



RISE UP ALAMEDA GUARANTEED INCOME STUDY

Two-Year Insights



August 2026

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AUTHORS & ACKNOWLEDGMENT



About This Report

This report summarizes findings from an evaluation of *Rise Up* Alameda, a guaranteed income program implemented by the City of Alameda from December 2023 to December 2025. *Rise Up* provided unconditional payments of \$1,000 per month for 24 months to 150 eligible low-income applicants who were randomly selected to participate in the program. Outcomes for program participants were compared to outcomes for a control group of applicants who were not selected to participate in *Rise Up*. Findings show that guaranteed income allowed *Rise Up* participants to build savings, decreased their likelihood of going into debt, and lowered their levels of stress and psychological distress.

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The study team also thanks the City of Alameda and Operation Dignity for their support and coordination, including City of Alameda staff Jackie Kelliaa, Lois Butler, Eric Fonstein, and Walker Toma.



Chapter 1: Introduction

Guaranteed income (GI) programs provide direct financial assistance with no restrictions, unlike many means-tested assistance programs such as housing subsidies and the Supplemental Nutrition Assistance Program (SNAP). Participants can use GI payments to meet their individual needs rather than being limited to specific expense categories. This allows participants to make changes in their lives without the burden of repeated verification or risk of losing benefits. The absence of recertification requirements may also reduce administrative burden and stigma often associated with public assistance programs, offering a more dignified process for GI recipients and allowing them to determine what they need and how best to spend their money.

In September 2023, the City of Alameda, California, launched *Rise Up Alameda*, a GI pilot program funded by the American Rescue Plan Act. *Rise Up Alameda* served 150 residents aged 18 years and older in households with annual incomes at or below 50 percent of the County's Area Median Income (AMI), adjusted for household size (e.g., \$51,800 for a one-person household). *Rise Up* participants received \$1,000 per month for 24 months, beginning in December 2023. The project's primary goal was to reduce economic instability for program participants.

This report presents final findings from an evaluation of *Rise Up Alameda* that the City of Alameda partnered with Abt Global to conduct. The evaluation used a randomized controlled trial design and a comprehensive survey administered one year and two years after program launch to assess the impact of GI payments.^a The impacts of *Rise Up* were estimated by comparing outcomes for *Rise Up* participants to outcomes for similar Alameda residents who were not offered payments. In June 2025, Abt Global published an interim report that described impacts after one year. This report presents findings on the effects of *Rise Up Alameda* over the full two-year period.

This report describes findings at the conclusion of the program. After two years of *Rise Up Alameda*, participants:

- Increased their savings rate.
- Were less likely to take on debt.
- Reported lower levels of stress and psychological distress.
- Were less likely to use certain public benefit programs.
- Pursued more flexible working arrangements with no detectable reductions in overall levels of work engagement or hours worked.

^a The study also includes a short, three-question survey issued 6 months and 18 months into the program to track incremental impacts for certain outcomes and to maintain up-to-date contact information.



Chapter 2: Context

Alameda is a city in Alameda County, located in the East Bay region of California's Bay Area. Among its approximately 80,000 residents, the median household income in 2023 was \$132,015.^[1] Alameda is a high cost-of-living area, with a median gross rent of \$2,394 in 2023.^[2] The high living costs contributed to the decision to set *Rise Up Alameda's* guaranteed income payments at \$1,000 per month.

As a waterfront city, Alameda was historically a middle-class community with a thriving maritime industry centered around the U.S. Naval Air Station Alameda until its closure in 1997. More recently, Alameda has emerged as a growing tech hub, with biotech and life sciences, clean-tech, and blue-tech firms setting up headquarters and attracting a higher-income workforce.^[3] However, Alameda, like the broader Bay Area, has experienced a decline in middle wage employment alongside the growth of high-wage tech and biotech jobs. This shift has been particularly evident in manufacturing and service sectors and has contributed to increased income inequality.^[4]

Reflective of its high cost of living, Alameda sets its own minimum wage via local ordinance. At the time *Rise Up* launched in 2023, Alameda's minimum wage was \$16.52 per hour, slightly higher than California's state minimum wage of \$15.50. Minimum- and low-wage jobs in Alameda are often concentrated in sectors such as hospitality, retail, healthcare support (i.e., home health aides and medical assistants), and childcare.

