Mental health [+] Health care expenses		
2 5	Stacy et al. (2024)		[+] Financial health Having a bank account HH finances contribution Lower financial stress	[+] Physical and mental health Criminal history Justice system involvement (Carrying a weapon) [-] Spending on substances	[+] School attendance [-] Disciplinary actions	[+] Social support Communication with friends and families
2 6	Vivalt et al. (2024)	[+] Leisure time [+] Time on transportation and finances [0] Quality of employment [-] Labor supply and time	[-] Income		[+] Formal education [0] Investments in human capital	

Notes: + = positive effect; - = negative effect; 0 = null effect

Figure 2. Outcome Classification

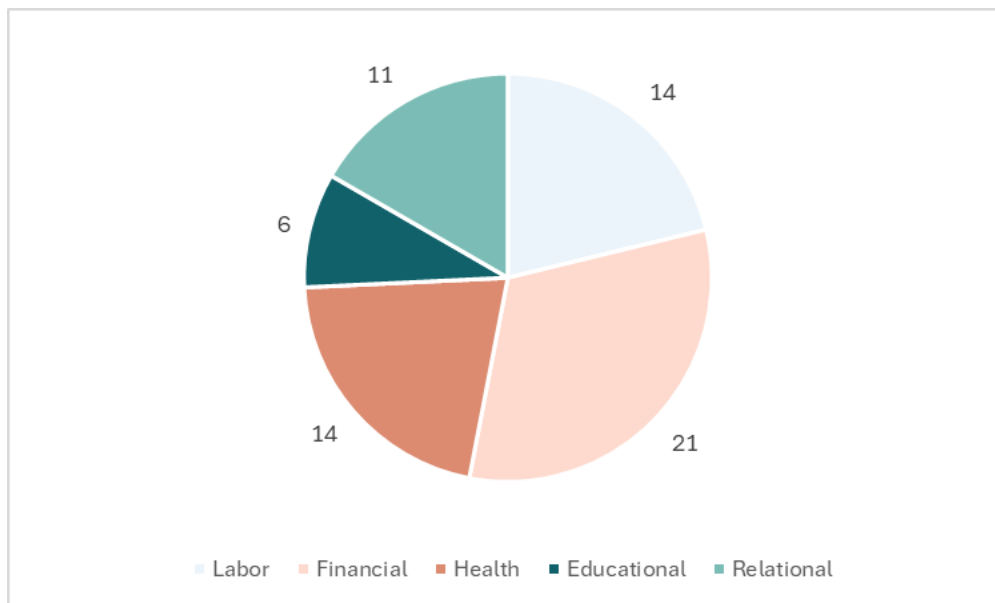


Figure 2 shows a pie chart categorizing the number of studies by their outcome focus taking into account that each study may have more than one outcome focus. It shows a significant emphasis on financial outcomes for studies conducted in or after January 2020. This likely reflects the immediate financial disruptions caused by the pandemic and the need to evaluate the effectiveness of GI programs in stabilizing household economies and supporting recovery. The second largest category, health outcomes, highlights the importance of addressing public health concerns, which can include mental health, physical health and access to health care. This is particularly important given the health challenges posed by the pandemic. Similar to the health category, labor outcomes focus on employment, labor force participation, job stability, and related issues. These outcomes emphasize the broader socioeconomic impact of workforce interventions. Following focus on educational and relational outcomes include academic performance, family dynamics, and community support networks, underscoring the societal ripple effects of interventions.

3.1.2 Key Impacts on Outcomes

This section compares outcome measures across different categories and examines different outcome variables. We address potential measurement bias in considering differences among studies.

Financial Outcomes

Several GI programs’ primary goal is to try to improve the financial condition of individuals and families. Twenty-one studies (out of 26) shown in Table 3 focus on the impact on financial outcomes such as income volatility, housing stability, food security, etc.

Table 4. Outcome Variable Measurements by Financial Outcomes

Author (year)	Outcome Variable	Impacts
Balakrishnan et al. (2024)	Non-housing debt, expenditure, financial security index	Positive debt reduction but negative expenditure, no impact on financial security
Bartik et al. (2024)	Household expenditures, asset values, credit scores	Increased expenditures and assets, higher debt offset net worth
Bervik et al. (2024)	Income volatility, food security	Reduced volatility and improved food security
Collinson et al. (2024)	Rent payments, housing stability	Modest increase in rent payments, limited effect on housing stability
DeYoung et al. (September 2023)	Financial health, housing security, food security	Improved financial health and food security, reduced housing insecurity
DeYoung et al. (December 2023)	Financial resilience, emergency savings, ability to cover expenses	Improved resilience, savings, and expense coverage
DeYoung et al. (February 2024)	Income stability, emergency savings, housing cost burden	Improved stability, reduced housing burden
DeYoung et al. (May 2024)	Homeownership, strategic asset-building, financial well-being, emergency expenses	Improved homeownership, strategic asset building, and financial well-being
Francois et al. (August 2024)	Emergency expenses	Persistent emergency expense challenges
Henwood et al. (2024)	Housing stability	Improved
Jaroszewicz et al. (July 2024)	Expenditure patterns, financial well-being	Increased spending but worsened subjective financial outcomes
Kim et al. (July 2024)	Savings, food security, IPV reduction	Improved savings, food security, reduced IPV
Kovski et al. (2023)	Food insecurity, financial well-being	Improved
Liebman et al. (2022)	Food insecurity, financial stress	Reduced food insecurity and stress
Miller et al. (2024)	Medical spending, financial stability	Increased spending on healthcare, mixed on long-term financial impacts
Pilkauskas et al. (2022)	Food insecurity, utility payments	Reduced hardship and improved food security
Pilkauskas et al. (2023)	Rent/mortgage arrears, household size, likelihood of moving	Reduced arrears and moving likelihood
Baker et al. (2023)	Marginal propensity to consume (MPC), spending on essentials	Increased short-term essentials spending
Roll et al. (2024)	Housing stability, bank overdrafts, disposable income	Reduced overdrafts and increased stability
Stacy et al. (2024)	Bank accounts, financial stress, household contributions	Improved financial health through combined cash transfer and programming
Vivalt et al. (2024)	Household income	Negative household income

