DEVELOPING A DIRECT CASH TRANSFER PROGRAM FOR YOUTH EXPERIENCING HOMELESSNESS:

Results of a Mixed Methods, Multi-Stakeholder Design Process

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OCTOBER 2020
Recommended Citation


Acknowledgements

This research was funded by grants from the Robin Hood Foundation and the Block-Leavitt Foundation. The authors appreciate close collaboration with multiple NYC Government offices and agencies and NYC’s Youth Action Board, and its host organization, the Coalition for Homeless Youth. The authors also acknowledge the important research and subject matter guidance throughout the project from Anne Farrell, as well as her review of drafts of this report.

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New York City and jurisdictions across the country lack evidence for which interventions work best, and for whom, to devise systemic solutions for ending youth homelessness. One solution may be offering direct financial assistance (“cash transfers”) along with other supports to youth experiencing homelessness. This intervention has the potential to empower and entrust young people to invest in their own solutions for housing stability and pathways to thriving. To this end, Chapin Hall at the University of Chicago, in partnership with Point Source Youth, is collaborating with young people, government agencies, and private sector funders to develop and evaluate a direct cash transfer program (DCTP) for youth experiencing homelessness in NYC. As a first phase of this work, we engaged in mixed-methods formative research and multistakeholder collaboration to inform the design of a DCTP and evaluation. These activities included a rapid review of international evidence reviews ($n = 46$) and U.S. primary studies ($n = 26$) on DCTPs, focus groups with youth with lived experience of homelessness ($n = 26$), interviews and focus groups with a range of other stakeholders ($n = 23$), and a workshop with youth ($n = 6$) and other stakeholders ($n = 12$) to co-interpret the findings and help identify implications for intervention development. The findings underscore the transformative potential of a DCTP for youth experiencing homelessness. They also reveal valuable insights for informing intervention design and delivery, including the importance of adequate payment amounts informed by local housing costs; a 1- to 2-year cash transfer duration to support stabilization; versatile payout options; voluntary and high-quality supports and skill-building opportunities to complement cash transfers; taking special efforts to ensure access among particularly marginalized subpopulations of youth (e.g., immigrant, refugee, racial minority, and LGBTQ youth); and an overall empowering, flexible, simple, and user-friendly intervention design.
This report describes findings from a study and multistakeholder engagement process to inform the design of a direct cash transfers program (DCTP) for youth experiencing homelessness, with a focus on New York City (NYC). As housing costs have escalated, many young people need serious investments to get stably housed and onto a path to thriving, even if they’re working. When unable to live independently, some young people can safely and reliably stay with family. Many others can’t; they face a range of risks and traumas during a key developmental period. These young people are disproportionately Black, Indigenous, and People of Color (BIPOC) and lesbian, gay, bisexual, transgender, or queer (LGBTQ) identifying.

For these young people, case management and ad hoc supports like food or clothing donations just aren’t enough. More substantial resources for addressing youth homelessness are often committed to program models that involve high capital and overhead costs and can offer very limited flexibility to youth, like shelters, transitional housing, and permanent supportive housing. These investments help meet the needs of some young people experiencing homelessness but leave many others inadequately supported and, ultimately, still homeless. The circumstances of COVID-19 have exacerbated inequalities while rendering congregate shelter options less viable. These shelters can pose public health risks for youth and staff.

Direct cash transfer programs are one of the most widely used and evidence-based interventions for people in poverty across the world. Evaluations have demonstrated their effectiveness as a flexible safety net in both crisis and noncrisis contexts. However, DCTPs have never been specifically developed or evaluated for youth experiencing homelessness. To this end, Chapin Hall at the University of Chicago, in partnership with Point Source Youth, is collaborating with youth, government agencies, and private sector funders to develop and evaluate a DCTP for youth experiencing homelessness.

This report describes our findings from a formative research stage to inform the design of a DCTP and evaluation for youth experiencing homelessness. Although we focus on NYC, we expect that many of our findings translate to other U.S. cities and communities. We conducted a set of formative research activities to gather evidence to inform decision making; these included a rapid review of international evidence reviews (n = 46) and U.S. primary studies (n = 26) on DCTPs, focus groups with youth with lived experience of homelessness (n = 26), and interviews and focus groups with a range of other stakeholders (n = 23). We also facilitated a co-interpretation workshop with youth (n = 6) and other NYC stakeholders (n = 12) to identify implications of the research findings for designing the DCTP. Below, we outline four key conclusions.

1. Center on youth, equity, and trust. Young people elevated the importance of centering the program on youth needs and preferences, particularly BIPOC and LGBTQ youth who face discrimination and exclusion through existing systems.
2. **Boost housing stability and empowerment.** Participants encouraged setting this DCTP up with clear and bold objectives: help youth sustainably exit homelessness and get on paths to thriving, according to the paths they choose. These objectives should inform transfer amounts, duration, and supportive programming.

3. **Adopt a flexible and simple approach.** Youth experiencing homelessness have diverse needs, preferences, and circumstances. Allowing youth to choose between different payment mechanisms and supportive options facilitates better results for youth in diverse situations. At the same time, providing simple, integrated delivery systems and youth support teams makes the program easier and more efficient to implement.

4. **Identify and manage barriers to success.** While common concerns about risks to giving money to people living in poverty do not play out, certain design and support decisions can reduce the risk of rare adverse events and can help mitigate the potential for cash transfers to knock youth off other public benefits or face costly tax implications.

After reviewing the existing evidence base and engaging a range of stakeholders, the potential value of a DCTP in the lives of youth experiencing homelessness and in disrupting the way our society sees and supports these young people is clear. The findings and implications from this mixed-methods, multistakeholder design process can now support better-informed development of a DCTP for youth experiencing homelessness and its evaluation.

The following quotes from our focus groups illustrate stakeholders’ views of the potential of a DCTP for youth experiencing homelessness:

“It gives youth a chance to stay off the streets. And also helps motivate youth. It helps build youth confidence. Because they feel like they can actually do something. Now that they actually have hope from somebody. It’s like you give people a chance.” – Youth

“If there’s something that is giving people the money, is [also] giving people direct resources and is also giving people the support on how to navigate those resources, I think it’d be very helpful.” – Youth

“This [program] opens doors of opportunities for me. And then, once I get the money, I can break it into three: one for rent, personal needs, and then the last was for school.” – Youth

“I do not see a lot of value in creating more fine-tuned models for how we could compel poor folks and folks of color to engage in activities that they themselves don’t deem to be the most helpful. I’m not interested in creating better systems of compulsion, better systems of social control. I really want us to be thinking about liberation” – Nonyouth stakeholder
Figure 1. Key elements of building an effective cash transfer program for addressing youth homelessness

- Center on youth, equity, & trust
- Boost housing stability & empowerment
- Adopt a flexible & simple approach
- Identify & manage barriers to success
INTRODUCTION

Overview
Chapin Hall at the University of Chicago, in partnership with Point Source Youth, has conducted formative research and a process of engaging multiple stakeholders to inform the design and delivery of a direct cash transfer program (DCTP) for youth experiencing homelessness in New York City (NYC). This report synthesizes key findings and implications for the purpose of informing program and study design decisions. The project involved four components:

1. a rapid review of international and domestic cash transfers literature;
2. focus group discussions with youth with lived experience of homelessness;
3. interviews and focus group discussions with cross-sector stakeholders working on youth homelessness in NYC and with national and international experts on cash transfers; and
4. a one-day co-interpretation workshop with youth and other stakeholders working on youth homelessness in NYC to discuss the findings from the first three components and their implications.

This report describes methods, findings, and implications from the first phase of research in a multiphase research initiative. This process is consistent with internationally accepted standards, as outlined by the Medical Research Council’s (MRC) Framework for Developing and Evaluating Complex Interventions (Craig et al., 2008). The framework advises a research-based process for intervention development (Phase 1 formative research—the focus of this report); piloting and assessing feasibility to test procedures, estimate recruitment and retention, and determine sample sizes (our upcoming Phase 2); evaluation of the intervention effectiveness, implementation, change processes, and cost-effectiveness (our Phase 3); and sustained implementation, including dissemination, monitoring and quality assurance at scale-up, and long-term outcomes follow-up (our Phase 4 and beyond).

The basic idea underlying cash transfers is simple: give money directly to people so that they are empowered to make purchasing and investment decisions for their own well-being. Yet, DCTPs include a wide range of approaches. Box 1 provides additional information on how we define cash transfers and common variations in approaches. Choices between different approaches need to take into account a number of factors, such as the objectives, population, and context involved in a planned DCTP. To this end, the research and multi-stakeholder engagement process described in this report aimed to specifically inform the design of a DCTP for youth experiencing homelessness, with a focus on starting in NYC.

This project included the following components: a rapid literature review of international and domestic evidence on DCTPs, focus group discussions with youth with lived expertise of homelessness in NYC, interviews and focus groups with a range of other nonyouth stakeholders, both in and outside of NYC, and a facilitated co-interpretation workshop with youth and other stakeholders to appraise the research findings and help the Chapin Hall and Point Source Youth project team identify implications for program and evaluation design.
Box 1. What are cash transfers?
A cash transfer is typically defined as “a direct transfer payment of money to an eligible person” (O'Sullivan & Sheffrin, 2003). Because a cash transfer is a payment of money directly to a person, it is different from indirect and nonfungible forms of assistance (for example, vouchers; coupons; restricted scholarships; payments made directly to others, such as landlords; in-kind goods, services, or housing). This definition encompasses a wide range of interventions, many of which do not necessarily describe themselves as “cash transfers” and might use other terms, such as stipends, financial assistance, direct payments, money transfers, financial transfers.

According to Innovations for Poverty Action (2018), there are three main categories of cash transfers: an unconditional cash transfer (UCT), which is a cash transfer made without any conditions required for the recipient; a conditional cash transfer (CCT), which is made on the condition that the recipient meets specified criteria such as school attendance or receiving vaccinations; and a labeled cash transfer (LCT), in which funds are indicated, or ‘labeled,’ for a specific purpose, but the conditions are not enforced. There are two broad types of cash transfers within the UCT and LCT categories: one-off transfers or grants, which are often intended for those in an immediate, nonrecurring crisis (e.g., eviction prevention, or an emergency payment to households affected by a natural disaster); and ongoing transfers, which are paid repeatedly over a period of time, providing an ongoing safety net. Increasingly, cash transfer programs also involve “Cash Plus” models, linking direct cash transfers to other voluntary supports and services that address people’s nonmonetary constraints to getting out of poverty.

Sometimes cash transfers are offered unconditionally with a high enough amount and enough regularity to constitute a guaranteed basic income (sometimes called a universal basic income [UBI] if extended to all citizens in a population). A basic income is intended to provide sufficient financial assistance to guarantee that all citizens can meet their basic needs, usually defined as at or above the poverty level. “Partial” basic income offers less than that amount.

We worked closely with the NYC Youth Action Board—a group of youth leaders with lived experience of homelessness—in planning and carrying out the research, and we hired and supported a young adult leader and researcher with lived expertise of homelessness as a consultant and member of the research team. The Chapin Hall and University of Chicago School of Social Service Administration Institutional Review Board reviewed and approved all of this project’s research activities (IRB19-1358).

Addressing Inequities
With deep-seeded inequities in homelessness related to race, ethnicity, sexual orientation, and gender identity, a DCTP may help mitigate disproportionalities in homelessness response systems. Not only are Black, Indigenous, and People of Color (BIPOC) and LGBTQ youth much more likely than white, heterosexual, and cisgender peers to experience homelessness, but they also report higher levels of discrimination, discomfort, and insecurity with shelters and services (Samuels et al., 2018; Shelton et al., 2018). Additionally, a recent analysis of homelessness...
systems data across multiple communities shows that BIPOC youth are less likely than white youth to have successful exits from homelessness without formal intervention, and they tend to have longer wait times in homelessness systems (Morton et al., 2019). Among youth experiencing homelessness, BIPOC and LGBTQ youth also have higher death rates.