In addition to the already high cost of living in the Bay Area, economic disruptions from the COVID-19 pandemic and price inflation amplified economic challenges for many Alameda residents. In response to these challenges, the City of Alameda has directed resources towards rebuilding economic opportunities for residents. The City used a portion of its American Rescue Plan Act funding to support the *Rise Up Alameda* program. It also established an economic recovery task force focused on addressing hardship among the City's most vulnerable businesses, residents, and workers. Despite these efforts, many residents continued to experience economic challenges as of 2025. According to the Alameda County Community Food Bank, food insecurity increased by more than 50 percent and county-wide unemployment is three times higher than pre-pandemic levels.^[5] Data from the Bay Area Equity Atlas indicate that communities of color and low-income populations have faced

slower economic recovery from the pandemic, including persistent income loss and difficulty covering basic expenses.^[6]

How were study participants selected?

On September 8, 2023, the City of Alameda opened an online application for residents interested in *Rise Up*. The application remained open for 11 days, during which 2,368 residents applied.

The online application had three components:

1. Questions to determine program eligibility;
2. A brief description of the study, including a request for consent to participate in the research; and
3. A survey collecting information on age, race, ethnicity, education level, employment status, financial status, mental health, hopefulness, housing status, health, and community engagement.

Before and during the application period, the City of Alameda, in partnership with Operation Dignity, conducted outreach to raise awareness of the program among potentially eligible populations including:

- People experiencing or at risk of homelessness.
- Immigrant, refugee, and limited English-speaking communities.
- Historically disenfranchised groups including Black, Indigenous, and other communities of color.
- Low-income families, including senior citizens.
- Affordable housing tenants and renters.
- People with disabilities.
- Alameda families with children and youth, as well as College of Alameda students.^b

^b Alameda's public community college.

^c After randomization, Operation Dignity staff contacted those selected to receive GI to verify their eligibility, answer questions about *Rise Up*, offer counseling on how receiving GI might affect other income-dependent public benefits, and confirm their desire to participate in the program.

Exhibit 1. Eligibility criteria for *Rise Up* Alameda

Eligibility Requirements	
	Resident of the City of Alameda
	At least 18 years old at time of application
	Household income no greater than 50% of the County's Area Median Income

The study team screened all applicants for eligibility based on information provided in their online applications. To participate in *Rise Up* Alameda, applicants were required to be at least 18 years of age, reside in the City of Alameda, and have an annual household income at or below 50 percent of the County's Area Median Income (AMI), adjusted for household size (e.g., \$51,800 for a single-person household based on 2023 AMI).

From the pool of eligible applicants, Abt Global randomly selected 192 people for the **program group** and 180 people for the **control group**. The program group included 42 people who were not successfully onboarded because they could not be contacted, were later determined to be ineligible, or declined to participate.^c These 42 individuals were classified as "inactive," resulting in 150 participants who ultimately received guaranteed income payments.

Who participated in *Rise Up*?