Notes: RCT = Randomized Control Trial and QE = Quasi-experimental

Overall, these programs tend to show positive effects on financial well-being, food and housing security, and expenditure patterns, reflecting economic stability and resilience with cash transfers. For example, Pilkauskas et al. (2022) find that the Child Tax Credit (CTC) led to a significant reduction in material hardship, particularly food hardship, indicating a significant improvement in economic conditions for very low-income families. DeYoung et al. (2024 February) find that while guaranteed income programs such as the RISE initiative helped improve financial security, structural constraints such as the need for multiple jobs and child care costs limited their broader economic impact. Meanwhile, Vivalt et al. (2024) highlight the variability in outcomes, suggesting that while cash transfers can affect household balance sheets, the overall impact on net worth was modest and sometimes negative due to debt considerations. However, some studies highlight mixed or negative effects, such as Bartik et al. (2024), where increased expenditures and assets were offset by higher debt, and Jaroszewicz et al. (2024), which found worsened subjective financial outcomes despite increased spending.

Differences in reported outcomes across studies may stem from the transfer amounts and target groups in each program. Larger transfers, as in Vivalt et al. (2024), provided greater financial security, allowing recipients to reduce traditional employment in favor of entrepreneurial activities or personal time. Others, such as Collinson et al. (2024), observe limited impacts. Programs targeting low-income families with children, such as those in Pilkauskas et al. (2022), showed substantial impacts on reducing material hardship. In contrast, programs with broader eligibility, such as those in Vivalt et al. (2024), showed a broader increase in financial flexibility. The substantial transfer amount likely provided participants with more flexibility to explore nontraditional economic activities, although it also reduced the incentive to work in the market, given the relatively high level of financial security provided.

Health Outcomes

Fourteen studies listed in Table 5 focus on the impact of the GI program on health outcomes, including whether the GI program generally increased access to medical care (Miller et al., 2024), physical and mental health (Miller et al., 2024; Bervik et al., 2024; DeYoung et al., 2023 September; DeYoung et al., 2023 December), and infant health including birth weight (Lyu et al., 2024). Most measures of physical and mental health are based on self-reported surveys using standardized scales. For example, DeYoung et al. (2024) use the standardized scale such as Short Form Health Survey-36 and the Kessler 10, with responses followed up until they withdrew from the guaranteed income program.

Table 5. Outcome Variable Measurements by Health Outcomes

Author (year)	Outcome Variable	Impacts
Balakrishnan et al. (2024)	Psychological well-being	No significant improvement

Bervik et al. (2024)	Psychological distress	Treatment group had higher reported distress levels
Collinson et al. (2024)	Mental health (stress and psychological distress)	Modest improvement
DeYoung et al. (2023 September)	Psychological distress	Slight declines in distress levels among recipients
Francois et al. (2024 August)	Emotional and psychological stress	Temporary alleviation of stress but no long-term improvement
Jaroszewicz et al. (2024 July)	Psychological well-being, depression, stress, physical health	Highlighted unmet needs, increasing stress and distress, no positive differences in physical health
Kovski et al. (2023)	Anxiety and depression symptoms	Small reduction in anxiety, mixed results on depression
Liebman et al. (2022)	Self-reported physical and mental health	No significant impact
Lyu et al. (2024)	Infant health (birth weight, gestational age)	No significant impact
Miller et al. (2024)	Mental and physical health	Short-lived improvement in stress, no long-term effect on mental or physical health
Pignatti and Parolin (2024)	Mental health (bad mental health days)	Reduction in bad mental health days (especially for credit-constrained individuals)
Pilkauskas et al. (2022)	Medical hardships, mental health	Reduced medical hardships and improved mental health
Roll et al. (2024)	Emotional stress, psychological well-being	Reduced acute stress but ongoing chronic stressors persisted
Stacy et al. (2024)	Healthy behaviors (e.g., substance use, risky behaviors)	Increase in healthy behaviors, reduction in risky behaviors

Notes: RCT = Randomized Control Trial and QE = Quasi-experimental

Most of these studies find either temporary positive effects or no significant effects on physical and mental health outcomes such as those by Balakrishnan et al. (2024), Liebman et al. (2022), and Lyu et al. (2024), while others observe slight improvements such as reduced stress and anxiety in Collinson et al. (2024) and Kovski et al. (2023). Miller et al. (2024) report substantial but short-lived improvements in mental health, particularly in reducing stress and psychological distress, within the first year of receiving guaranteed income. However, these benefits did not persist into the second year, highlighting the temporary nature of such financial interventions. Bervik et al. (2024) also find indirect improvements in physical health through improved food security and health behaviors, but they do not find statistical evidence to confirm overall improvements in physical health outcomes.

Meanwhile, some studies support the idea that guaranteed income programs can significantly improve mental health outcomes, such as reductions in bad mental health days (Pignatti and Parolin (2024)), improved mental health (Pilkauskas et al. (2022)), and increased healthy behaviors

(Stacy et al. (2024)). DeYoung et al. (2023 September) find that both treatment and control participants reported elevated stress levels throughout the study. However, the treatment group had lower stress levels than the control group at the end of the program, with a statistically significant mean difference of -0.4, although both groups maintained scores above 7.

The heterogeneity of impacts on health outcomes may be due to the specific focus of each study. For example, some interventions show greater effectiveness for specific groups, such as credit-constrained individuals in Pignatti and Parolin (2024). In New York (DeYoung et al., 2023 September), the \$500 cash transfers provided may not be large enough to cause significant changes in lifetime physical health outcomes. However, these transfers could be beneficial in reducing psychological distress in the short term by providing immediate financial relief. The relatively modest amount could help participants manage daily expenses, reducing financial anxiety and temporarily improving mental well-being.