If designed carefully and with youth with lived experience, a DCTP has the potential to further racial justice and LGBTQ inclusion. Cash transfers to BIPOC youth, for example, can help offset unequal distributions of income and wealth that contribute to racial disparities in homelessness. Notably, the practice of direct cash assistance to young people in the U.S. is not new, but it is largely informal and inequitably distributed. According to analyses of national data from 2007–2013, about 40% of 22-, 23- and 24-year-olds receive some financial assistance from their parents for living expenses (Bui, 2017). Another recent study reported that 70% of early adults, ages 18–34, received support from their parents in the last year (Merrill Lynch, 2019). One-third (34%) of parents provided financial assistance for their early adult children's rent or mortgage; half of those (17%) paid for these costs in full. All considered, the estimated aggregate amount spent by parents on their early adult children is over $500 billion annually (Merrill Lynch, 2019). This informal system of cash assistance overwhelmingly benefits young people privileged with wealthier social networks and thus deepens racial and socioeconomic inequalities. One analysis found that the percentage of adult children who received a financial transfer of $5,000 or more from their parents doubles for each quartile of the wealth distribution to which their parents belong (Lee et al., 2018). Put another way, adult children's probability of large transfer receipt is eight times greater if their parents belong to the wealthiest quartile, compared to those whose parents belong to the poorest quartile. Similarly, adult children with non-Hispanic White parents are much more likely to receive substantial financial assistance than those with Black or Hispanic parents due to legacies of systemic racism in housing, employment, and asset accumulation.

Cash transfers designed for racial justice and social inclusion can provide an empowering solution to BIPOC and LGBTQ youth that enables them to make decisions and pursue solutions in alignment with their own goals and needs. This can be particularly powerful in the context of traditional systems and services that often feel discriminatory, insensitive, and paternalistic to BIPOC and LGBTQ youth (Samuels et al., 2018). Because cash transfers allow youth to create their own solutions, they can also avoid some of the structural racism, biases, and cultural insensitivities that can emerge in more rigid shelter and program models (e.g., accommodations that feel unsafe or unwelcoming to people with specific racial/ethnic identities, sexual orientations, or gender identities).

New York City Context
This work addresses an urgent and complex challenge in NYC. On a single night in 2018, more than 4,500 unaccompanied and parenting youth were counted as experiencing homelessness in NYC. Compared to other cities across the nation, NYC has the largest homeless population and the third-highest number of unaccompanied youth. These numbers do not include the young people experiencing homelessness in more hidden ways that make them harder to count or who experience homelessness at different times during the year. Still, they represent thousands of
young people every day who experience trauma and lack the stability and support they need to thrive during a key developmental period. Additionally, data consistently show that Black, Indigenous, and People of Color (BIPOC) youth; lesbian, gay, bisexual, transgender, and queer (LGBTQ) youth; and pregnant and parenting youth face homelessness at disproportionately high rates in NYC and across the country (Morton et al., 2019).

In response to this challenge, NYC Government recently commissioned Chapin Hall to conduct its first youth homelessness system assessment (Morton et al., 2019). Findings from the assessment revealed that youth homelessness is gaining attention from City government. This includes additional resources to address the issue—especially for drop-in centers, crisis services and shelters, and transitional and supportive housing programs. Further, the City has broadly increased its investments to address homelessness overall in recent years, ranging from outreach, to eviction prevention, to supportive housing units and low-income housing assistance. Some of these investments have benefited youth.

Yet the assessment also underscored critical opportunities to strengthen the system. In particular, there is a significant system gap in terms of flexible, low-cost interventions that could effectively support newly homeless or lower-acuity youth in sustainably exiting homelessness and getting on a path to thriving. The City has made substantial investments in permanent supportive housing and transitional independent living and support programs, but these are relatively costly interventions that are not appropriate or necessary for all youth.

Given this context, cash transfers have the potential to provide a relatively flexible, quickly deployable, and low-cost intervention for youth experiencing homelessness to quickly achieve housing stability and get on a path to thriving in other areas of life that are key for long-term stability and success (e.g., education, employment, physical health, and psychological well-being). If found to be effective, cash transfers could add a critical intervention to NYC’s inventory of program options for addressing youth homelessness. Whereas we conducted this research with a focus on NYC, our findings may be relevant for considering the development of DCTPs for youth experiencing homelessness in other U.S. cities and communities as well.
METHOD: RAPID LITERATURE REVIEW

The rapid literature review focused on the evidence and lessons from previous studies investigating the effectiveness of cash transfers for various outcomes and populations. In particular, we highlight the programs and experiments that have aimed to improve outcomes for young people and vulnerable families, as well as those that have sought to prevent or address homelessness. We also review relevant lessons from the resources that have been created to help inform the design of DCTPs broadly.

The research questions include:

1. What do we know about the applications and effectiveness of DCTPs at the international level? What do we know specifically about the applications and effectiveness of DCTPs for young people, for vulnerable families, and for addressing homelessness?
2. What types of DCTPs have been evaluated in the United States, and what has been learned about their effectiveness and design considerations?
3. What lessons emerge from the literature that can inform the design parameters of a DCTP for youth—for example with respect to eligibility, payments, duration, or supportive programming? Relatedly, what structured guidance exists (e.g., handbooks and toolkits) for designing DCTPs that could inform these types of design decisions?

We adopted a rapid review approach so we could address the questions promptly and efficiently. Rapid reviews streamline and accelerate elements of the traditional systematic review process to occur within a shorter timeframe (Tricco et al., 2017). Because the majority of cash transfer experiments have occurred in low- and middle-income countries, and because we are planning on designing an experiment to take place in NYC, we devised separate search and synthesis strategies for literature focusing on international and U.S. studies. The rapid review included the following stages:

1. Searching pre-determined electronic databases using pre-determined search terms
2. Screening the abstracts we found based on pre-determined inclusion criteria
3. Reviewing included articles and extracting relevant information
4. Synthesizing findings

Given the vast international evidence base on DCTPs, for international evidence, we searched for systematic reviews, evidence reviews, and meta-analyses of DCTP experiments, rather than primary studies, published within the last ten years (2010–19) from around the globe. Because the number of DCTP studies in the U.S. has been quite limited, we searched the U.S. literature for primary studies (DCTP experiments and quasi-experiments) published during the same time period.

We did not rely solely on the term “cash transfer” in our searches, but also included several other terms that might be used to describe a direct transfer payment of money to an eligible
person, such as “stipend,” “financial assistance,” and “direct payment.” We screened out studies of voucher programs, research incentives, and reimbursements, and included all remaining articles that focused on DCTPs. Appendix A illustrates the flow of information through the stages of the review and summarizes the search terms and exclusion criteria that we used.

After screening abstracts, we downloaded and reviewed all 48 international reviews and 26 U.S. articles that met our criteria. We then used matrices to extract key information and lessons from the included studies, coding any literature focusing specifically on youth, homelessness, and vulnerable families. In some instances, we also reviewed and included additional literature, such as technical reports or other relevant studies, which had been cited by the originally included articles or had been recommended for inclusion by other researchers and technical experts.
Based on our search strategy, we screened 141 abstracts of potentially relevant evidence reviews for the international review, and 1,235 abstracts of potentially relevant primary studies for the U.S. review. As illustrated in the flow diagrams in Appendix A, articles were excluded at this stage if the review of the full article revealed that they did not in fact meet the inclusion criteria. In total, we included 48 international reviews and 26 U.S. articles. In this section, we synthesize and describe findings from the international evidence on DCTPs’ effectiveness, followed by the U.S. evidence, and finally from both sets of literature with respect to DCTP design considerations.

**International Evidence on Effectiveness of DCTP**

In this section, we include a summary of international evidence from systematic reviews and other evidence reviews published from 2010-2019. The evidence comes from studies on the effects of DCTPs for people living in poverty and other vulnerable populations. Some of the evidence reviews were broad in scope (for instance, synthesizing evidence on conditional and unconditional cash transfers across a range of outcomes) while others focused on specific subtopics (such as the effects of DCTPs on education or health outcomes). Because the international literature on cash transfers is so extensive, we focused only on synthesizing lessons from existing evidence reviews. Below we describe five key findings that emerged thematically from the synthesis.

**Finding 1. Cash transfers are one of the world’s most widely evaluated interventions for addressing poverty and a range of other well-being outcomes.** For instance, an international evidence review identified and synthesized 165 impact studies conducted from 2000 to 2015 of 56 cash transfer programs from 30 low- and middle-income countries (Hagen-Zanker et al., 2016). The majority of evidence came from evaluations of DCTPs in Latin America and, to a lesser extent, sub-Saharan Africa. Evaluations included rural and urban samples, typically involving programs targeting households living in poverty. Especially in the case of conditional cash transfers, programs tended to include households with children. The same review found that two-thirds of (nine) studies evaluating impacts of cash transfers on poverty measures found significant effects on decreasing poverty. Further, 12 out of 20 studies showed that cash transfers improved children and youth school attendance. Studies also generally showed positive effects on use of health services and nutrition and on savings.

Another systematic review (Doocy & Tappis, 2017) concluded that cash transfers are generally more cost-effective than using in-kind food transfers because food distribution has substantially higher administrative costs per dollar, and has a lower economic multiplier effect compared to vouchers and unconditional cash transfers. A third review found that cash transfers can successfully reduce inequality and depths of poverty if scaled at the national level (UK Department for International Development, 2011).
The discussions contained within these international evidence reviews highlight numerous areas in which we still need better evidence on DCTPs. For example, better evidence will help us understand the long-term effects on specific outcomes for specific populations and to inform targeting, design, and delivery choices for optimal results. Yet, the evidence base demonstrating the positive effects of cash transfers over such a wide range of contexts has led governments, the World Bank, and other international development outfits to invest billions of dollars into DCTPs. Moreover, the robust evidence base has positioned DCTPs not just as an important intervention, but as a transformative disruptor to the international aid and development sector as a whole. For instance, in many respects, cash transfers have evolved to become viewed as one of the few relatively low-risk scalable solutions in international development (Shapiro, 2014). They are also seen increasingly as the performance and preference benchmark against which evaluations are expected to demonstrate the comparative advantage of alternative interventions, considering the demonstrated effectiveness, cost-efficiency, and beneficiary satisfaction of DCTPs (Shapiro, 2014).

**Finding 2. The international literature documents multiplier effects of DCTPs that reveal benefits of cash transfers extending beyond the direct recipients.** Multiplier effects can include positive indirect effects of DCTPs on participants’ family members, friends, neighbors, and broader community or society. These spillover effects “multiply” the value of DCTPs because of their broader social impact. This is an inherent advantage of cash transfers as a fungible intervention that individuals and households can spend and invest in a myriad of ways to have broad positive effects on themselves and the communities in which they live. For example, recipients can invest cash transfers in their or their children’s health, education, skills, or economic productivity. They can use funds to help pay for housing, utilities, or vehicles to the benefit of others in their household. They can share portions of their transfers with low-income and vulnerable family and friends in their networks. At a large enough scale, they can spend cash on local goods and services in ways that stimulate local and national economies.

Cash transfers to rural households in Mexico, for example, have demonstrated multiplier effects in the form of recipients using cash received to generate further income through economic activity (Sadoulet et al., 2001), as well as spillover effects in the form of program participants sharing some of their transfers to give gifts and loans to impoverished family and neighbors who were not program participants (Angelucci & De Giorgi, 2009). A meta-analysis of studies of DCTPs for humanitarian assistance across a range of country contexts estimated that DCTPs generated more than $2 of indirect market benefits for each $1 provided to beneficiaries, which was greater than the $1.5 of indirect market benefits yielded by food voucher programs (Doocy & Tappis, 2017). A large body of research shows that cash transfers have positive effects not only on individuals receiving them, but also on their entire households, ranging from household poverty reduction and food consumption to child well-being (Hagen-Zanker et al., 2016). Research also suggests that cash transfers can have community and societal impacts by providing “vulnerable and stigmatized groups with the means to become participants in their communities through, for example, being able to engage in relations of reciprocity” (Molyneux et al., 2016, p. 1091). They offer examples of cash transfers making it more possible for recipients
to participate in traditional and family ceremonies (such as marriages, birthdays, holidays, or funerals) by enabling purchases of gifts or clothing.

**Finding 3.** Despite common perceptions people living in poverty would use cash transfers irresponsibly, or that cash assistance would foster dependency or labor force inactivity, a large evidence base suggests otherwise. Evans and Popova (2017) reviewed 19 studies with evidence on the impact of cash transfers on “temptation goods” such as alcohol or tobacco. They found that, overall, cash transfers did not have a significant impact on these expenditures. These findings were confirmed by another review, which found that studies measuring the consumption of temptation goods indicated either no increase or an increase proportional to spending on other items (Danvers, 2010). A randomized trial of a government DCTP for youth in South Africa similarly found no effect, positive or negative, on alcohol or illicit drug use, but did demonstrate a reduction of youths’ engagement in selling illicit drugs associated with receiving cash transfers—likely due to offsetting the financial motivators behind selling drugs (Heinrich et al., 2017). In a scholarly paper titled, “Debunking the Stereotype of the Lazy Welfare Recipient,” Banerjee et al. (2017) reported results from re-analysis of data from seven randomized trials of government-run DCTPs in six developing countries. They found no systematic evidence that DCTPs discourage work.