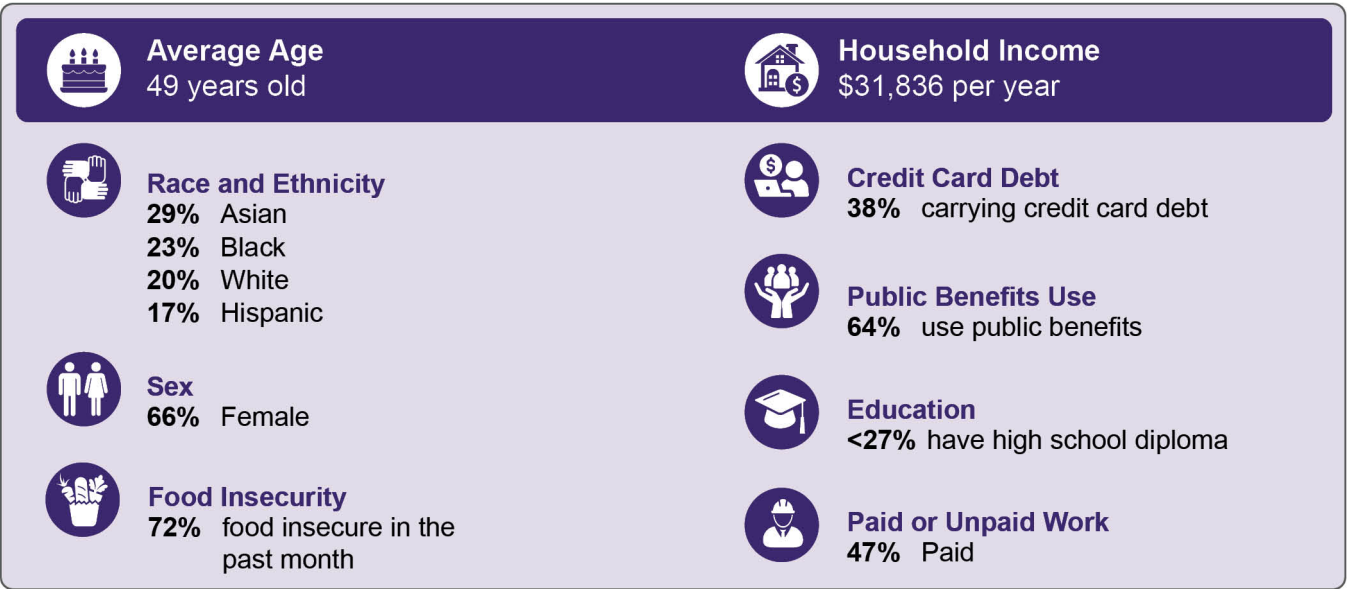
Rise Up participants were a demographically diverse group of Alameda residents (Exhibit 2). Two-thirds of participants (66 percent) were women. At the time of application, about half (49 percent) were between the ages of 25 and 50, and approximately one-quarter (26 percent) were age 62 or older. Forty-three percent of participants had attained education beyond high school, compared to 93 percent of Alameda’s overall population.

On average, participants reported a household income of \$31,836 at the time of application.^d This is substantially lower than the City’s median household income of \$132,015 in 2023.

Less than half of participants were engaged in paid or unpaid work, whereas 64 percent of Alameda residents overall were employed in 2023.

The *Rise Up* sample has a larger proportion of Black and Hispanic participants compared to the Alameda’s overall population. Among participants, 23 percent identify as Black, 20 percent as White, 29 percent as Asian, and 17 percent as Hispanic. In comparison, Alameda’s population in 2024 was 43 percent White, 6 percent Black, 30 percent Asian, and 14 percent Hispanic.

Exhibit 2: *Rise Up* Alameda participant characteristics at application (2023)



^d Despite the income ceiling for eligibility being 50 percent of AMI (for example \$51,800 for a family of one), *Rise Up* participants’ incomes tended to be below that, with an average reported annual income of \$31,836 across all households. The majority of participants (64 percent) also reported using public benefits including SNAP, Temporary Assistance for Needy Families, or housing assistance.



Chapter 3: Evaluation Methods

The Abt study team used an experimental research design to understand how the *Rise Up* Alameda program affected participants' lives. Abt randomly selected 192 applicants for the *Rise Up* **program group**, and 180 applicants for the study's **control group**. Of the 192 applicants selected for the program group, 150 were successfully onboarded to *Rise Up* and received GI payments. The 180 applicants selected for the study's control group did not receive GI payments. All study participants completed a baseline survey at the time of application. They were then asked to complete follow-up surveys one and two years after the first GI payments were issued. Participants were also asked to complete brief tracking surveys at 6- and 18-months.^e