Labor Outcomes

Fourteen studies in Table 6 focus on the impact of cash transfers on working status or motivations. Many studies, such as those by Ananat et al. (2022), Enriquez et al. (2023), Liebman et al. (2022), Pignatti and Parolin (2024), and Pilkauskas et al. (2022), find no significant changes in employment status, hours worked, or labor force participation, indicating that GI often does not discourage work at an aggregate level. On the other hand, positive labor outcomes are highlighted in studies like Bervik et al. (2024) and Kim et al. (2024), which note increased full-time employment and greater employment security among recipients. DeYoung et al. (2023, September, 2023 December, 2024 February) demonstrate improved employment stability, higher workforce participation, and transitions into caregiving and self-employment, reflecting the flexibility GI affords in balancing caregiving and employment.

Vivalt et al. (2024) provide a comprehensive analysis of labor supply, job search behavior, job opportunity selectivity, and job quality, providing insights into how economic and policy conditions affect labor market participation. They observe a slight decrease in labor market participation (-2%) and weekly hours worked (-1.3–1.4 hours) and an increase in unemployment duration, indicating potential shifts in work engagement for some recipients. Pilkauskas et al. (2022) examine labor force participation, considering how economic well-being and material conditions affect individuals' decisions to participate in the labor force. They suggest a nuanced impact on labor force participation compared to others, which can be explained by limiting the sample population to only households with children given the target population of the CTC. Vivalt et al. (2024) study a broader population of working-age, relatively low-income households. Taken together, these studies indicate that while GI can provide stability and enable workforce participation, its impact on overall labor supply and employment patterns varies significantly depending on context, demographics, and program design.

Table 6. Outcome Variable Measurements by Labor Outcomes

Author & Year	Outcome Variable	Impacts
Ananat et al. (2022)	Employment, labor force participation	No statistically significant effects on employment
Balakrishnan et al. (2024)	Labor supply among part-time workers	Decrease in part-time labor participation (-13%)
Bervik et al. (2024)	Full-time employment	Maintained higher rates of full-time employment
DeYoung et al. (2023 September)	Employment stability, labor market participation	Improved employment stability and participation rates
DeYoung et al. (2023 December)	Workforce participation, caregiving roles	Increased transitions into caregiving and self-employment; reduced unemployment
DeYoung et al. (2024 February)	Full-time employment, caregiving vs. employment conflict	Higher full-time employment rates in treatment group, with reduced stay-at-home caregivers
Enriquez et al. (2023)	Labor force participation, hours worked	No significant changes in labor force participation
Francois et al. (2024 August)	Episodic labor engagement, job quality, educational enrollment	Seasonal labor and education engagement; job quality remained low
Kim et al. (2024)	Employment security and transitions	Increased full-time employment compared to control group
Liebman et al. (2022)	Employment, hours worked	No significant effect on employment or work hours
Pignatti and Parolin (2024)	Labor market outcomes	No significant changes in employment status or hours worked
Pilkauskas et al. (2022)	Labor supply, employment	No significant impact on labor supply
Baker et al. (2023)	Short-term labor response	No significant long-term effects on employment
Vivalt et al. (2024)	Labor market participation, work hours, unemployment duration	Decreased participation (2%) and weekly hours (-1.3-1.4 hours), increased unemployment duration

Notes: RCT = Randomized Control Trial and QE = Quasi-experimental

Relational Outcomes

We categorize family dynamics, such as child maltreatment, maternal time use, fatherhood, and child well-being, as a separate category because of its focus on the complex interrelationships among family members. Several studies, such as DeYoung et al. (2023 December), DeYoung et al. (2024 May), and Stacy et al. (2024), highlight enhanced family interactions and trust as significant outcomes of GI programs. These studies measure relational improvements through self-reported surveys assessing the quality of family time and perceived trust levels. Similarly, Henwood et al. (2024) and Kim et al. (2024) report reductions in loneliness and increased neighborhood trust, measured via scales evaluating social cohesion and interactions.

Of 11 studies that examined these indicators, Bervik et al. (2024), DeYoung et al. (2023 September) and DeYoung et al. (2024 February) use mixed measures of parental involvement. Bervik et al. (2024) use an interview to have fathers talk about their involvement with their children. DeYoung et al. (2023 September) use time diaries to quantify the time spent with

family and friends. DeYoung et al. (2024 February) assess “time and space for parenting” both qualitatively and quantitatively through the time they spent with their children and the prioritization they gave to their parenting choices. Thus, while Bervik et al. (2024) emphasize the role of fathers, DeYoung et al. (2024) explore the broader concept of parenting time and decision making.

All studies reported positive effects on parental involvement, child development, and community development, though the variability in measurement approaches might influence the extent of impacts. Bervik et al. (2024) demonstrate improved father-child relationships, and DeYoung et al. (2024 February) highlight improved parenting time and prioritized parenting choices. Francois et al. (2024) report mixed results in community participation and social cohesion, attributing limited improvements to persistent structural challenges. In contrast, Kim et al. (2024) identify stronger neighborhood cohesion through reduced fear of violence and more positive community interactions. When it comes to political relational outcomes, Broockman et al. (2024) and Vivalt et al. (2024) observe small improvements in trust in government and intergroup attitudes but limited significant impacts on political participation.

Educational Outcomes

Among 26 studies, six of them focus on mixed effectiveness of cash transfers in enhancing educational engagement and performance. For children, studies like DeYoung et al. (2024 February) report positive outcomes, including improved grades, reduced absenteeism, and increased advanced placement (AP) participation. However, other studies, such as Liebman et al. (2022) and Stacy et al. (2024), find no significant effects on school attendance or disciplinary actions, suggesting that cash transfers alone may not address broader structural barriers to educational outcomes.

For adults, findings are similarly varied. DeYoung et al. (2024 May) report positive impacts on educational advancement, including increased access to certifications and participation in training programs, showing that cash transfers can help adults pursue further education and skills development. In contrast, Francois et al. (2024) highlight episodic engagement in training programs, internships, and further education, with competing work and life demands limiting sustained progress. Minimal impact on education investment is observed in Vivalt et al. (2024), reflecting the challenges of prioritizing education even with financial support.