**Finding 4.** Evidence of risks to cash transfer recipients can inform targeted program improvements, rather than avoiding cash transfers altogether. For example, while the positive effects of cash transfers for women living in poverty have been well validated in the international evidence base, studies have also shown that some women receiving cash transfers faced short-term increases in exposure to intimate partner violence as their new financial empowerment threatened patriarchal power dynamics in the household (Buller et al., 2018; Hidrobo & Fernald, 2013). Rather than taking this as cause to deny investments in women’s economic empowerment, program developers and funders have taken knowledge of such risks to inform program adjustments to minimize risks (for example, incorporating women’s empowerment groups and programming, additional education and involvement of men in target communities, and providing information and resources to women on how and where to seek help if needed [Yoshikawa, 2015]). Such examples could inform evaluation and continuous improvement of DCTP models for youth experiencing homelessness to uncover any possible risks or harmful experiences for some and make targeted program improvements to respond in ways that still preserve the underlying benefits of the intervention for the target population.

**Finding 5.** A growing number of international evaluations demonstrates positive effects of DCTPs among youth. Unconditional cash transfers to youth in Uganda yielded positive effects on economic outcomes, such as employment, investment in vocational skills, and earnings (Blattman, Fiala, & Martinez, 2011; 2013). Unconditional cash transfers to youth in Kenya improved mental health (Kilburn et al., 2016); among young women, cash transfers increased education and financial stability and delayed age of first sex, contributing to a reduction in early pregnancy (Handa et al., 2015). A large CCT for rural families in Mexico demonstrated positive effects on youth school attainment and, when receiving cash transfers over a long duration, also
long-term earnings (Behrman et al., 2012; Rodríguez-Oreggia & Freije, 2012). However, long-term youth employment and earnings effects in Mexico were tempered by limited economic opportunities and returns to education in rural communities. These results underscore the importance of both demand-side and supply-side policies to improve outcomes like youth employment and earnings.

Pettifor and colleagues (2012) conducted a systematic review of 16 studies, mostly from developing contexts, which also found evidence that DCTPs reduce sexual risk behaviors and the prevalence of HIV among young people. Such evidence has led researchers to call for social protection policies, such as DCTPs, to come alongside of biomedical interventions to address structural deprivations underlying young people’s risk for HIV infection (Cluver et al., 2015). We identified no international evidence reviews specifically addressing the role of DCTPs in addressing homelessness or outcomes among youth experiencing homelessness.

United States Evidence on the Effectiveness of DCTPs

Because the U.S. evaluation literature on DCTPs is much smaller than the international evidence and the details of these studies are especially relevant because they share the same country context as our DCTP study, we reviewed primary studies evaluating DCTPs in the U.S. from 2010–2019. As such, in this section, we draw on more granular insights from individual studies than we did in the international synthesis above.

**Finding 1. The evidence base on DCTPs in the U.S. is considerably smaller and less advanced than the international evidence base.** We found no systematic reviews of the evidence of DCTPs in the U.S., and our review identified only a handful of rigorous studies. These involved primarily a group of evaluations of CCTs for low-income families in NYC and Memphis (Verma et al., 2017; Miller et al., 2015; Miller et al., 2016), negative income tax experiments from Seattle and Denver from the 1970s (Marinescu, 2018), a small DCTP piloted with youth in California (Minnis et al., 2014), a natural experiment of the Earned Income Tax Credit (EITC) (Hamad & Rehkopf, 2016; Rehkolpf et al., 2014), eviction prevention financial assistance in Chicago (Evans et al., 2016), a financial assistance fund for college students (Evans et al., 2019), and dividend payouts to citizens from an oil fund in Alaska (Jones & Marinescu, 2018) and a casino fund in North Carolina (Costello et al., 2010). We found no rigorous evaluations of an unconditional cash transfer program providing regularized disbursements over time in the U.S., and we found no evaluations of DCTPs of any kind for addressing youth homelessness.

**Finding 2. Most U.S. programs studied offered relatively modest cash amounts, typically ranging from $200 to $1,500 within a year.** With annual dividend payments of approximately $9,000 per child, the Eastern Band of Cherokees casino dividend in North Carolina was an outlier (Costello et al., 2010). The one youth-specific cash transfer program, Yo Puedo, disbursed up to $200 total per participant (Minnis et al., 2014). To put these amounts into perspective, the 2019 federal poverty guidelines set the poverty line for an individual at an annual income of $12,490 and for a family of four at $25,750 (ASPE, 2020). Taking a more multifaceted perspective than does the U.S. poverty line, the Economic Policy Institute estimated the 2015 cost of living for a
family of four, depending on where in the U.S. they live, to range from $49,000 to $106,000 (Gould et al., 2015).

In other words, the studies evaluated to-date in the U.S. were generally not designed to offer a basic income or substantive safety net in the context of Americans’ cost of living to meet basic needs. Rather, they were designed to provide immediate emergency assistance, very limited relief, or, in the case of CCTs, monetary incentives for specific behaviors. Any interpretation of the evidence base on DCTPs in the U.S. to-date needs to take this into account. Experiments offering higher transfer amounts over longer time periods are underway, such as the Stockton Economic Empowerment Demonstration (SEED), a trial of a partial basic income of $500 per month over 18 months, and the Baby’s First Years study, a multisite trial offering $333 per month over 4 years to low-income mothers with babies. These could eventually contribute to a much different understanding of how cash transfers work in U.S. contexts as results emerge.

**Finding 3. Evidence on the effectiveness of this limited set of interventions suggests some promise of DCTPs but also mixed results and significant evidence gaps.** U.S. cash transfer programs have had immediate short-term effects on reducing poverty and material hardship, preventing homelessness, and boosting some aspects of social-emotional well-being. A review of evaluations of various income support programs in the U.S. that effectively involved unconditional cash transfers, ranging from a negative income tax experiment to casino dividend programs, found promising results. Reviewed studies generally found no statistically significant effect on the probability of working while demonstrating improvements in health and educational outcomes, and decreased criminality and drug and alcohol use, especially among disadvantaged youth (Marinescu, 2018).

**Finding 4. Income transfers in the U.S. have shown positive poverty and food security effects; these varied by subpopulation and were not always sustained.** Two randomized trials of conditional cash transfers (CCTs), the NYC Opportunity Family Rewards and Family Rewards 2.0 programs, demonstrated reductions in poverty rates, and these were especially concentrated among families experiencing severe poverty (less than 50% of federal poverty level) at baseline. After these programs ended, however, there were no sustained differences in monthly income and poverty rates between treatment and control groups (Miller et al., 2015; Miller et al., 2016). Analysis of the Earned Income Tax Credit (EITC) suggests a reduction in poverty rates from 57% to 49% among recipients, with larger effects (an 11.2 percentage point reduction of those living in poverty) among single parent households (Simpson et al., 2010). However, the same study also found negligible effects on childless single adults, the poorest households in the sample who also receive substantially less money through the EITC than households with children. Studies of the Family Rewards programs and EITC demonstrated positive impacts on food security (Riccio et al., 2010; Rehkopf et al., 2014; Miller et al., 2016).

**Finding 5. Studies show some positive effects on healthcare utilization and health outcomes.** Both Family Rewards trials demonstrated modest impacts on some of the health outcomes incentivized by the rewards program, including increasing dental visits and self-rated
health status. The program, which included financial rewards for children’s dental checkups, increased the occurrence of children’s second dental checkups by 16 percentage points. The program also increased self-rated health on average by 0.3 points on a 5-point scale for those with fair or poor health at random assignment (Miller et al., 2016). The original Family Rewards study also increased health insurance coverage and decreased reliance on hospital emergency departments, although these impacts were not replicated by Family Rewards 2.0 (Miller, 2016; Courtin et al, 2018). Econometric analyses suggest that EITC income is associated with improved perinatal health outcomes, such as birthweight and likelihood of breastfeeding, as well as better maternal health (Hamad & Rehkopf, 2016 Evans & Garthwaite, 2014). Further, Hamad and Rehkopf (2016) hypothesize that, whereas EITC pays single lump-sum amounts, a smoother distribution of payments over time might contribute more to certain kinds of health outcomes, such as improving maternal nutrition over the course of her pregnancy.

Finding 6. Employment effects of DCTPs were limited or mixed, and DCTPs do not appear to encourage people to stop working. Employment outcomes in randomized trials of CCTs in NYC (Work Rewards and Family Rewards) were measured using both self-reported survey data and state unemployment insurance data (Yang & Hendra, 2018; Miller et al., 2016). While the survey analyses revealed positive employment effects, the administrative data did not. Yang and Hendra suggest that the reasons for these differences include both limitations of the administrative data, as well as survey nonresponse bias. They conclude that, although there was no impact on earnings in jobs covered by unemployment insurance, the program may have increased families’ informal employment and earnings. Further, Courtin et al. (2018) note that the employment-related conditions of the Family Rewards program may have been unrealistic and unfairly penalizing for families to meet during the Great Recession of 2007–09, when the study took place (Courtin et al., 2018, p. 445).

These experiments did find some effects on employment and earnings for certain subgroups. The Work Rewards program did not have employment or earnings effects on program participants overall. However, there were significant increases in employment and earnings that lasted for 5 years for a specific subgroup of participants: those out of work at baseline and who received both case management and 2 years of cash transfers conditioned on their employment (Verma et al., 2017). This suggests that the duration of cash assistance, and the complementarity of other supports, could have important impacts on employment-related outcomes. As seen in the international literature, contrary to common concerns of cash transfers discouraging work, studies of unconditional cash assistance in the form of negative income tax (NIT) experiments in the U.S. indicate no or only small effects on decreasing labor supply while yielding significant positive social impacts, especially on the most disadvantaged youth (Marinescu, 2018).

Finding 7. A small number of studies found promising effects of U.S. DCTPs on youth behavioral health outcomes—potentially related to how cash transfers affect how and with whom youth spend their time. For example, the Family Rewards Program evaluation demonstrated a 10 percentage point reduction in the rate of recipient families’ adolescents reporting any aggressive behavior and a 15 percentage point reduction in rates of any
substance use. Having also documented changes in adolescents’ time use and social networks, Morris, Aber, Wolf and Berg (2017) argue that the reduction in substance use among friends is tied to changes in the adolescents’ social groups, while their own reduction in substance use was related to changes in their time use. The Great Smoky Mountains Study, a natural experiment that studied impacts of the Eastern Band of Cherokees casino dividend program in western North Carolina, documented similar results. Since 1996, tribal members have received a substantial payment ($9,000 in 2006) from casino profits every 6 months (children’s payments go into a savings account that they can access once they turn 18). American Indian youth reported a reduction in substance use, which was mediated by reduced association with delinquent friends in early adulthood (Costello et al., 2010).

The Yo Puedo program provided small cash transfers (totaling no more than $200 over 6 months) to youth, ages 16 to 21, in San Francisco, conditioned on completing certain activities intended to promote reproductive health. This study found reductions in alcohol use and lower odds of hanging out on the street frequently, having close friends who had been incarcerated, and having sex (Minnis et al., 2014). Participants primarily reported spending earnings on food or saving it, with only two participants reporting purchasing alcohol or drugs with the funds (Minnis et al., 2013).

Finding 8. A small evidence base reveals promising results of direct cash transfers for preventing homelessness; we did not find any completed U.S. studies of DCTPs designed for people experiencing homelessness. A study of Chicago’s Homelessness Prevention Call Center found that families who call for temporary assistance when funds are available are 76% less likely to enter a homeless shelter than those who call when funds are not available. Evans, Sullivan, and Wallskog (2016) estimate the per-person cost of averting homelessness through this system to be $10,300, and suggest this could be reduced by better targeting the funds to those more in need. They also estimate the benefits of this assistance to exceed $20,000 per person. The Family Rewards CCT program reduced participants’ relative likelihood of not paying their full rent in the previous year (Riccio & Miller, 2016). Cash transfer recipients tend to spend significant portions of their financial assistance on housing. Youth recipients of the Foster Care Maintenance Payment stipend (U.S. G.A.O., 2019), as well as recipients of emergency assistance through the Marathon County Community Fund (Maguire-Jack & Bowers, 2014) and the Stay the Course Fund (Evans et al., 2019), reported spending much of the money they received on rent and utilities.