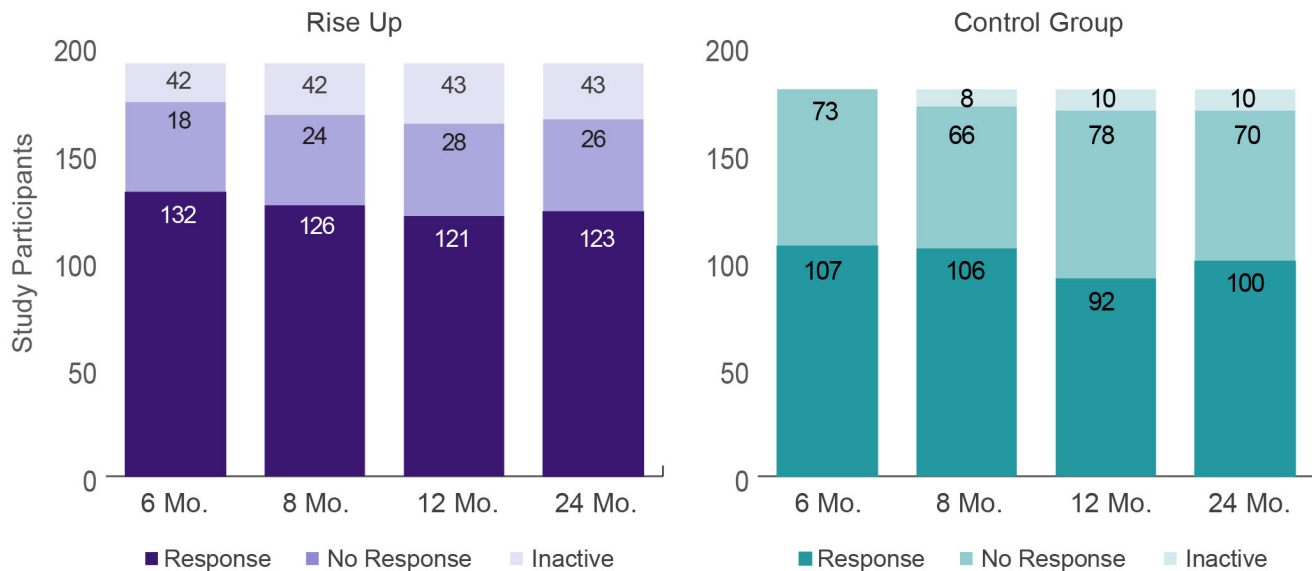
To measure the effect of GI, the study team compared average outcomes for the program group with those for the control group. Because the two groups were very similar at the start of the study—except that the program group received GI—differences observed later in the study can be attributed to the impact of receiving GI.^f

The study team used statistical tests to further assess whether differences in outcomes between the program and control groups were likely to reflect a real program effect rather than random variation that occurred by chance. Differences classified as *statistically significant* provide stronger evidence that the program affected the outcome. Differences classified as *marginally significant* also suggest a program

^e The tracking surveys were used to confirm participant contact information and also collected information on a small number of outcomes also measured in the complete follow-up surveys. The outcomes measured in the 6- and 18-month tracking surveys were: employment status, whether the respondent could cover a \$400 emergency expense, and perceived stress.

^f Balance tests confirmed that there were no systematic differences between the program and control groups at baseline.

Exhibit 3. Survey responses



Note: During analysis, inactive program group members are treated as survey nonrespondents, as described in the Analysis Plan

effect, but the evidence is weaker. Additional details on the research design and analytic methods are provided in the Analysis Plan.^[7]

Exhibit 3 reports the number of survey responses received for the 12- and 24-month follow-up surveys and 6- and 18-month tracking surveys. It also reports the number of nonrespondents and inactive individuals. The baseline survey was completed by all individuals in the study sample during the application process.

As described in the Analysis Plan, the study makes statistical adjustments to account for survey non-response and inactive study participants.⁹ Additional details on survey response rates are provided in Appendix A.

The 6-, 12- and 18-month surveys were administered while program group members were actively receiving GI payments. The 24-month survey was conducted between November 2025 and February 2026, meaning that participants completed the survey around the time they received their final GI payment or within one to two months afterward. Final GI payments were made in early November 2025.

Because the study examined a large number of outcomes at both 12 and 24 months (and therefore conducted many statistical tests), the next chapter focuses on outcomes with consistent, statistically significant (or marginally significant) impacts across multiple survey waves.

We also report findings on household income, given its direct connection to the GI intervention, and provide a high-level overview for the two outcome domains where we found no or little evidence of consistent, statistically significant impacts: housing and food insecurity, and community engagement.

For completeness, estimates for all outcomes measured at 12 and 24 months are presented in Appendix C. Estimates for outcomes measured at 6, 12, 18, and 24 months are presented in Appendix F.