3.2 Quality Assessment

Since the majority of the studies included in this review are unpublished, we also conduct a quality assessment to understand the reliability of the outcomes reported. Table 7 presents the key variables for assessing the quality of the study design, including whether the articles are peer-reviewed, utilize randomized controlled trials (RCTs), and whether the control groups receive payment. Only 5 of the 26 articles are peer-reviewed. Ten studies paid the control group.

RCTs that pay control groups offer a stronger comparison to the treatment group through mitigating placebo effects, compared to studies where control groups receive nothing or only participation fees. Of the 26 articles, 17 studies use RCTs that focused primarily on the impact of unconditional cash transfers. RCTs provide a controlled environment to isolate the effects of cash transfers per se, aiming to capture their immediate and direct outcomes. Meanwhile, quasi-experimental studies take advantage of naturally occurring data variation to infer the impact of programs subject to generally stronger assumptions necessary for validity .

Table 7: Metadata of Selected Literature

No.	Authors	Peer Reviewed	Method	Control Paid
1	Stacy et al. (2024)	Y	RCT	N
2	Henwood et al. (2024)	Y	RCT	N
3	Bartik et al. (2024)	N	RCT	Y
4	Miller et al. (2024)	N	RCT	Y
5	Vivalt et al. (2024)	N	RCT	Y
6	Balakrishnan et al. (2024)	N	RCT	N
7	Broockman et al. (2024)	N	RCT	Y
8	Bervik et al. (2024)	N	RCT	N
9	De Young et al. (2024 May)	N	RCT	no control
10	De Young et al. (2024 February)	N	RCT	N
11	De Young et al. (2023 December)	N	RCT	N
12	De Young et al. (2023 September)	N	RCT	N
13	Francois et al. (2024 August)	N	RCT	no control
14	Jaroszewicz et al. (2024 July)	N	RCT	N
15	Kim et al. (2024 July)	N	RCT	N
16	Liebman et al. (2022)	N	RCT	N
17	Roll et al. (2024)	N	RCT	no control
18	Kovski et al. (2023)	Y	Quasi-DID	N
19	Pignatti and Parolin (2024)	Y	Quasi-DID	Y
20	Baker et al. (2023)	Y	Quasi-DID	N
21	Ananat et al. (2022)	N	Quasi-DID	Y/N
22	Enriquez et al. (2023)		Quasi-DID	Y
23	Collinson et al. (2024)		Quasi-IV	N
24	Lyu et al. (2024)		Quasi-DID	Y
25	Pilkauskas et al. (2023)		Quasi-DID	Y
26	Pilkauskas et al. (2022)		Quasi-DID	Y

Note: Studies labeled as "no control" in the "Control Paid" column are categorized as RCTs in the "Method" column but lack a true control group, relying only on random sampling and random treatment.

The quality of the selected literature was evaluated using a revised version of the JBI Critical Appraisal Tool for RCTs and quasi-experimental designs (see [Appendix](#)). The JBI questionnaires

were reviewed and selected to fit the objectivity and relevance to this study’s focus, and finally sorted into more general categories of internal validity, statistical conclusion validity, and transparency.

For internal validity, baseline comparison questionnaires are applied to assess differences between the control and treatment groups. The standards for evaluating RCTs and quasi-experimental research are broadly consistent, with the primary distinction being the criteria for assessing internal validity. For RCTs, internal validity is primarily determined through the random assignment process between control and treatment groups. In contrast, for quasi-experimental studies, internal validity is assessed based on statistical validity and assumptions relevant to each specific methodology. The RCT’s internal validity has a maximum score of 5, whereas quasi-experimental studies have a maximum score of 4.

		RCT	Quasi-Experimental
1	Internal Validity	Is the treatment and control group similar at the baseline OR was the randomization process/probabilities known?	
2		Was randomization used for assignment into treatment and control group?	Is the control group similar?
3		Is there a control group?	Is there a control group?
4		Is the control group paid?	Is the control group paid?
5		Was there a follow-up?	Was there a follow-up?

The statistical conclusion validity checklist focuses on the statistical methods specific to the two research designs. Particularly for quasi-experimental research, each empirical methodology requires an evaluation based on the assumptions tied to the design. For example, papers utilizing Difference-in-Differences methods should satisfy the parallel trend and no anticipation effect assumptions to receive a full score equal to 1.

Standardized outcome measurements are evaluated based on their objectivity and clinical validity. Studies relying solely on self-reported questionnaires that have not been validated or standardized through other empirical research received a score of 0 in this category. Articles that employed well-established instruments for measuring life quality or mental health outcomes, such as the 36-Item Short Form Survey (Bervik et al., 2024), but did not include objectively quantifiable measures, were assigned a score of 0.5. Studies incorporating objective measures—such as bank account balances or standardized financial well-being scales (e.g., the Consumer Financial Protection Bureau (CFPB) Financial Well-Being Scale)—received a full score of 1.

		RCT	Quasi-Experimental
5	Statistical Conclusion Validity	Is there a " <i>standardized</i> " outcome measure?	Is there a " <i>standardized</i> " outcome measure?
6			Is there a validity check for the statistical method used?
7		Does the study report only point estimates of effect sizes (i.e., no confidence interval)?	Does the study report only point estimates of effect sizes (i.e., no confidence interval)?
8		Does the study make FDR (false discovery rate adjustments), or at least, acknowledge the problem of false positives when they test multiple hypotheses?	Does the study make FDR (false discovery rate adjustments), or at least, acknowledge the problem of false positives when they test multiple hypotheses?
9		Did the study control for important factors (e.g., age, race, gender, family environment)?	Do they use controls of any kind?

The transparency of the studies is assessed uniformly for both types of articles, considering factors such as method pre-registration, replication feasibility, and survey instrument availability where applicable. Additionally, the checklist included whether the study has undergone peer review. Each article receives a score out of a maximum of 13 points.

		RCT	Quasi-Experimental
10	Trans- parency	Is there publicly available survey instrument (assuming a survey was used)?	Is there publicly available survey instrument (assuming a survey was used)?
11		Did the study pre-register their technique?	Did the study pre-register their technique?
12		Are the methods described well enough for replication assuming we had the data?	Are the methods described well enough for replication assuming we had the data?
13		Was the paper peer-reviewed?	Was the paper peer-reviewed?