As the authors were in the process of finalizing this report, initial results were published from a pilot randomized controlled trial of a DCTP for people experiencing homelessness in the Vancouver, Canada area (Foundations for Social Change, 2020). Participants’ ages ranged from 19 to 64, with an average age of 42. Participants had been homeless for an average of 6 months at baseline. This DCTP provided 7,500 Canadian dollars (about US$5,700) in one-time cash transfers to 50 people experiencing recent homelessness. The transfer amount was benchmarked against British Columbia’s annual income assistance rate. Half of the 50 received cash plus 6 months of life skills coaching; the other half received only cash. Another 65 study
participants were randomly assigned to two non-cash transfer groups (one of which received coaching and the other of which did not). All cash transfer recipients, with or without coaching, participated in a series of workshops involving the development of a personal plan and self-affirmation exercises.

By 12 months follow-up, both cash transfer and control groups’ rates of homelessness had been reduced by similar levels, but the cash group had faster drops in homelessness (especially in the first month) and, overall, were homeless fewer days during the 12-month period. Over the 12-month period, the cash group spent 4,396 fewer nights homeless than the control group. The authors estimated that this resulted in cost savings from reduced shelter use that exceeded the cost of the program. Counter to some stereotypes about how people experiencing homelessness would spend money, the cash transfer group also reported spending less money on alcohol, drugs, and cigarettes than the control group over the 12-month period, and the cash transfer group also maintained higher rates of food security over the 12 months, with the largest differences in the first 3 months.

DCTP Design Considerations
The international and domestic literature raises a number of considerations for designing DCTPs. We coded these lessons from the literature based on predetermined categories of DCTP design parameters for which we sought insights from the literature. In most cases, such considerations are based on practice-based experience or authors’ interpretations and reflections on the findings of studies rather than experimentally testing different design or delivery approaches. As such, these considerations should be treated prudently—generally as informed hypotheses warranting better testing rather than as proven principles.

Eligibility & Recruitment
Finding 1. As might be expected of an income support intervention, DCTPs appear to have the largest effects on the lowest-income populations. Program evaluations of Chicago’s Homelessness Prevention Call Center and NYC Family Rewards CCT programs found greater impacts on the poorest members of the evaluation samples (Evans et al., 2016; Shinn et al., 2013; Miller et al., 2016). This is consistent with findings from an analysis of government financial child benefits across 26 European countries finding the largest effects with the lowest-income households (Van Lancker & Van Mechelen, 2015).

Finding 2. With respect to recruitment, some of the literature underscored the importance of leveraging social networks to identify and recruit people into DCTPs. Internationally, cash transfers are commonly targeted and administered through small peer support groups of poor women or young people. A U.S. evaluation of a small conditional DCTP for youth, Yo Puedo, found it helpful to recruit and randomly assign pairs of friends in order to leverage the mutually reinforcing nature of those relationships (Minnis et al., 2014). These social network strategies have two apparent advantages. First, they may make it easier to recruit and retain participants through social networks. Second, they may have a programmatic advantage of
leveraging the power of social capital, along with financial capital, to foster better outcomes and combat social isolation.

**Payments**

**Finding 3.** The literature generally finds that larger amounts tend to produce better outcomes, but the evidence is insufficient to know exactly what levels of financial assistance are too small to achieve benefit or too large to avoid diminishing returns for different objectives. Analysis of government financial child benefits across 26 European countries demonstrated that larger benefit levels targeted to low-income households had greater impacts on reducing child poverty (Van Lancker & Van Mechelen, 2015). Econometric research shows that increases in the EITC benefit level led to greater impacts on maternal and child health and well-being (Averett & Wang, 2018). When it comes to using DCTPs—in the form of CCTs—to incentivize specific behaviors, however, some experimental research suggests that larger incentive amounts may not increase effects on targeted behaviors—like children’s school attendance—more than modestly (Filmer & Schady, 2011). This contrast suggests that the notion of diminishing returns to cash amounts might be more pertinent for programs using cash primarily to incentivize specific behaviors (CCTs) than for programs using cash primarily to provide a social safety net and address material hardship (UCTs). Moreover, in a paper titled, “We Are All Poor Here,” Ellis (2012) cautioned that DCTPs targeting the extreme poor with very high benefit levels could result in some members of a poor community “leapfrogging” others in the income distribution. This could sow social division, rather than cohesion, and compromise political support. Some literature considered tailoring amounts for different levels of individual need, but they also cautioned that tailoring requires more administrative processes and costs. Ultimately, the factors that need to be taken into account for determining a cash transfer amount depend largely on the selected program objectives.

**Finding 4.** The literature generally supported higher, regularized frequencies of cash payments to provide an effective social safety net, but this depends on program objectives. For example, researchers argue for shifting the current year-end lump-sum payment approach of the Earned Income Tax Credit (EITC) to smaller, periodic payments. Smaller payments align best with how most low-income households use cash assistance: to support immediate basic needs and consumption (Holt, 2009). Evidence from a rigorous evaluation in Mexico suggests that cash transfers at higher frequency have larger effects on smoothing food consumption and reducing the incidence of hunger spells than do cash transfers of similar overall value but disbursed less frequently (Aguila et al., 2017). For these and other reasons grounded in emerging insights from behavioral economics and psychology, high-frequency payments, rather than lump-sum payments, are also the predominant method used to disburse direct cash assistance to low-income people in several other countries (Holt, 2009).

Single lump-sum payments, however, were generally considered appropriate for situations in which households faced a significant and nonrecurring economic crisis and could be stabilized with a single cash injection. Examples included potential eviction or natural disasters. More frequent payments are typically made to vulnerable households to support basic needs, provide a safety net against recurring or ongoing crises, or reward behaviors. International research,
however, finds that ensuring regularity and predictability of cash flow from DCTPs is key to their effectiveness for improving livelihoods (Tiwari et al., 2016). Additionally, the recent Canadian study of a DCTP for people experiencing recent homelessness provided a one-time lump sum transfer of about US$5,700 with the expectation that individuals could face high upfront costs to exiting homelessness. However, some key outcomes (e.g., homelessness rates and food insecurity rates) came closer to convergence between intervention and control groups by the end of the 12-month follow up period, perhaps suggesting that a hybrid model of a higher upfront transfer followed by smaller, regularized payments over time could provide an optimal balance.

**Finding 5. A small evidence base from developing countries suggests that the choice of a cash transfer payment mechanism can affect outcomes.** A randomized trial of an anti-poverty cash transfer program in Niger, for instance, demonstrated significantly larger effects on household diet diversity, child food consumption, and female empowerment when participants were paid through mobile money as compared to manual cash payments (Aker et al., 2016). The authors attributed these results partly to time savings associated with mobile transfers, as program participants spent less time traveling and waiting for disbursements. Women’s empowerment was buoyed by the ability to target payments more specifically at the individual level when disbursing through mobile money than through manual cash payments.

**Conditions & Supports**

**Finding 6. The literature generally supports the use of an unconditional cash transfer approach to empower people living in poverty and address poverty and basic needs.** The value-added and ethics of conditions in DCTPs have been vigorously debated in the international literature (Freeland, 2007). In some cases, behavioral conditions (for example, participating in job training or case management meetings, or children’s school attendance or health check-ups) are attached to cash transfer disbursements. These DCTPs are called conditional cash transfer (CCT) programs, rather than unconditional cash transfer (UCT) programs. Some expect that these conditions establish financial incentives influencing certain behaviors of interest to the public or private DCTP funder. In addition, sometimes policymakers, funders, or members of the public believe that recipients should “earn” income support by meeting such conditions. Others argue that conditions add cost and complexity to the implementation of DCTPs with little return in terms of markedly improving outcomes. Proponents of UCTs also argue that the logic behind conditions advances paternalistic values and assumptions that are oppressive and demeaning to people living in poverty. Regional philosophical differences have also emerged. Latin America more commonly established CCT programs and Sub-Saharan Africa more commonly implementing UCT programs, for example (Gaarder, 2012). The literature offered mixed evidence with respect to the empirical value-added of CCTs relative to UCTs but, overall, it suggested UCTs in most cases are preferable for addressing poverty, basic needs, and well-being.

While studies often do not tease out the effects of conditions associated with cash payments, CCT programs have demonstrated positive impacts on a range of outcomes—for instance, by
incentivizing behaviors to improve children’s health (for example, immunizations, check-ups, etc.) or education (for example, attendance; García & Saavedra, 2017). Yet, introducing conditions may add unnecessary barriers to program participation, and they significantly increase implementation complexity and costs. Furthermore, cases of both international and U.S. evidence suggested that adding conditions reduces access to needed assistance, especially among the most vulnerable (Doocy & Tappis, 2017; Courtin et al., 2018). Furthermore, a systematic review comparing CCTs to UCTs for educational outcomes in developing countries found that, while both CCTs and UCTs had positive effects on children’s school enrollment and attendance, the effects were larger with CCTs (Baird et al., 2013). However, the review also found significant variation in these effects and observed that the larger effects of CCTs over UCTs on school enrollment existed only with CCTs that were strongly monitored and enforced.

Some evidence also suggests that conditions can inadvertently penalize program participants who most need financial support and thereby diminish the overall effects of the DCTP on poverty and basic needs. For instance, an evaluation suggested that this could have been the case with NYC’s Family Rewards program by penalizing individuals who did not meet challenging work requirements during an economic recession (Courtin et al., 2018). As concluded by Heinrich (2006), “there is general agreement in the development literature that the achievement of the long-term goals of conditional cash transfer programs is predicated on adequate supply-side investments (in schools, health care facilities, etc.).” Similarly, Soss and colleagues (2011) found that, in the case of the Temporary Assistance for Needy Families (TANF) program, the practice of applying payment incentives or sanctions based on conditions can lead to discriminatory and inequitable results. In this case, sanctions applied more frequently to people of color in the program than to white participants. (Soss, Fording, & Schram, 2011).

Some evidence suggests that intended gains from program conditions can be achieved with lower cost and administrative burden through careful messaging instead of conditions. This was the case with one large randomized trial of a DCTP in Morocco for fathers of school-aged children in poor rural communities. The evaluation aimed to study whether payment conditions tied to children’s school attendance (a primary outcome of interest) added value over and above simply labeling and messaging the DCTP as an education support program. Benhassine and colleagues (2015) found that the explicit messaging led to significant improvements in children’s school participation over and above no messaging, and adding conditions made almost no difference over and above the messaging.

**Finding 7.** “Cash plus” models have grown increasingly popular internationally with encouraging results. These models couple direct cash transfers with other interventions to address nonfinancial and structural barriers that poor and vulnerable people face (Roelen et al., 2017). Chile’s national social protection program, Chile Solidario, pairs cash transfers to poor families with psychosocial support (primarily in the form of home visits by social workers trained as family counselors) and facilitated access to a network of multi-sectoral services (Roelen et al., 2017). In Bangladesh, a multiarmed randomized trial tested five intervention options to improve child nutrition: cash, food, cash plus food, food plus nutrition behavioral change communication
(BCC), and cash plus nutrition BCC. The objective was to identify which transfer or combination of transfers would have the biggest positive impact on child nutrition. The study found that only one of the five options—cash plus nutrition BCC—achieved a statistically significant reduction in child malnutrition rates (Ahmed et al., 2019). In fact, the BCC intervention also impacted mothers’ child nutrition practices for neighboring nonparticipant mothers, demonstrating positive spillover effects of the supportive programming component (Hoddinott et al., 2017). This underscores the importance of complementing cash transfers with other theory-driven programming to address some outcomes.

Another “cash plus” approach gaining traction internationally is a model that aims to “graduate” very poor households out of poverty through a progressive engagement of interventions delivered over a 2-year period. Led by BRAC, one of the largest international non-governmental organizations, this package of interventions includes regular cash transfers, access to savings, productive assets, livelihood training, and group-based empowerment and behavior change communication interventions. While involving more upfront cost than a single-component intervention, this approach has been rigorously evaluated with randomized trials in six countries and shown lasting positive impacts on the poor with significant return on investment (Banerjee et al., 2015).