Readers should interpret comparisons across survey waves with caution. Changes over time may reflect random variation, differences in the composition of survey responders, or the cessation of GI payments, rather than true changes in program impact.

⁹ We also examined the baseline characteristics of the one- and two-year survey respondents and found that the program group respondents and control group respondents were similar.

The research team also examined whether the impact of GI varied across subgroups of participants defined by age, employment status, education level, and whether participants had minor children at the time they joined the study.

Given the large number of outcomes examined, specific subgroup findings are highlighted in the next chapter only when: (1) there was statistically significant variation in impact by

subgroup for more than four of forty outcomes, indicating more cross-subgroup variation than would be expected by chance, and (2) patterns of variation for a specific outcome were consistent and statistically significant (or marginally significant) across multiple survey waves. Full subgroup results for all outcomes at 12 and 24 months are presented in Appendix D.



Above: View from the former Naval Air Station Alameda, westward.

Chapter 4: Key Findings after Two Years of *Rise Up Alameda*

After two years of *Rise Up Alameda*, results indicate that participants consistently experienced lower stress, were more likely to build savings, and were less likely to go into debt. Findings also suggest that some participants used the additional income to pursue more flexible work arrangements, shifting from full-time to part-time work. Overall levels of engagement with full or part-time work remained similar to those of the control group throughout the study period, as did the number of hours worked per week. Key findings are summarized below.

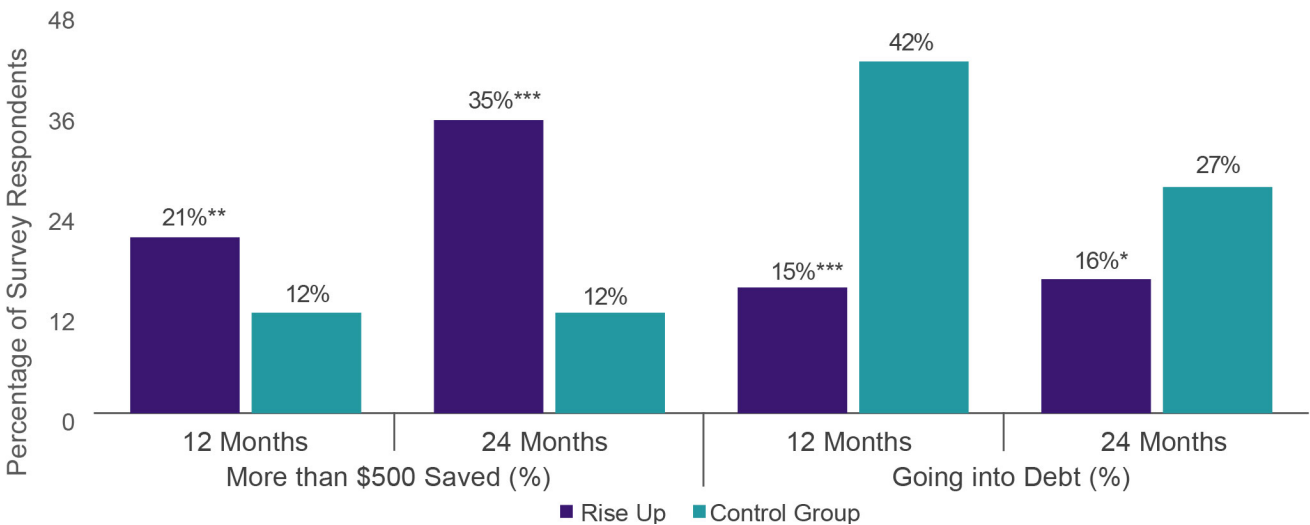
Key findings are organized across five outcome domains: (1) financial well-being; (2) mental, emotional, and physical health; (3) community engagement; (4) housing and food security; and (5) employment. We focus on outcomes for which we observed consistent, statistically significant or marginally significant impacts across survey waves.