The quality assessment process involves three stages. Initially, one researcher conducts an independent evaluation of each study, followed by an independent review by a second researcher. Then a third researcher performs a final review and confirmation. Figure 3 displays the results where the top 17 articles are randomized controlled trials (RCTs) and the remaining articles at the bottom are quasi-experimental studies.

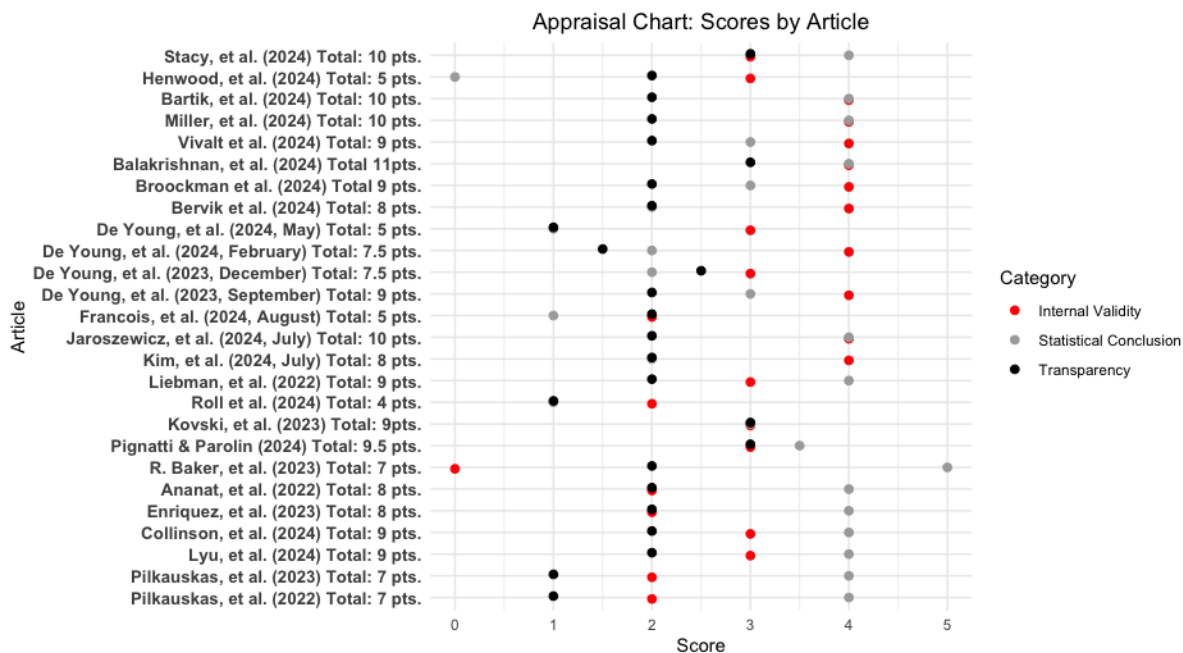
RCTs tend to have higher total scores overall (many achieving 8–10 points). This suggests that randomized controlled trials in the dataset generally exhibit stronger or more consistent adherence

to evaluation criteria across the three categories. The findings reveal that most RCTs meet key criteria, including appropriate randomization, controlling for confounding variables, and facilitating replication, with high scores in these areas. However, few RCTs implemented compensation for control groups, used standardized and objective outcome measures, or adjusted for false discovery rates when testing multiple hypotheses.

Quasi-experimental studies in our sample tend to have lower or mid-range total scores (4–9 points), reflecting the inherent limitations in these designs when compared to RCTs, as expected due to their non-randomized design. Despite their inherent limitations, some quasi-experimental studies perform relatively well in statistical conclusion validity and show moderate transparency. This suggests that, while they may lack the robustness of randomized designs, these studies demonstrate strong analytical rigor and adherence to good reporting practices, highlighting their potential to provide valuable insights when conducted carefully.

Moreover, among just these studies, the peer-reviewed studies tend to have a higher score on transparency (2.6 vs. 1.9, $p < .01$) than the non-peer-reviewed studies. This difference likely reflects how peer reviewers play a pivotal role in fostering transparency in research by critically evaluating how studies are conducted and asking probing questions about the methods and analyses used. This process encourages authors to provide detailed information about their study design, data collection, and statistical procedures, which might otherwise remain opaque. Ultimately, peer review serves as both a quality check and a learning opportunity, driving higher standards of evidence in published research.

Figure 3: Appraisal Scores by Category



4. Discussion

In summary, we cast a wide net to identify evaluations of causal effects of recent GI programs in high-income economies. Altogether, these 26 studies examine a wide range of outcome indicators on participants’ finances, health, labor supply, relational, and educational changes. The outcomes evaluated in these studies reflect the importance of certain outcomes to GI program evaluators and policymakers. The primary focus tends to be health or economic security, with other categories (e.g., labor participation, education, social and family) receiving less attention. Studies of economic outcomes employ a variety of outcome concepts (e.g., income volatility, avoiding hardship) and measures. Perhaps unsurprisingly, results for economic outcomes tend to show favorable impacts of GI programs. After all, the essence of guaranteed income directly addresses economic security. The studies examining health outcomes exhibit more mixed results, with many finding temporary or insignificant benefits from the programs. Only limited evidence of effects on labor supply is evident in these studies, including negative or no impacts on labor force participation. Only one study examines educational outcomes, and it finds generally null effects. By contrast, a few studies address social or family dynamics outcomes. Across a variety of measures, these studies show increases in parental involvement and child development due to the GI program.

It bears emphasis that these are “early days” in evaluating GI programs that have been implemented since the pandemic. It is possible that subsequent studies of pilots either in progress or not yet started will afford us the opportunity to learn more from the programs. The policy implications that result from learning about the effects of these evaluations might either reinforce

what we think we know about GI in general, or change our minds about the effectiveness of GI as a policy to address social issues like poverty.