Given that young people can face both financial and nonfinancial barriers to stable housing—for example, lack of information on housing options or requirements, discriminatory housing markets, landlord difficulties, limited social capital or social support, and mental health or substance use difficulties—“cash plus” intervention models may well help achieve optimal results for addressing youth homelessness. However, we need evaluations to test this assumption and to better understand what types of supportive programming and structural policy interventions might work best and for whom to improve youth housing stability and thriving.
METHOD: INTERVIEWS & FOCUS GROUPS

Participants

We recruited two sets of participants for a series of interviews and focus group discussions to gain a range of perspectives on how to design a DCTP for youth experiencing homelessness. One set of participants included youth, ages 18–24, with lived expertise of homelessness in NYC. The other set of participants included other stakeholders with relevant perspectives, such as officials from City Government agencies, service providers, funders, and people with experience with implementing or evaluating DCTPs. We conducted focus groups with the youth participants and a combination of semi-structured interviews and focus groups with the other stakeholder participants.

We designed our youth recruitment strategy to include the voices of a diverse subset of youth with lived expertise of homelessness. We reached out to advocacy partners and service providers to help us recruit four groups of young adults, ages 18 to 24, with the following shared experiences:

1. youth active in NYC’s homelessness advocacy efforts;
2. youth with experience accessing emergency services;
3. youth with experience accessing transitional housing and rapid rehousing services; and
4. pregnant and parenting youth.

We worked with a local youth homelessness advocacy organization to recruit youth leaders involved in city-level advocacy efforts. These young people bring a youth perspective to how DCTP design choices relate to broader conversations about improving policy and the youth homelessness system and services. We worked with service providers to reach other subgroups of young people whose experiences may require unique considerations for designing a DCTP, including youth currently lacking safe and stable housing (youth accessing emergency services), participating in a housing program, and facing homelessness while pregnant or parenting.

In the case of youth active in advocacy efforts, our advocacy partner directly contacted its members to inform them of our study and recruit them. For the remaining three subsets of youth, we provided flyers to service providers who advertised our study. We then recruited the youth who contacted us expressing their interest in participating in the study and who met the age descriptor criteria. All youth focus group participants received $80 stipends for their time.

The recruitment strategy resulted in a highly diverse sample of youth that also reflects the overrepresentations observed in youth homelessness generally with respect to race, ethnicity, sexual orientation, gender identity, level of education, and parenting status. Table 1 provides a summary of the youth sample’s characteristics.
Table 1. Youth Focus Groups Characteristics ($n = 26$)*

<table>
<thead>
<tr>
<th>Characteristics</th>
<th>Frequency (range)</th>
<th>Percentage (mean)</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Age</strong></td>
<td>(18–25)</td>
<td>(20)</td>
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<tr>
<td><strong>Race/ethnicity</strong></td>
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<td></td>
</tr>
<tr>
<td>Asian</td>
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<td>4</td>
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<tr>
<td>Black (including biracial/multiracial)</td>
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<td>58</td>
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<tr>
<td>Hispanic</td>
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<td>15</td>
</tr>
<tr>
<td>White/Caucasian</td>
<td>2</td>
<td>8</td>
</tr>
<tr>
<td>Other</td>
<td>4</td>
<td>15</td>
</tr>
<tr>
<td><strong>Gender identity</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Female</td>
<td>12</td>
<td>46</td>
</tr>
<tr>
<td>Male</td>
<td>7</td>
<td>27</td>
</tr>
<tr>
<td>Fluid/nonbinary/nonconforming</td>
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<td>19</td>
</tr>
<tr>
<td>Transgender</td>
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<td>8</td>
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<tr>
<td><strong>Sexual orientation</strong></td>
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<td></td>
</tr>
<tr>
<td>Gay/lesbian/bisexual/pansexual/queer</td>
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<td>65</td>
</tr>
<tr>
<td>Straight</td>
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<td>35</td>
</tr>
<tr>
<td><strong>Education, employment, &amp; housing</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Has a GED or diploma</td>
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<td>35</td>
</tr>
<tr>
<td>Currently attending school</td>
<td>6</td>
<td>23</td>
</tr>
<tr>
<td>Currently employed</td>
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<td>38</td>
</tr>
<tr>
<td>Currently has a stable place to stay</td>
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<td>31</td>
</tr>
<tr>
<td><strong>Benefits currently accessed</strong></td>
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<td></td>
</tr>
<tr>
<td>Food stamps/SNAP/WIC</td>
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<td>40</td>
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<tr>
<td>Medicaid</td>
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<td>16</td>
</tr>
<tr>
<td>None</td>
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<td>48</td>
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<tr>
<td><strong>Income sources (current)</strong></td>
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<td></td>
</tr>
<tr>
<td>Government/welfare</td>
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<td>12</td>
</tr>
<tr>
<td>Job/employment</td>
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<td>27</td>
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<tr>
<td>Nonprofit assistance</td>
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<td>4</td>
</tr>
<tr>
<td>Family/friends</td>
<td>10</td>
<td>38</td>
</tr>
<tr>
<td><strong>Parenting</strong></td>
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<td></td>
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<tr>
<td>Pregnant/parenting</td>
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<td>46</td>
</tr>
<tr>
<td>Has custody of a child</td>
<td>10</td>
<td>38</td>
</tr>
</tbody>
</table>

*These youth come from across four focus groups.

For interviews and focus groups with other stakeholders (not youth), we designed our recruitment strategy to include the voices of a diverse subset of experts working on homelessness or other DCTPs in NYC and nationally. We recruited participants from the following areas:
1. city government agencies,
2. local and national homelessness organizations,
3. local and national funders, and
4. cash transfers research and evaluation experts.

We undertook a two-stage purposive recruitment strategy. The first stage consisted of putting together a list of potential stakeholders and sharing the list with youth homelessness partners to expand and finalize it. The second stage consisted of reaching out to the stakeholders via email and requesting their participation in our study. These participants did not receive any direct benefits or incentives for participating. Table 2 summarizes the distribution of stakeholders by subgroups they represented.

**Table 2. Types of Other Stakeholder Participants**

<table>
<thead>
<tr>
<th>Stakeholder Type</th>
<th>Frequency</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>NYC government agencies</td>
<td>8</td>
<td>35</td>
</tr>
<tr>
<td>National organizations working on youth homelessness</td>
<td>2</td>
<td>9</td>
</tr>
<tr>
<td>Local organizations working on youth homelessness</td>
<td>4</td>
<td>17</td>
</tr>
<tr>
<td>National funders investing in youth homelessness solutions and/or DCTPs</td>
<td>2</td>
<td>9</td>
</tr>
<tr>
<td>Local funders investing in youth homelessness solutions and/or DCTPs</td>
<td>2</td>
<td>9</td>
</tr>
<tr>
<td>Experts in DCTPs (for example, researchers)</td>
<td>5</td>
<td>22</td>
</tr>
</tbody>
</table>

**Data Collection**

The youth focus group discussions were set up as half-day interactive workshops with semi-structured protocols that involved a mix of response to discussion questions and engaging in participatory activities related to informing key program design considerations. These involved an initial, interactive 60- to 75-minute focus group discussion to address approximately the first half of the design questions, followed by a lunch break. After lunch, there was a second interactive 60- to 75-minute focus group discussion with the same participants to address the remaining half of the design components. Two researchers facilitated each youth focus group, one of whom was a young adult researcher with lived experience of homelessness in NYC.

Discussions focused on obtaining insights about the following research questions:

1. What do young people view as the objectives, benefits, and drawbacks of a DCTP for addressing youth homelessness?
2. What recommendations or considerations do young people offer for determining program eligibility and recruitment?
3. What recommendations or considerations do young people offer for determining payment amount, frequency, duration, and mechanisms?
4. What are young people’s views on potential DCTP conditions or complementary supports?

For data collection with other stakeholders, we conducted all of the semi-structured interviews and focus group discussions via an online platform (GoToMeeting). They ranged in length from 40 to 60 minutes. The interviews and focus group discussions were recorded with permission from participants, and audio files were transcribed by a professional service. We devised a series of interview and focus group guides, each slightly adapted to the perspectives and expertise of the particular participants (for example, from NYC City Agencies, we sought perspectives on how a DCTP could be designed to complement local services and policies; from national and international experts on DCTPs, we sought more specific insights on lessons learned from implementing and evaluating other DCTPs for different populations). Although we focused more on some questions than others, depending on the perspective or expertise of the given research participant, our overall questions guiding these interviews and focus groups included the following:

1. How do participants view a potential DCTP and study objectives for this population?
2. How does a DCTP fit in the context of the broader continuum of programs, services, and public benefits available to youth experiencing homelessness?
3. What are the risks or potential mitigation measures for young people in accessing both cash transfers and other public benefits?
4. What factors do participants think should be considered for determining eligibility criteria for the program?
5. What recommendations or considerations do participants offer for determining payment amount, frequency, duration, and mechanisms?
6. What are participants’ views on potential DCTP conditions or complementary supports?
7. What factors should be considered in the rollout of a DCTP in NYC?

The researchers collected informed consent from all participants before focus groups or interviews began.

**Analysis**

The coding strategy for qualitative data from all focus groups and interviews followed a two-level coding technique informed by Maxwell (2013). The coding and analysis of the transcripts were conducted in Atlas.ti, version 8.

For the youth focus groups data analysis, one researcher conducted the two-level coding technique. The first level of coding consisted of organizational categories that served as a useful manner for ordering the data. These organizational categories largely aligned with the interview
protocol, and included codes such as “conditions” and “eligibility.” The second level of coding consisted of more substantive categories that included descriptions of participants’ opinions and beliefs regarding the first level codes. For example, under the first-level code of “eligibility,” second-level codes included criteria for program participation, disqualifying factors, and the concept of having a universal program. Participants’ opinions and beliefs emerged during the second level of coding. A codebook was developed upon the completion of this process. A second research team member separately conducted their own two-level coding technique. The two research team members then compared each other’s codes and codebooks to check each other’s analysis.

For the analysis of data from the other stakeholders’ interviews and focus groups, two researchers conducted a two-level coding technique. The first level of coding again consisted of organizational categories that served as a useful manner for ordering the data. These organizational categories largely aligned with the interview protocol, and included codes such as “program design.” The second level of coding consisted of more substantive categories that included descriptions of participants’ opinions and beliefs regarding the first-level codes. For example, under the first-level code of “program design,” second-level codes included briefs and opinions on conditions for participation, program goals, program eligibility, and program duration. The researchers coded the data, and together produced the final codes and codebook.
In this section, we report findings, including themes, nuances, and divergent points of view, from interviews and focus groups with both youth and other stakeholders. Our first set of findings focuses on programmatic principles and objectives. We then lay out findings on a series of topics concerning design parameters for a DCTP: eligibility and recruitment, payments, conditions and supports, and risks and mitigation measures.

**Principles & Objectives**

The qualitative findings underscored four main interrelated guiding principles to orient the entire design and delivery of the DCTP: a youth-centered approach, trusting young people, applying an anti-oppression lens, and centering on equity.

**Finding 1. Stakeholders expressed strong beliefs that a DCTP be fully centered on youth, trust, and anti-oppression.** In practice, this means that a DCTP should be designed and implemented to meet youth where they are. Meeting youth where they are requires meeting the needs and aspirations of the youth who are enrolled in the program. A DCTP that is flexible and has few barriers aligns with this guiding principle.

> If there’s somebody with a known substance abuse problem. . . as long as you’re getting some sort of treatment. . . you can show that you’re going to a program. . . that you have a sponsor, you still get the [DCTP] income. – Youth

A DCTP should be designed with the notion that youth can be trusted to help themselves. This stands in contrast to existing programs and services that many youth experience as patronizing. A DCTP should focus on helping youth help themselves with what youth believe they need.

> I think I want to have faith in the [youth who participate]. . . I want to think that if we’re given the chance, that this is a way for us to be able to advance when life tries to take those chances away from us. – Youth

Applying an anti-oppression lens means that a DCTP should be centered on the liberation, agency, and self-actualization of the youth in the program. Any intervention, some stressed, including a DCTP, could be used as an instrument of oppression or anti-oppression. The program should avoid modeling existing systems that compel youth into activities that youth may or may not find beneficial to their circumstances.

> I do not see a lot of value in creating more fine-tuned models for how we could compel poor folks and folks of color to engage in activities that they themselves don’t deem to be the most helpful. I’m not interested in creating better systems of compulsion, better systems of social control. I really want us to be thinking about liberation. – Nonyouth stakeholder
In alignment with an anti-oppression lens, stakeholders also highlighted the need for equity. The design, delivery, and evaluation of a DCTP, they argued, should be focused on effectiveness for, and liberation of, the most marginalized youth populations who face the greatest discrimination. Special attention should be paid to racial/ethnic and LGBTQ equity.