Rise Up participants saved more, were less likely to go into debt, and were less likely to use certain public benefits

GI payments increased savings and decreased the likelihood of going into debt among *Rise Up* participants relative to the control group (Exhibit 4). A larger share of the program group accumulated savings over time. At 12 months, 21 percent of participants reported having more than \$500 in savings, compared to 12 percent of the control group. At 24 months, *Rise Up* participants were nearly three times as likely as the control group to report savings above \$500 (35 percent versus 12 percent).

Consistent with increased savings, *Rise Up* participants were less likely to report going into debt. At 12 months, 15 percent of participants reported going into debt compared to 42 percent of the control group. At 24 months, 16 percent of participants reported going into debt compared to 27 percent of the control group.

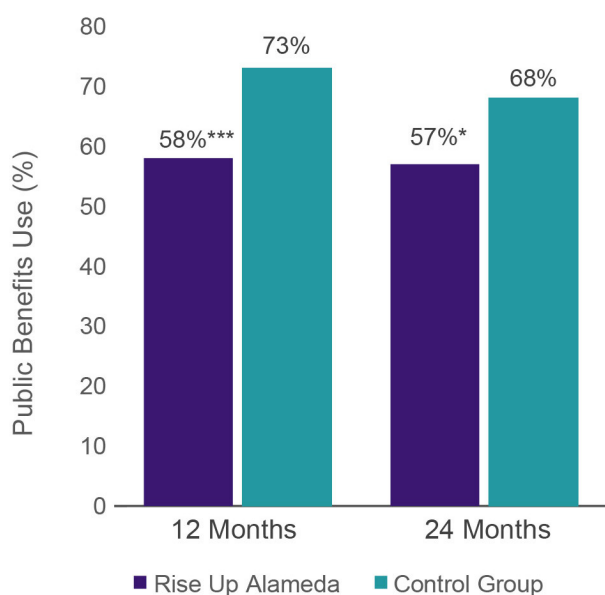
Exhibit 4. *Rise Up* participants were more likely to build savings and less likely to report going into debt



Note: Stars indicate level of statistical significance. *** = p-value less than or equal to .01, ** = p-value between .01 and .05, and * = p-value between .05 and .10

At both 12 and 24 months, *Rise Up* participants were also less likely than members of the control group to report having used any of the following public benefits programs in the preceding 12 months (Exhibit 5): Social Security Insurance (SSI), Supplemental Nutrition Assistance Program (SNAP), Women, Infants & Children Nutrition Program (WIC), or Social Security Disability Insurance (SSDI). At 12 months, 58 percent of *Rise Up* participants reported having used one of these programs compared to 73 percent of the control group (a 15 percentage point difference). At 24 months, 57 percent of participants reported having used one of these programs compared to 68 percent of the control group (an 11 percentage point difference).

Exhibit 5: *Rise Up* participants were less likely to use certain public benefit programs

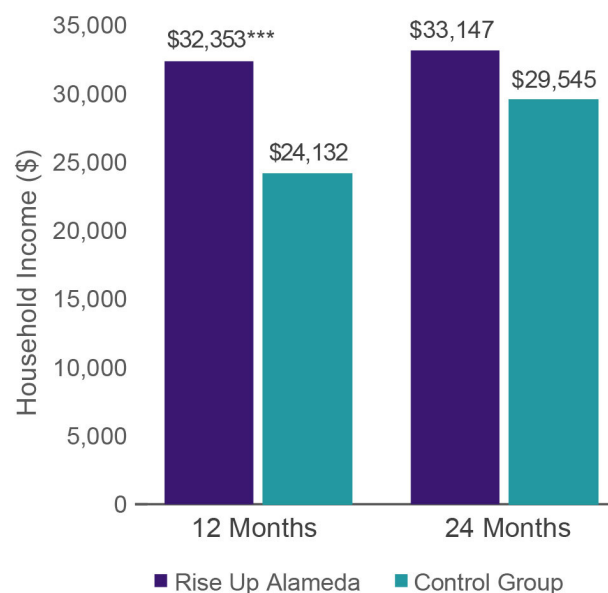


Note: Stars indicate level of statistical significance. *** = p-value less than or equal to .01, ** = p-value between .01 and .05, and * = p-value between .05 and .10

On average, *Rise Up* participants had higher household incomes than members of the control group, but differences in household income were only statistically significant at the 12-month timepoint. At 12 months, the average household income for *Rise Up* participants (including GI payments) was \$32,353, compared to \$24,132 in the control group, an \$8,221 difference. At 24 months, the average

household income for participants was \$33,147, compared to \$29,545 in the control group. The difference of \$3,602 was not statistically significant. The smaller difference at 24-months appeared to be driven by an increase in average household income for the control group, rather than by changes to income levels in the program group.