It is also possible that more evaluations of these pilots might add more confusion about outcomes of GI. This systematic literature review emphasizes one area in particular where outcomes of GI have been mixed: the effects on labor. Depending on the study's context, including its target population, frequency and amount of the cash disbursement, and other factors, the labor behavior of participants in the program varied. Proponents of running more experiments on GI propose that more evidence will help fill these "gaps" (Castro and West, 2022); but it is also very likely that the inconsistency of pilots and programs, and the varying nature of participants is such that evaluations of GI can never be deterministic. After all, a premise behind unconditional cash transfers is to maximize recipients' discretion and flexibility in responding to the GI. With no strings attached, great heterogeneity in treatment effects might be a feature, not a bug, of GI programs.

Moreover, the lack of peer review and the publication of evaluations of guaranteed income programs outside of the peer-reviewed academic literature raise significant concerns regarding the validity and reliability of these studies. This paper found that less than one-fifth of GI programs since 2020 have been published in peer-reviewed publication outlets, and peer-reviewed studies scored higher on the quality assessment compared to non-peer-reviewed studies. Some of this may be a matter of time, as peer review is a slow process. Peer review serves as a critical mechanism for ensuring methodological rigor, transparency, and the accurate interpretation of findings, which are essential for producing credible evidence. Without this scrutiny, studies may be subject to biases, methodological flaws, or incomplete analyses that could undermine their conclusions.

Additionally, publishing outside of academic venues and treating methodologies as proprietary can limit the accessibility of the research to the broader scholarly community, stifling critical debate and replication efforts. These issues are particularly troubling given the influence such studies can have on public policy, where evidence-based decisions require robust and trustworthy data. When evaluations bypass established academic standards, there is a risk that policies may be shaped by incomplete or unreliable findings, potentially leading to unintended consequences or ineffective interventions.

5. Agenda for Future Research

Future research would do well to continue building the literature on GI programs' effects. Careful, systematic sampling and analysis of the published findings are essential to avoid cherry-picking results and to control for possible publication bias in the literature that is of a political/advocacy, as opposed to a scientific nature. It is crucial to continue assessing quality and rigor in the evaluations. While we restricted our sample to quantitative RCT or quasi-

experimental designs, other evaluation designs, such as those using mixed methods, warrant scrutiny for how their designs are leveraged to provide the best evidence (Hendren et al., 2020).

Evaluations of GI programs should continue to confront the challenges of heterogeneity in this context in order to improve our understanding of their varied impacts. To start, studies should be of sufficient power in order to add credible evidence to the body of evidence on the outcomes of GI programs. In addition to covering a wide array of possible outcome indicators, this sort of heterogeneity can involve better mapping of the role of an individual's context in realizing those impacts. GI interventions may be more or less effective at certain stages in one's life, for certain types of households, with other social supports in place, etc. As pilots continue to be evaluated, we can better address how program details affect outcomes rather than treating GI programs as interchangeable or equivalent. We know too little about how implementation details like the amounts, frequency, duration of payments affect outcomes. Further, generalizability and scalability of GI programs likely depend on the particular recipient population. Such evidence can inform our expectations when shifting from targeted recipients (e.g., homeless, low-income) to more 'universal' populations.

Relatedly, future research should continue to address the temporal aspects of GI programs' impacts. How long effects take to manifest and how long they last (with or without continued income transfers) can be crucial to GI program designs, especially when participation is not universal. Evaluation designs that can capture long-term effects are especially important for making the case for GI programs and for financing them.

Evaluations would also do well to cast a broader net in assessing the costs and benefits of GI programs. This literature currently emphasizes individual- or household-level impacts. Yet peer effects, social context, and more general equilibrium effects are expected to play important roles – especially as GI programs scale beyond smaller pilots (Calnitsky, 2019). In one sense, this points to the importance of a fuller accounting of program impacts, including things like “public expenditures avoided” for things like public safety and health. If structural barriers beyond income remain the root cause of key outcomes, then attention should be paid to how they, or their influence, are affected by GI programs (Widerquist, 2018). Some impacts may require evaluations poorly suited to RCTs and pilot projects.

The post-pandemic traction gained by UBI and GI and the accompanying wave of pilot projects have heightened the debate around these policies (Castro and West, 2022). Those in media, politics, and advocacy often make strong claims about the effectiveness of these programs and what the evidence shows. Older studies of very different programs, in very different contexts, might not be the strongest basis for understanding the impacts of GI. Thus, a systematic review of the most recent, most salient empirical studies of GI program impacts is crucial to better informing policy debates and design. Future researchers should be aware of these publicly available findings, even those not published in peer-reviewed outlets, especially when those

results are already being cited in those debates. However, researchers and policymakers need also consider these studies in their context in terms of their overall reliability and contribution to the evidence base that is helping push (or pull) the “GI movement.” Indeed, this is one policy arena that is moving much faster than the peer-review publication system moves and this review is intended to help researchers and policymakers keep up.