You do have to have some specifics around, what does it mean to administer this in an equitable way? And I think some of that comes down to who it's for. Is it for black and brown and LGBTQ young people? – Nonyouth stakeholder

**Finding 2. Participants commonly elevated safe and stable housing as a primary objective while also noting other outcomes a DCTP could improve.** In NYC, where shelter stays are often lengthy, expensive, and undesirable, many framed this objective in terms of helping young people to efficiently and creatively obtain housing to safely avoid or exit the City’s shelter system. Yet, given that cash transfers offer flexible resources, they also suggested a range of other potential outcomes and objectives related to young people’s agency, basic needs, well-being, and long-term thriving that could be achieved through a DCTP. Research participants additionally noted that these may vary between youth with different situations and aspirations.

Eventually I did [exit the shelter system], but it took a longer process for me to get out. But with this program, I feel like it would help me get out a lot faster. – Youth

I think that the more likely goal is to assist the recipients, again with some combination of their short-term needs and their long-term aspirations. – Nonyouth stakeholder

Notably, while youth viewed a DCTP as having the potential to increase young people’s housing stability and well-being, they stopped short of asserting that the program would independently enable all young people to permanently exit homelessness. When asked, on a scale from 0 to 100 (zero representing “no impact” and 100 representing “exit homelessness”) to consider the potential impact of this program, youth generally placed the program’s potential impact in the 70s. Some youth said they would rate a DCTP’s potential even higher if cash amounts were particularly high or if complementary services were included. They stated that such a program would help them get by, help themselves, and attain a better quality of life. Youth could see themselves using DCTP funds for rent, food, transportation, addressing health needs, paying bills and debt, obtaining training and education, and saving money.

Related to increasing housing stability as a primary program objective, some participants also described the importance of demonstrating a return on investment through reduced reliance on NYC’s youth and adult shelter systems. Shelters, they noted, are notoriously expensive to operate and show little evidence of helping young people exit homelessness. If a DCTP substantially reduces the number of days young people stay in shelters or use other public services, these cost savings could eventually outweigh the cost of the DCTP. Some participants highlighted the importance of designing and evaluating the program, in part, on the basis of
reducing shelter use. This focus helped uncover the DCTP’s return on investment and support long-term financial sustainability with public investment.

Eligibility & Recruitment

Finding 3. Participants debated, without consensus, whether youth with the highest level of need should be prioritized, which subgroups of young people would qualify as being most in need, and whether certain youth should be ineligible. Youth highlighted those who are on the streets, who are parenting, and who were formerly in the foster care system as having the greatest level of need. Nonetheless, they viewed youth with severe mental health or substance abuse issues as likely being better served, or at least additionally served, by other types of services and programs. Similarly, stakeholders discussed whether high-need youth should be prioritized or excluded from a DCTP. There was pushback during the appraisal workshop against screening youth for vulnerability.

[A]nyone who would be most marginalized [should be eligible]. They just can’t get a job or they’re heavily discriminated against. . . [or] are still on the streets. – Youth

[F]or certain populations of supportive housing, it requires you to have a high level of need. Maybe someone who has that much vulnerability would not be a best fit for this. But I don’t know. . . if that’s just my own bias. – Nonyouth stakeholder

Participants suggested various ways to approach eligibility, but there was little overall consensus. Possibilities included determining eligibility based on age (such as focusing on 21- to 24-year-olds, who tend to have access to fewer programs), length of histories of homelessness or shelter stays, service use or frequency in drop-in centers, the absence of severe behavioral health needs (who might benefit more from programs like supportive housing), pregnant or parenting status, or foster care histories. Yet these were posited simply as possibilities without strong feelings or consensus behind them. Nonetheless, consensus did emerge during the appraisal workshop to center the program on 18- to 24-year-olds. Given the lack of evidence about who would benefit most from a DCTP, some stakeholders highlighted the value of a more open approach to eligibility, at least for the purposes of a program pilot. The learning from the pilot evaluation could help inform future decisions around eligibility criteria.

It should be universally open. . . I don’t think there’s really a way to predict who’s going to be most successful in any type of program. – Nonyouth stakeholder

Youth overwhelmingly agreed that the name and messaging of the program is important to framing how young people view the program, and that it should not be called a “cash transfers program.” Youth suggested giving a cash transfers program a name that would encourage positive cash spending, investment, and saving behaviors, like a “savings program” or “youth success program”.
Youth also suggested the importance of in-person enrollment processes, and some participants described leveraging such a process to benefit the program participants. Youth believed an in-person enrollment process would help ensure and support young people’s seriousness about using a DCTP toward their goals and needs. Participants discussed utilizing the process to set goals, for early financial planning, to counsel on public benefits more broadly, and to connect youth to counseling, supports, and other services.

**Payments**

**Finding 4. Youth proposed amounts ranging from $500 to $3,000 per month, but they generally coalesced around $1,000.** Youth indicated that any level in the $500 to $3,000 range can be meaningful, but higher amounts would promote more savings and future planning, while moving youth beyond survival spending. Smaller amounts, they suggested, were unlikely to make a substantive difference in young people’s life circumstances or material hardship. In fact, some youth suggested that youth experiencing homelessness would more likely spend smaller amounts on things offering short-term pleasure or gratification, in an attempt to find temporary relief from the daily grind of trauma and adversity. However, larger amounts would enable and encourage young people to make more serious investments in themselves and their futures.

Youth and other stakeholders encouraged considering local factors such as cost of rent, cost of living, how cash transfer amounts would compare to investments in other programs, and how amounts would affect eligibility for other public benefits. Some also questioned whether the amount should differ for parenting young people, assuming higher costs associated with a larger living space needed (e.g., a one- or two-bedroom instead of a studio or apartment share) and additional costs of living for dependent children.

Youth underscored apartment shares as a normative arrangement for their age group in NYC. Estimated monthly rent in NYC apartment share arrangements generally ranges from $950 to $1,950 across the boroughs with one roommate and $793 to $1,765 with two roommates (Roberts, 2018). Low-cost studios in NYC range from approximately $1,300 to $1,600 across the boroughs, and low-cost two-bedrooms range from approximately $1,500 to $1,900 (Economic Policy Institute, 2018).

Youth stated that a DCTP could be used to supplement other income to meet their basic needs. The size of the impact would depend on young people’s existing income sources. Furthermore, young people’s existing income is variable and generally insufficient given NYC’s living and housing costs. We lack representative data on the employment and income of youth experiencing homelessness in NYC. Among our youth focus groups sample (n = 26), 12% received government/welfare income, 27% received employment income (ranging from $66 to $2,700 per month), and 38% received income from family or friends (ranging from $15 to $220 per month). With respect to public benefits, 16% were enrolled in Medicaid and 40% received WIC or SNAP benefits.
Finding 5. With respect to frequency, youth overwhelmingly preferred receiving cash assistance on a biweekly basis. Youth felt that splitting up the sum of cash into two payments per month would help them regulate how they used the cash and would encourage budgeting. Youth preferred cash assistance paid in smaller amounts at higher frequencies rather than all in a single lump sum. At the same time, some youth felt that options for flexibility in payment frequency could be useful for youth whose circumstances would benefit from different arrangements.

*I think that [splitting the amount would] help with budgeting. . .* – Youth

Finding 6. With respect to duration, stakeholders recommended that a DCTP’s duration range from a minimum of one year to a maximum of until youth reached stability or a particular age cut-off. Youth also discussed the idea of beginning with one year, and they suggested annual reapplication. Many stakeholders felt that a year was insufficient to achieve sustainable outcomes and stability for most youth experiencing homelessness. Stakeholders also argued for flexibility based on need, and for a smooth exit from the program.

*“It’s good for people to understand . . . what the exit strategy is.” – Nonyouth stakeholder*

Yet, while many stakeholders, in principle, supported longer cash transfer durations, they noted that durations may necessarily be restricted due to resource constraints—especially for pilot programs. Several existing and previous DCTPs were bound to 2 years or less because of funding constraints or proof of concept periods. Similarly, stakeholders with deep knowledge of the funding community suggested that there might be waning philanthropic interest in a pilot program with duration much beyond 2 years.

Finding 7. Youth generally preferred technology-enabled disbursement options, and the ability to choose payment mechanisms. Electronic options, such as mobile money, direct deposits, or prepaid cards or program debit cards, reduced time and travel costs involved in manual cash or check payments. Given the high share of immigrant and refugee youth among those experiencing homelessness in NYC, youth also highlighted the importance of including disbursement options that are accessible to young people lacking a social security number or bank account. Youth also suggested that user apps could facilitate transparency, tracking, and budgeting. Whatever the payment mechanism, youth and nonyouth stakeholders cautioned that it should be simple and present few to no barriers to access.

*[E]lectronic. . . ‘cause someone might be out in west New York that doesn’t want to have to travel to Manhattan every couple weeks. That’s two hours of your day.* – Youth
Conditions & Supports

Finding 8. Participants expressed mixed views about conditions or requirements, yet consensus on the importance of adding voluntary supports to a DCTP. Many participants found it difficult to align a conditional program with the guiding principles of anti-oppression and equity. However, some youth (more often than nonyouth stakeholders) stated that conditions should exist. They felt these conditions should be related to participation in certain types of programming or counseling to show a commitment to self-empowerment and goals. At the same time, highlighting a degree of tension in this point, youth were averse to a system that penalized youth; they proposed flexibility and offering youth options. As focus group discussions evolved, some youth suggested making conditions voluntary (i.e., more like encouraged activities than actual “conditions”). Whether or not youth agreed that conditions should be placed on program participants, they largely supported the idea of having some kind of accountability system in place. They discussed having youth check in with a program person on a regular basis to ensure that they were engaged in activities that improved their lives.

*I think maybe there could be some sort of not punitive but accountability structures that really help people, that people are really able to utilize to help them.* – Youth

Participants overwhelmingly liked the idea of a DCTP having a support person who could act as a counselor, navigator, coach, or mentor, although they also supported the idea of avoiding the term “case manager.” Youth were willing to set aside some of the DCTP budget for this role. They liked the idea of the support person having lived experience or being a trained peer. Additionally, some stakeholders suggested this could extend the program’s positive impacts to those youth as well. Participants added that individuals in such a role would need to be trained to feel empowered to work with youth in crisis. Similarly, participants also underscored the DCTP as complementing and helping youth make better use of existing services available across the city, rather than replacing them in all instances. For example, youth could still benefit from behavioral health services, legal services, or housing navigation supports available through other programs even while receiving cash assistance.

*If there’s something that is giving people the money, is [also] giving people direct resources and is also giving people the support on how to navigate those resources, I think it’d be very helpful.* – Youth

*I think that from what I know of the pilot, it would complement the services that are already being offered, and I think specifically, support young people in their ability to exit the shelter system. . . .* – Nonyouth stakeholder

Participants commonly championed financial education or counseling given the nature of the intervention. They also identified a range of other services or referrals related to public benefits, housing assistance, behavioral health, education, and employment, among others, that could amplify the impact of the program. Nonyouth stakeholders particularly stressed the importance of providing youth with a supportive community of peers and others with whom they can
connect when they need help. Some stakeholders noted that such a community might help empower youth by connecting them with positive social networks.

Support systems that feel more like what we all have: a network people. Versus a formal mentoring relationship. And some young people could ask for [something formal], but more access to trusting and caring people in their lives and creating community around that feels really important. – Nonlyouth stakeholder

Risks
While the qualitative findings overall underscored a high degree of support and enthusiasm for a DCTP for youth experiencing homelessness, we also asked participants to consider risks that might emerge and ways to mitigate those risks.

Finding 9. Participants expressed concerns about different forms of possible predatory targeting. They suggested this might occur in different forms, such as increased susceptibility to robbery, fraud, theft or financial coercion from partners or family members, or public systems extracting cash through fines. In turn, they offered several potential measures to mitigate such risks, such as providing flexibility in payment mechanisms, ensuring secure payment mechanisms that young people have direct control over and that have robust measures against fraud and theft, and providing ongoing supports and financial counseling and resources for youth.

Finding 10. Some youth raised concerns about how some young people might spend DCTP financial assistance. They expressed worries that youth might spend money, for instance, on drugs, unnecessary clothes, or other purchases that didn’t support their basic needs or long-term stability. Notably, this is a common public concern about cash transfers. Importantly, however, as described under the rapid review section, the international evidence base overwhelmingly reveals that concerns that poor or vulnerable people will spend cash assistance on “temptation goods” like tobacco, drugs, or alcohol are unfounded. Recipients primarily spend cash on basic needs (or children’s well-being; Evans & Popova, 2017). The Canadian randomized evaluation of a DCTP for adults experiencing homelessness found that cash recipients spent less money on alcohol, cigarettes, and drugs than the noncash control group (Foundations for Social Change, 2020). Some of youths’ concerns that program participants might spend cash irresponsibly could reflect broader research trends showing that people are more likely to assume undesirable responses to financial assistance (such as dropping out of the labor market) when asked about “others” rather than “themselves” (Duflo & Banerjee, 2019). Indeed, in some instances when youth were asked to reflect on how they would see their own spending, their responses differed from how they viewed the spending of others.