Exhibit 6: Household Income



Note: Stars indicate level of statistical significance. *** = p-value less than or equal to .01, ** = p-value between .01 and .05, and * = p-value between .05 and .10

Rise Up participants reported lower levels of psychological distress and perceived stress

Prior research shows that improved financial well-being is associated with better mental health.^[8] This study adds causal evidence that increased income can improve mental health outcomes among low-income households.

Mental well-being was measured using the Kessler Psychological Distress Scale (K10) and the Perceived Stress Scale. K10 scores range from 10 to 50, with lower scores indicating less distress.^[9] The Perceived Stress Scale (4-item

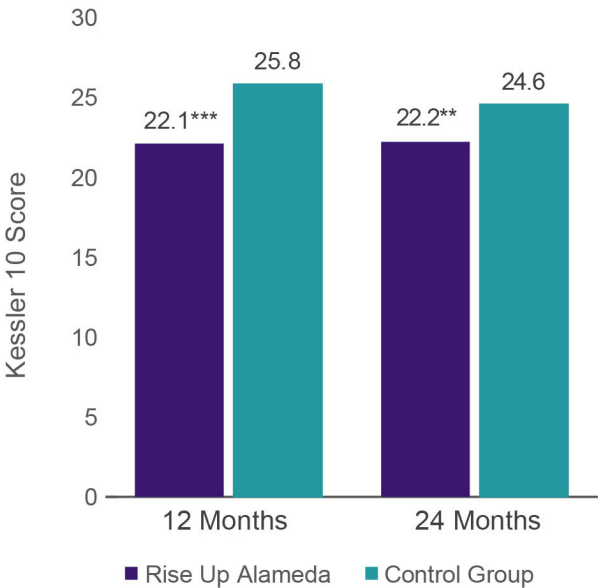
version) ranges from 0 to 16, with lower scores indicating less stress.

On average, *Rise Up* participants had lower K10 scores at both 12 and 24 months (Exhibit 7). At 12 months, participants' average score was 3.72 points lower than that of the control group (a 14 percent reduction in average K10 score). At 24 months, the difference was 2.37 points (a 10 percent reduction in average K10 score).

On average, participants also reported lower perceived stress at 6, 12, and 18 months (Exhibit 8). At 6 months, the average stress score for *Rise Up* participants was 0.72 points lower than that of the control group (a 9 percent reduction). At 12 months, participants' average stress score was 0.84 points lower (an 11 percent reduction), and at 18 months participants' average stress score was 1.36 points lower (a 16 percent reduction). Although participants also reported lower perceived stress scores at 24 months, this difference was not statistically significant.