References

- Bailey, M. J., Lang, V. W., Prettyman, A., Vrioni, I., Bart, L. J., Eisenberg, D., ... & Dalton, V. (2023). *How costs limit contraceptive use among low-income women in the US: a randomized control trial* (No. w31397). National Bureau of Economic Research.
- Balakrishnan, S., Chan, S., Constantino, S., Haushofer, J., & Morduch, J. (2024). *Household Responses to Guaranteed Income: Experimental Evidence from Compton, California* (No. w33209). National Bureau of Economic Research.
- Baker, S. R., Farrokhnia, R. A., Meyer, S., Pagel, M., & Yannelis, C. (2023). Income, liquidity, and the consumption response to the 2020 economic stimulus payments. *Review of Finance*, 27(6), 2271-2304.
- Berik, A., Lyons, A. J., West, S., Tandon, N., Castro, A., & Nichols, B. (2024). The American guaranteed income studies: Columbia, South Carolina. Center for Guaranteed Income Research, University of Pennsylvania. <https://guaranteedincome.us/images/columbia-report.pdf>
- Broockman, D. E., Rhodes, E., Bartik, A. W., Dotson, K., Miller, S., Krause, P. K., & Vivaldi, E. (2024). *The Causal Effects of Income on Political Attitudes and Behavior: A Randomized Field Experiment* (No. w33214). National Bureau of Economic Research.
- Bullinger, L. R., Packham, A., & Raissian, K. M. (2023). *Effects of Universal and Unconditional Cash Transfers on Child Abuse and Neglect* (No. w31733). National Bureau of Economic Research.
- Calnitsky, D. (2019). Basic income and the pitfalls of randomization. *Contexts*, 18(1), 22-29.
- Castro, A., & West, S. (2022). The Case for Basic Income Experiments. *Journal of Policy Analysis & Management*, 41(2), 639-644.
- Crosta, T., Karlan, D., Ong, F., Rüschenpöhler, J., & Udry, C. (2024). Unconditional Cash Transfers: A Bayesian Meta-Analysis of Randomized Evaluations in Low and Middle Income Countries.
- Decerf, B., Ferreira, F. H., Mahler, D. G., & Sterck, O. (2021). Lives and livelihoods: estimates of the global mortality and poverty effects of the Covid-19 pandemic. *World Development*, 146, 105561.
- DeYoung, E., Tandon, N., Neves, C., Castro, A., & West, S. (2023a). The American guaranteed income studies: Paterson, New Jersey. Center for Guaranteed Income Research, University of Pennsylvania. <https://guaranteedincome.us/images/paterson-report.pdf>

DeYoung, E., Castro, A., Tandon, N., Thompson, A., & West, S. (2023b). The American guaranteed income studies: Ulster County, New York. Center for Guaranteed Income Research, University of Pennsylvania.

https://static1.squarespace.com/static/5fdc101bc3cfda2dcf0a2244/t/664deaad661fb6577c414fed/1716382383063/CGIR_11.15.2023_Ulster%2BCounty%2BFinal%2BReport.pdf

DeYoung, E., Tandon, N., West, S., Castro, A., Golinkoff, J., & Thompson, A. (2024). The American guaranteed income studies: Cambridge, Massachusetts. Center for Guaranteed Income Research, University of Pennsylvania.

https://static1.squarespace.com/static/5fdc101bc3cfda2dcf0a2244/t/664dea43f18a036fb1efacea/1716382278502/CGIR%2BFinal%2BReport_Cambridge%2BMA_2024.pdf

Gennetian, L. A., Duncan, G., Fox, N. A., Magnuson, K., Halpern-Meekin, S., Noble, K. G., & Yoshikawa, H. (2022). *Unconditional cash and family investments in infants: Evidence from a large-scale cash transfer experiment in the US* (No. w30379). National Bureau of Economic Research.

Hawkins, A. A., Hollrah, C. A., Miller, S., Wherry, L. R., Aldana, G., & Wong, M. D. (2023). *The long-term effects of income for at-risk infants: evidence from Supplemental Security Income* (No. w31746). National Bureau of Economic Research.

Hendren, K., Newcomer, K., Pandey, S. K., Smith, M., & Sumner, N. (2023). How qualitative research methods can be leveraged to strengthen mixed methods research in public policy and public administration? *Public Administration Review*, 83(3), 468-485.

Kovski, N., Pilkauskas, N. V., Micheltore, K., & Shaefer, H. L. (2023). Unconditional cash transfers and mental health symptoms among parents with low incomes: Evidence from the 2021 Child Tax Credit. *SSM-Population Health*, 22, 101420.

Laín, B. (2022). Policy Details as a Plea for Basic Income Experiments. *Journal of Policy Analysis & Management*, 41(2), 645-649.

Lyu, W., Wehby, G., & Kaestner, R. (2024). *Effects of Income on Infant Health: Evidence from the Expanded Child Tax Credit and Pandemic Stimulus Checks* (No. w32310). National Bureau of Economic Research.

Miller, S., Rhodes, E., Bartik, A. W., Broockman, D. E., Krause, P. K., & Vivaldi, E. (2024). *Does Income Affect Health? Evidence from a Randomized Controlled Trial of a Guaranteed Income* (No. w32711). National Bureau of Economic Research.

Nakphong, M. K., Bright, D. J., Koreitem, A., Mocello, A. R., Lisha, N. E., Leslie, H. H., ... & Lightfoot, M. A. (2024). Housing instability patterns among low-income, urban Black young

adults in California and associations with mental health outcomes: baseline data from a randomized waitlist-controlled trial. *BMC Public Health*, 24(1), 2492.

OECD. (2024) *Income Inequality*. <https://www.oecd.org/en/data/indicators/income-inequality.html>.

Pignatti, C., & Parolin, Z. (2024). The effects of an unconditional cash transfer on parents' mental health in the United States. *Health Economics*, 33(10), 2253-2287.

Pilkaukas, N., Michelmore, K., Kovski, N., & Shaefer, H. L. (2022). *The effects of income on the economic wellbeing of families with low incomes: Evidence from the 2021 expanded Child Tax Credit* (No. w30533). National Bureau of Economic Research.

Pinto, A. D., Perri, M., Pedersen, C. L., Aratangy, T., Hapsari, A. P., & Hwang, S. W. (2021). Exploring different methods to evaluate the impact of basic income interventions: A systematic review. *International Journal for Equity in Health*, 20(1), 142.

Rizvi, Anita, Madeleine Kearns, Michael Dignam, Alison Coates, Melissa K. Sharp, Olivia Magwood, Patrick R. Labelle et al. (2024). Effects of guaranteed basic income interventions on poverty-related outcomes in high-income countries: A systematic review and meta-analysis. *Campbell Systematic Reviews* 20, no. 2 (2024): e1414.

Silver, D., & Zhang, J. (2022). *Invisible Wounds: Health and Well-Being Impacts of Mental Disorder Disability Compensation on Veterans* (No. w29877). National Bureau of Economic Research.

Vivalt, E., Rhodes, E., Bartik, A. W., Broockman, D. E., & Miller, S. (2024). *The Employment Effects of a Guaranteed Income: Experimental Evidence from Two US States* (No. w32719). National Bureau of Economic Research.