Finding 11. Nonlyouth stakeholders more commonly discussed concerns about a DCTP causing youth to lose other means-tested public benefits. Examples include the Supplemental Nutrition Assistance Program (SNAP); nutrition assistance for women, infants, and children (WIC); Medicaid; supplemental security income (SSI); NYC Human Resources
Administration (HRA) rental assistance; public temporary family assistance or safety net assistance; or financial aid for postsecondary education. However, many youth experiencing homelessness are unlikely to receive these benefits, so the stakeholders suggest that benefits of the program need to be weighed against actual risks.

Consultations with stakeholders and a review of other DCTP approaches to these issues revealed several strategies that could be taken to help mitigate the risk of adverse financial impacts or loss to other benefits in delivering cash transfers (these are not necessarily mutually exclusive and could present complementary strategies):

- **Set transfers up to qualify as an excluded gift according to U.S. tax code:** This avoids recipients having to pay taxes on cash transfers income. The IRS (2020) considers a gift “any transfer to an individual, either directly or indirectly, where full consideration (measured in money or money’s worth) is not received in return.” In other words, the giver cannot expect anything in return for the transfer.

- **Seek waivers to prevent loss of benefits:** The program could seek waivers from relevant state government agencies so that income from cash transfers is not included in means-tested eligibility determinations for programs like food stamps, Medicaid, housing subsidies, or welfare payments. There are precedents through other direct cash assistance programs, both in NYC and elsewhere, for successfully seeking waiver exclusions to prevent such program income from counting against income eligibility thresholds for some these programs.

- **Offset benefit losses:** A DCTP could reserve a fund to pay additional transfer amounts to offset any estimated losses of benefits due to cash transfers. For example, in NYC the maximum monthly food stamp (SNAP) allotment for a single adult is $194. The maximum monthly gross income that a single adult can have to remain eligible for food stamps is $1,354. If a young person receives a $1,000 monthly cash transfer, for example, that stands to disqualify them from food stamps if they have any other source of income. In this case, the monthly cash transfer amount could be recalculated at $1,194 to offset the loss.

- **Benefits counseling:** DCTPs could include mandatory benefits counseling as part of all participants’ program enrollment and orientation. This way, they fully understand the implications of program participation for any public benefits they receive currently or might receive in the future, and they can make informed decisions. For instance, even without offsetting losses to benefits like food stamps, participants could still receive substantially more assistance through the DCTP if transfer amounts are set at higher levels. Young people may rationally choose to participate in the DCTP at the expense of losing less generous benefits, but this should be an informed choice.

**Finding 12. Participants raised risks that young people’s gains in housing stability and other outcomes could diminish once transfers end.** Especially without policies to address broader structural issues—such as a severe shortage of affordable housing, living-wage job shortages, inadequate social protection systems, and systemic racism—some research
participants worried about the sustainability of possible program effects. Even if some young people made gains in education or employment, some research participants expressed concern whether these would be enough to sustain paying for rent and basic needs without ongoing financial assistance or subsidies. This concern reflects the high cost of living in NYC.

Both youth and nonyouth stakeholders raised options for program design that might help mitigate these risks to some extent. However, they recognized that, regardless of program design features, policies to address structural barriers would still be needed in addition to a program like this to achieve fully transformative and long-term results.

Youth suggested that program duration was important, with at least 2 years of transfers likely needed to help youth more fully stabilize and start investing in their future and long-term stability and self-sufficiency. Related to “cash plus” program models described in the rapid review section, participants suggested complementing cash transfers with supportive programs, such as counseling and case management—including connections to education and career opportunities—could help foster long-term financial independence. Finally, participants also suggested exploring options such as tapered cash transfer amounts over time, providing flexibility in program duration, and building program exit strategies with youth into the program from the beginning.
METHOD: CO-INTERPRETATION WORKSHOP

After conducting the three aforementioned formative research components, in December 2019, we organized an in-person workshop of youth and non-youth stakeholders in NYC to review preliminary research findings and collectively appraise potential program and study design decisions informed by those research activities. The workshop involved young adult participants with lived experience of homelessness and who were members of the NYC Youth Action Board (n=6), a group of youth leaders advising NYC policy and practice around youth homelessness. The workshop also involved non-youth stakeholders, including officials representing multiple City Government agencies, funders, non-profit youth service providers (n=12).

City Government officials from a range of relevant agencies were identified by the NYC Government’s Senior Advisor on Youth Homelessness, who holds the responsibility of coordinating efforts on youth homelessness from across NYC agencies. Initially identified officials at specific agencies then in some cases nominated others from their agency to participate in the conversation based on their relevant perspective or expertise. Young people were selected by and from the NYC Youth Action Board, a group of youth leaders with lived expertise of homelessness who advise and the City’s efforts on youth homelessness. A coalition non-profit was selected to participate because of their role in representing other youth homelessness service providers. Two philanthropic funders who are helping to coordinate the investment of other funders in this effort were also involved to account for philanthropic investment perspectives in designing this program and study. In addition to the 18 participants who were not part of the project team, eight members of the project team from Chapin Hall and Point Source Youth also participated in the workshop, delivering brief research findings presentations, facilitating dialogue, and capturing feedback.

This workshop involved an initial session with the project team and young adult participants only followed by a second session in the same day that included both young adult and non-youth stakeholder participants. We held a session first with young adults only to ensure that they had additional time and space to think and speak freely without non-youth stakeholders present. During the session with young adults only, we shared emerging lessons from youth focus. We facilitated discussion to seek young people’s feedback on interpretation of those lessons and on emerging program design decisions, such as factors for determining disbursement amounts, payment mechanisms, program requirements, and types of supports. During the subsequent session including both young adults and non-youth stakeholders, we facilitated discussion to gather inputs in the following areas: objectives and outcomes; eligibility recruitment, and enrollment; payment amounts, duration, and frequency; risks to other benefits; supports and conditions; and evaluation questions.

For each topic, we shared brief emerging findings, which were also presented in a preliminary findings report from the formative research and shared one week in advance of the workshop. We captured inputs shared both verbally and in writing on a paper form allowing for anonymous feedback on each topic.
Considering the research findings, the co-interpretation workshop led to the following implications for designing a DCTP for youth experiencing homelessness in NYC.

**Guiding principles:** The project should lead with four main interrelated guiding principles to orient the entire design and delivery of the DCTP: a youth-centered approach, trusting young people, keeping an anti-oppression focus, and centering on equity.

**Objectives:** First and foremost, design the DCTP and evaluation with a focus on exits from homelessness and improved housing stability as key objectives. Research and workshop participants also underscored how this type of intervention has the potential to affect a broader set of empowerment and well-being outcomes that should be measured and valued. Additionally, discussions acknowledged that different types of interventions could theoretically be used to address young people’s homelessness. Part of the value-added of a DCTP approach may include improving young people’s housing situation more quickly, flexibly, cost-efficiently, and sustainably than alternative public investments such as shelters and residential programs—at least for some young people.

**Eligibility:** Our review of the literature reveals that targeting cash transfers to the most economically vulnerable has the greatest impact and return on investment. We assume that all youth experiencing homelessness are very economically vulnerable by virtue of their homelessness. Therefore, categorically targeting this population aligns with the evidence base. Our focus groups and interviews suggest a lack of clear evidence or consensus regarding who, among youth experiencing homelessness, would benefit more or less from this type of intervention. Thus, we intend to keep the inclusion broad and use the evaluation to provide better evidence on this topic in the future. We aim to enroll young adults, ages 18–24, experiencing or at risk for homelessness identified through youth drop-in centers and, potentially, other programs with direct access to youth experiencing homelessness. The workshop did not arrive at consensus on additional eligibility, screening, or exclusion criteria; further discussion with stakeholders is required before finalizing the DCT program and evaluation design.

**Recruitment:** Because the goal is to support housing stability among young people lacking it, we will concentrate on recruiting young people at the front end of the youth homelessness system (for example, through drop-in centers and shelters) rather than those already receiving longer-term housing assistance (for example, those in transitional independent living programs, permanent supportive housing, or receiving housing vouchers or subsidies). Specific efforts should be taken to recruit BIPOC youth, LGBTQ-identifying youth, and immigrant and refugee youth, who are disproportionately represented among those experiencing homelessness. As
young people advised and the literature found useful, we should work with young people to label and message the study and program in ways that communicate the objectives and principles of the program rather than explicitly focusing attention on the intervention’s cash assistance component.

**Payment amount:** Given the primary objective of supporting young people’s housing stability, and the normative nature of apartment share arrangements among young adults in NYC, we expect that an adequate transfer amount should align with the market rate for apartment share arrangements in NYC. The workshop participants supported determining an amount based on local cost factors for youth to achieve housing stability. Estimated monthly rent in NYC apartment share arrangements generally ranges from $950 to $1,950 across the boroughs with one roommate and $793 to $1,765 with two roommates (Roberts, 2018). Young people suggested that a larger upfront amount in the first month may be warranted given the additional expenses involved in initially obtaining stable housing (security deposits, fees, furniture, etc.).

Notably, different objectives would justify different amount considerations. For example, if the goal is to prevent eviction as an irregular crisis for some young people, a one-off transfer costed to address arrears or a month’s rent might be sufficient. For youth facing current and ongoing economic hardship and homelessness or housing instability, however, larger amounts paid over time are likely to be more effective. On the other hand, if the objective were to provide guaranteed basic income sufficient to lift all young people experiencing homelessness out of poverty and support much or all of their basic needs, the benefit amount would need to be larger.¹

**Payment duration and frequency:** For the purpose of providing an ongoing safety net and supporting financial planning and development of responsible spending and saving skills, frequent and regularized payments of smaller amounts (e.g., every 2 weeks or monthly) would be preferable over paying single large lump sum transfers. Young people also advised that up to 2 years of cash transfers may be necessary to help young people get onto a sustainable path to housing stability and thriving, but we need better research into how different youth might have different needs for different amounts, frequencies, and durations of payments.

**Payment mechanism:** Young people generally advised options such as mobile money, direct deposits, or prepaid cards that would allow them to receive and spend cash quickly and without having to physically travel somewhere to receive cash. At the same time, different young people have different disbursement needs and preferences. They indicated that, ideally, they would be able to select from options for a payout method that works best for their situation. Young people also underscored the importance of including low-barrier payout options that are

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¹ For instance, NYC Government’s 2017 poverty threshold for a single adult was $15,555 and $23,472 for a family of one adult and one child. Taking more factors into account, the Economic Policy Institute’s (EPI) Family Budget Calculator estimates moderate monthly cost of living for a single adult to range from $3,669 to $4,504 across NYC boroughs and from $5,803 to $7,144 for a family of one adult and one child.
accessible for youth lacking a social security number, existing bank accounts, or other documentation.

**Conditions:** As the literature review found, conditions may play useful roles for very specific objectives related to behavior change and in very specific contexts. Yet, the literature suggests mixed evidence overall on the value added of conditions in DCTPs. It also suggests potential adverse effects of conditions when the primary objective is to provide a safety net and address material hardship among the poorest and most vulnerable people. Young people had somewhat sympathetic, but also conflicting, views about applying conditions or requirements in a potential DCTP for youth. Non-youth stakeholders generally argued strongly against them as paternalistic and antithetical to the guiding principles described above. As such, workshop feedback suggested that a DCTP for youth experiencing homelessness would be more effective, more efficient, and more grounded in empowerment, trust, and “housing first” principles of low-barrier access to housing resources without attaching conditions to the cash transfers.

**Supportive programming:** Many of the most long-standing and well-evaluated DCTPs internationally have evolved into “cash plus” models. These couple direct financial assistance along with a range of other program components and policies to address nonfinancial and structural barriers that prevent the poor from escaping poverty and thriving. The focus groups and interviews similarly highlighted nonfinancial and structural barriers to young people achieving sustainable housing stability and well-being. As such, the workshop participants suggested that voluntary and flexible supports could amplify the positive impact of a DCTP for youth experiencing homelessness. These include supports such as strengths-based peer counseling, case management and connection to other services and resources, housing navigation, and financial inclusion and financial literacy supports, among others.