West, S., & Castro, A. (2023). Impact of guaranteed income on health, finances, and agency: findings from the Stockton randomized controlled trial. *Journal of Urban Health*, 100(2), 227-244.

Widerquist, K. (2018). *A critical analysis of basic income experiments for researchers, policymakers, and citizens*. New York: Springer International Publishing.

Zander, V., Gustafsson, C., Landerdahl Stridsberg, S., & Borg, J. (2023). Implementation of welfare technology: a systematic review of barriers and facilitators. *Disability and Rehabilitation: Assistive Technology*, 18(6), 913-928.

Table 3. Summary Description of Outcomes Measured in the Studies

#	Authors	Outcome Measures				
		Labor	Financial	Health	Educational	Relational
1	Ananat et al. (2022)	[0] Employment status on population survey				
2	Balakrishnan et al. (2024)	[0] Labor supply	[+] Housing security [0] Financial well-being	[0] Psychological well-being		
3	Bartik et al. (2024)		[+] Food and car expenses [+] Asset values (financial assets) [0] Financial health Credit limits Delinquencies Utilization, Bankruptcies Foreclosures [+] Credit scores			
4	Bervik et al. (2024)	[+] Employment security	[+] Food security [+] Food quality [-] Income volatility [-] Housing security [-] Housing quality	[+] Emotional well-being Courage Future planning aptitude		
5	Broockman et al. (2024)					[+] Political attitudes [0] Political participation or engagement
6	Collinson et al. (2024)		[+] Rent payment ability [0] Financial and housing stability	[+] Mental health survey measures		
7	De Young et al. (December 2023)	[+] Self-employment [+] Employment	[+] Financial relief and resilience [+] Food security [+] Financial well-being Savings Emergency expenses			[+] Parenting and caregiving roles [-] Household distress and chaos

8	De Young et al. (September 2023)	[+] Employment stability	[+] Housing [+] Food security [+] Financial well-being HH income Savings Emergency expenses	[+] Physical health Physical functioning [-] Physical limitations [+] Mental health Self-determination Goal-setting		[+] Time with family and friends
9	De Young et al. (February 2024)	[+] Work outside caregiving responsibilities	[+] Income [+] Income stability [+] Emergency expenses [+] Savings		[+] Child's educational outcomes	[0] Household chaos and distress [0] Goal-setting [0] Future planning
10	DeYoung et al. (May 2024)		[+] Homeownership [+] Strategic asset-building [+] Financial Well-Being Emergency expenses		[+] Certification and education for a stable job	[+] Quality time with family [+] Sharing GI with the community
11	Enriquez et al. (2023)	[0] Labor participation [0] Actual worked hours				
12	Francois et al. (August 2024)	[+] Seasonal shifts in labor market participation	[+] Financial well-being [0] Housing cost burden [0] Food insecurity [-] Financial volatility	[+] Mental health Resilience Goals Strengths	[+] Educational opportunities Training program Internships	[+] Financial support for family [+] Familial interdependence
13	Henwood et al. (2024)		[+] Housing status [+] Financial wellbeing			Social isolation Social support
14	Jaroszewicz et al. (July 20, 2024)		[+] Expenditure [0] Savings stock [0] Work performance (if employed) [0] Earned income [0] Liquidity constraints	[0] Cognitive capacity Raven's standard short-form matrices Sense of memory Thought of money [0] Physical health Sleep quality Self-reported health: Food security Nutrition Exercise [0] Psychological wellbeing Sense of agency Life satisfaction		[0] Relationship with partner or spouse

15	Kim et al. (July 2024)	[+] Full-time employment	[+] Food Security Eating preferred food [+] Financial Well-Being Emergency expenses			[+] Parenting Maintaining child's extracurricular activities [+] Positive interactions with neighbors [-] Severity and frequency of intimate partner violence [-] Fear of neighborhood violence
16	Kovski et al. (2023)		[+] Financial security	[+] Mental health		
17	Liebman et al. (2022)	[0] Employment [0] Work hours	[+] Food security [+] Pregnancy from financial security [-] Residential moves [-] Financial distress	[+] Consumption of fresh meat and fish [+] Food satisfaction [0] Self-reported physical health [0] Self-reported mental health	[0] Child school attendance	
18	Lyu et al. (2024)			[0] Birthweight [0] Incidence of low birth weight [0] Gestational age and fetal growth		
19	Miller et al. (2024)		[-] Food security	[+] Stress improvement [+] Hospital and emergency department care, [+] Medical spending [+] Office-based dental care [0] Physical health survey measures [0] Biomarkers derived from blood draws		
20	Pignatti & Parolin (2024)	[0] Labor supply		[+] Mental health		
21	Pilkauskas et al. (2022)	[0] Labor supply (employment)	[+] Food security [+] Utility payment ability [-] Reliance on friends/families	[-] Medical hardships		

			for food			
22	Pilkauskas et al. (2023)		[+] Residential independence from partner [-] Number of people residing in their household [-] Past-due rent/mortgage [-] Moving reported			[+] Residential independence from partner
23	Baker et al. (2023)	Interaction term with unemployment expectation	[+] Savings [+] Durable spending [+] Consumption Food Rent Mortgages [+] Credit card short-term debt overhang			
24	Roll et al. (2024)		[+] Consumptions in: Food Transportation Prof. services: Hair care Car maintenance [+] Financial stability Disposable income Reduced bank overdrafts [+] Housing	[+] Mental health [+] Health care expenses		
25	Stacy et al. (2024)		[+] Financial health Having a bank account HH finances contribution Lower financial stress	[+] Physical and mental health Criminal history Justice system involvement (Carrying a weapon) [-] Spending on substances	[+] School attendance [-] Disciplinary actions	[+] Social support Communication with friends and families
26	Vivalt et al. (2024)	[+] Leisure time [+] Time on transportation and finances [0] Quality of employment	[-] Income		[+] Formal education [0] Investments in human capital	

		[-] Labor supply and time				
--	--	---------------------------	--	--	--	--

Notes: + = positive effect; - = negative effect; 0 = null effect