**Risk mitigation:** Some stakeholders, particularly funders, discussed the possibility that a young person participating in a DCTP might experience an adverse outcome. Indeed, irrespective of the program, youth who experience or are at risk for homelessness are by definition vulnerable to a range of negative outcomes. The term “adverse outcomes” refers to unintended, undesirable events, including illness, suicide, unintentional injury (accidental death), drug- and alcohol-related injury, and death. These adverse events are among the leading causes of illness and death among people ages 15–24; the three leading causes of death are unintentional injury, suicide, and homicide (CDC, 2018). Further, these adverse events occur at disproportionate rates in young people experiencing homelessness. Auerswald and colleagues (2016), for example, found that youth experiencing homelessness have 10 times the early death rate of their stably housed peers. Programs providing services to this age group, and in particular young people experiencing homelessness, might expect some level of adversity among enrolled individuals.

Possible risk mitigation measures that emerged included the following:

- **Careful program design:** Make program design decisions, informed by young people, that optimize program effectiveness and harm reduction (e.g., considering higher frequency, smaller
amount payments rather than larger lump sum payments; electronic payment mechanisms; and trained peer navigation and casework linked to other services available in the city).

- **Harm reduction and tailored supports**: The case work, peer navigation, and supportive services for all youth enrolled in the DCTP should include a robust harm reduction approach that involves evidence-based methods and principles to reduce the dangers to people who choose to engage in certain activities that may put them at risk.

- **Screening**: Apply specific eligibility criteria and screening procedures to identify youth who may need other referral supports alongside of, or instead of, a DCTP—such as youth with severe mental health or substance use disorders. Service providers who identify likely substance use disorders or concerns for immediate risk of harm to self or others could refer the young person for additional services. These might include behavioral health treatment, permanent supportive housing, or other interventions that are specifically designed for addressing those presenting concerns. The service provider could then still implement housing first principles by ensuring that the youth, in some way, has access to low-barrier housing. However, workshop participants described this as controversial. They said supporting young people’s basic needs and housing through a DCTP might also better enable young people to achieve behavioral health, and screening for these disorders may be difficult to implement consistently and reliably in practice.

Overall, these ideas emerged as possibilities, but the lack of workshop consensus underscored the need for deeper discussion among local stakeholders to inform difficult decisions with respect to eligibility, screening, and risk mitigation. Further, in the event that adverse events occur, careful evaluation of a DCTP should help to provide insights needed to respond in a measured and targeted way.

There are, unfortunately, a number of examples of adverse events occurring among participants in a range of widely accepted and effective interventions for vulnerable populations. Typically, especially when evidence is available through evaluations to understand an incident in the context of a program’s overall risks and benefits, responses to such incidents lead to targeted actions that improve the intervention for everyone. This is more effective than overhauling the program in response to a single tragedy. For example, many treatments that have had well-documented life-saving effects at the population level, such as PreP medication for reducing the risk of HIV infection or the flu vaccination, also have side effects. In very rare cases, they can lead to morbidity and mortality. The occurrence or known risk of such negative outcomes in rare cases has contributed to continuous testing, evidence gathering, and quality improvement. As a result, over time, these treatments have become more effective and less risky. This type of evidence-based approach should be applied to improving outcomes while reducing even rare adverse events with any intervention involving youth experiencing homelessness, including a DCTP.

While articulating risks, the workshop participants also highlighted reasons to expect that a well-designed DCTP could itself reduce the inherent harm of leaving young people to face homelessness and severe hardship without serious material support. Taking a “do no harm” approach to program design and funding requires considering risks associated with an intervention. It also requires considering risks due to the absence of an intervention. When
young people experience homelessness, they rely on shelters, the streets, or precarious couch-surfing arrangements. The status quo circumstances they face due to these arrangements frequently place them at significantly higher risk for health problems, serious substance use and mental health disorders, trafficking and exploitation, violence, and early death. A DCTP has the compelling potential to reduce the incidence of such adverse events.
DISCUSSION

Overview

The mixed-methods research and multistakeholder design process described in this report, including a rapid review of international and domestic literature and qualitative research with youth and a range of stakeholders, underscored the transformative potential that a direct cash transfer program (DCTP) could have in the lives of youth experiencing homelessness. The research suggests that the benefits of a DCTP would not only be felt by young people, but also by their friends, family, and broader communities through positive spillover and multiplier effects that cash transfers can have. Furthermore, with deep-seated disparities in homelessness related to race, ethnicity, sexual orientation, and gender identity, DCTPs may help bolster equity and empowerment in homelessness response systems.

At the same time, the literature sheds light on the myriad of ways in which DCTPs are designed and delivered, posing a multitude of choices that program developers and policymakers have to make. These choices have potentially significant implications. The literature synthesis highlights lessons learned from different approaches in a wide range of contexts, and the focus groups and interviews offered insights to inform these decisions in designing a DCTP specifically for youth experiencing homelessness. The co-interpretation workshop brought together diverse perspectives from multiple stakeholders to make practical sense of the research findings and determine implications that could inform the design of a DCTP for youth experiencing homelessness in NYC. Below, we outline four key conclusions and corresponding implications from this study and process:

1. Center on youth, equity, and trust. Young people elevated the importance of centering the program on youth needs and preferences, particularly BIPOC and LGBTQ youth who face discrimination and exclusion through existing systems.

Implications:

- Codesign DCTPs with youth with lived expertise, especially BIPOC and LGBTQ youth.
- Emphasize trust and support in program design, and make supports demand driven.
- Avoid reliance on conditions, sanctions, and control in program design.
- Ensure that the most historically marginalized youth can benefit from the program—especially BIPOC, LGBTQ, and immigrant and refugee youth.

2. Boost housing stability and empowerment. Participants encouraged setting this DCTP up with clear and bold objectives: help youth sustainably exit homelessness and get on paths to thriving, according to the paths they choose. These objectives should inform transfer amounts, duration, and supportive programming.
**Implications:**

- Determine transfer amounts based on what young people need to afford permanent housing in the local rental market. This might involve larger upfront costs.
- Determine the program duration based on what youth need for sustained housing stability and getting on paths to self-investment and thriving (at least 1 to 2 years).
- Complement cash transfers with voluntary supports, like life and financial coaching, housing navigation, and connection to other services.
- Evaluate effects on reducing homelessness and shelter use, as well as young people’s experiences of empowerment and effects on other aspects of well-being.
- Compare the effectiveness and cost-effectiveness of DCTPs to reliance on shelters and other existing program models.

3. **Adopt a flexible and simple approach.** Youth experiencing homelessness have diverse needs, preferences, and circumstances. Allowing youth to choose between different payment mechanisms and supportive options facilitates better results for youth in diverse situations. At the same time, providing simple, integrated delivery systems and youth support teams makes the program easier and more efficient to implement.

**Implications:**

- Enable youth to choose between different payment mechanisms (e.g., mobile money, direct deposit, or prepaid debit cards) to ensure that cash transfers work for youth with different banking situations, spending needs, or documentation statuses.
- Provide flexibility in the supportive programming. Some youth may prefer engaging with a trained peer while others may prefer support from a professional social worker. Different youth need different types and levels of support.
- Leverage technology to make cash transfers and supports more accessible to young people, including through virtual coaching, navigation, and case management.
- To keep implementation simpler, streamline program enrollment, payment options, and troubleshooting through a single online platform, and set up collaborative youth support teams.

4. **Identify and manage barriers to success.** While common concerns about risks to giving money to people living in poverty do not play out, certain design and support decisions can reduce the risk of rare adverse events and can help mitigate the potential for cash transfers to knock youth off other public benefits or face costly tax implications.

**Implications:**

- First, check assumptions, as some risks may be more perceived than real. The evidence on cash transfers suggests that stereotypical concerns that people living in poverty would spend income from cash transfers on drugs or alcohol, or would become “lazy,” rarely play out; in fact, evidence tends to show the opposite. Meanwhile, the status quo presents serious risks: youth experiencing homelessness face adversities and early death at alarmingly high rates under the status quo.
- Still, youth-informed program design features could support harm reduction and reduce the risk of adverse experiences among even a small number of program participants.
• Take careful precautions to avoid or offset risks of some youth facing a loss of other public benefits or costly tax implications due to receiving cash transfers. Potential solutions include offering cash transfers unconditionally and as a gift as defined in U.S. tax code, providing benefits counseling, offsetting potential losses through increased transfers, and seeking waivers from relevant government agencies.

• Integrate a robust evaluation and learning plan to identify and minimize risks of adverse events over time while bolstering overall program effectiveness.

**Considering COVID-19**

The COVID-19 pandemic emerged after the research activities described in this report took place. As such, our research findings do not include considerations of COVID-19 circumstances. However, it is important to incorporate these circumstances into the discussion to help frame our lessons learned in this unprecedented context. The COVID-19 epidemic illuminates several key vulnerabilities in the current reliance on shelters, residential programs, and other interventions involving significant use of physical spaces and in-person interactions to meet the basic needs of our most vulnerable young people.

When “social distancing” serves the public health good and the well-being of individuals, shelters, residential programs, and youths’ reliance on crowded couch-surfing or doubled-up arrangements become increasingly untenable (Coughlin et al., 2020). Programs that rely on heavy in-person interactions are also particularly vulnerable to staff attrition, leaving the young people who rely on these services without support. With direct financial assistance, DCTPs allow young people to find better, safer solutions to their housing and material needs. With technology-enabled payments and virtual counseling, we can also design a DCTP that provides direct benefits and need-based supports to youth without them having to congregate in shelters or meet frequently in-person with caseworkers.

Furthermore, because of COVID-19, we now face unprecedented economic shocks that could have devastating implications for the strength and survival of a wide range of human service programs. More than ever, we need cost-efficient interventions that direct as many resources as possible directly and quickly to helping young people achieve stability and get on a path to thriving. A substantial body of international evidence summarized in our literature review indicates that cash transfers provide an important social safety net for vulnerable populations both during and outside of crises.

Considering the considerable adaptability of a DCTP, what we might find is that certain market factors influenced by COVID-19 could influence specifics in the design features of the program. For example, as young people’s access to other sources of income declines during a pandemic (such as from employment or informal loans or gifts from friends or family), cash transfer amounts may need to be larger to achieve the same results that might be achieved with less in better times. On the other hand, if the pandemic puts downward pressure on rent prices as residents leave the city, the cash transfer dollars might be stretched farther to support housing stability.
Overall, we do not expect COVID-19 to compromise the relevance and generalizability of this research on cash transfers for youth (quite the opposite), but we do expect that the planned evaluation will reveal ways in which COVID-19 circumstances might influence choices or adaptations regarding cash amounts and specific design and delivery decisions. These possibilities underscore why a rigorous, mixed-methods evaluation component is so important. During these challenging and fluid times, decision-makers need credible, real-time evidence on how interventions play out and how they can be optimized.

**Conclusion**

The rich and nuanced findings that emerged from this formative research offer invaluable insights to inform how we design and deliver a DCTP and study for youth experiencing homelessness. This work underscores the value of mixed-methods research and authentic collaboration with young people with lived expertise and other cross-sector stakeholders to inform the development of interventions to address youth homelessness. Armed with these findings, we now advance more prepared to make informed decisions that we hope will increase the success of this initiative in the pursuit of better, more equitable answers for how we end youth homelessness and support young people’s pathways to thriving.
REFERENCES


*Interventions for homeless families.* Washington, DC: Department of Housing and Urban Development.


Parker, S., Rubalcava, L., & Teruel, G. (2012, May). Do conditional cash transfer programs improve work and earnings among its youth beneficiaries?: Evidence after a decade of a Mexican cash transfer program. In Population Association of America 2012 Annual Meeting Program (pp. 3-5).


Riccio and Miller 2016


UK Development for International Development. (2011). DFID cash transfers evidence review. DFID.

U.S. Government Accounting Office 2019


Appendix A. Rapid Literature Review Technical Information

Figure 1. International systematic reviews, evidence reviews, and meta-analyses

Records identified through database searching (n=141)

Records screened after duplicates removed (n=81)

Records included (n=60)

Records excluded (n=21)

Full-text articles assessed for eligibility (n=60)

Full-text articles excluded, with reasons (n=12)

Studies included in qualitative synthesis (n=48)
Records identified through database searching (n=1,235)

Records screened after duplicates removed (n=821)

Records included (n=74)

Records excluded (n=747)

Full-text articles assessed for eligibility (n=74)

Full-text articles excluded, with reasons (n=48)

Studies included in qualitative synthesis (n=26)
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