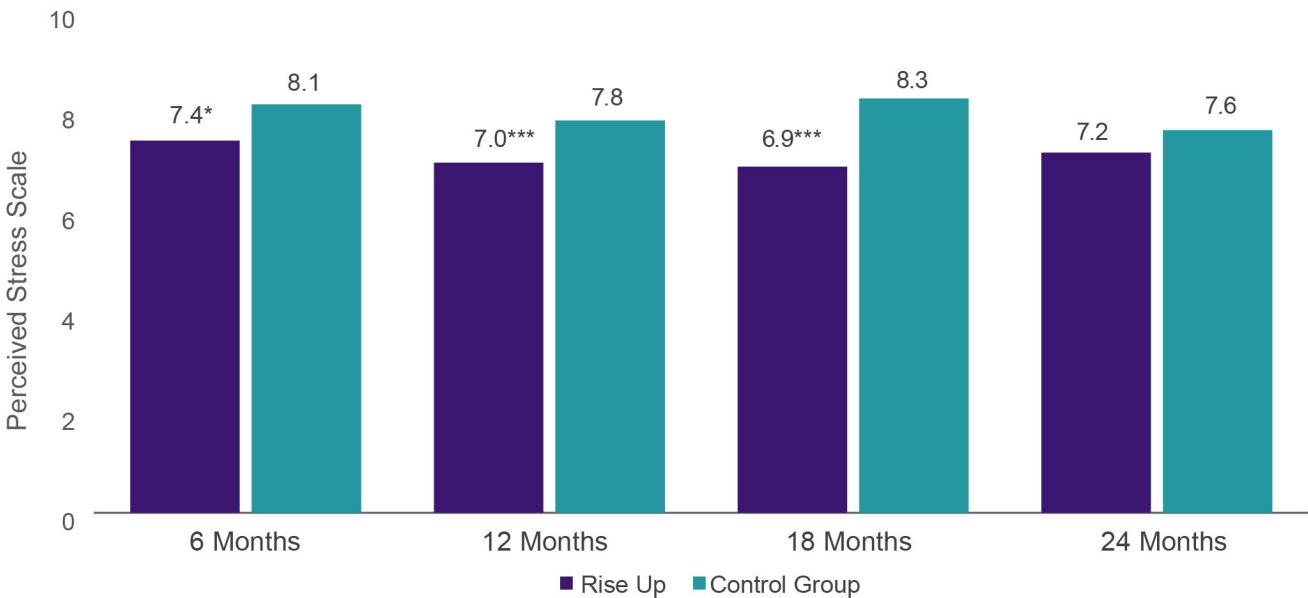
Overall, the clear pattern of differences across both measures indicates that GI reduced stress and improved mental well-being.

Exhibit 7: *Rise Up* participants reported lower levels of psychological distress



Note: Stars indicate level of statistical significance. *** = p-value less than or equal to .01, ** = p-value between .01 and .05, and * = p-value between .05 and .10

Exhibit 8: *Rise Up* participants reported lower levels of perceived stress



Note: Stars indicate level of statistical significance. *** = p-value less than or equal to .01, ** = p-value between .01 and .05, and * = p-value between .05 and .10

Findings on sense of community engagement were mixed

The evaluation also examined whether participation in *Rise Up* influenced community connection. Improved financial well-being may contribute to greater feelings of connection, and participation in the program itself may also influence perceptions of support from the City.

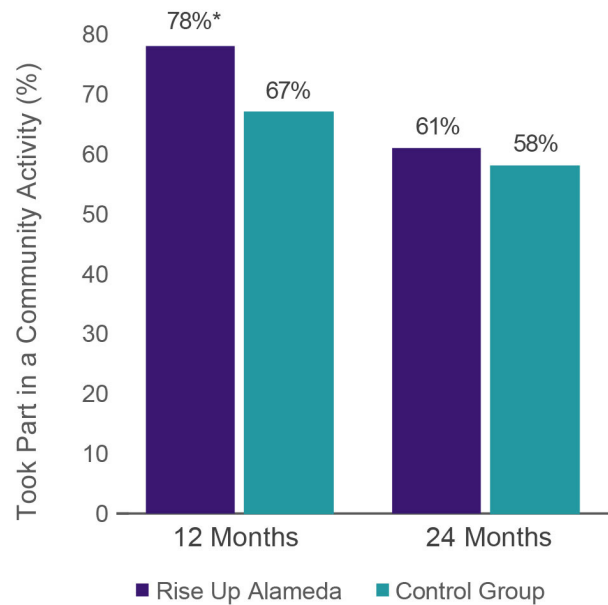
Community engagement was measured by participation in activities such as volunteering, religious groups, parent-teacher associations (PTAs), parent groups or classes, social clubs, and professional associations. The surveys also used the Brief Sense of Community Scale (BSCS),^[10] which measures feelings of belonging and connection to their community. It asks whether the respondent agrees or disagrees with statements such as, “I have a good bond with others in this neighborhood.” BCBS scores range from 8 to 40.

At 12 months, GI likely had a positive effect on engaging in community activities. However, there was no clear evidence of impact at 24 months (Exhibit 9).

Similarly, participants reported higher BSCS scores at 12 months, indicating a stronger sense of community. However, participants in the program and control groups reported similar overall BCBS scores at 24 months (Exhibit 10).

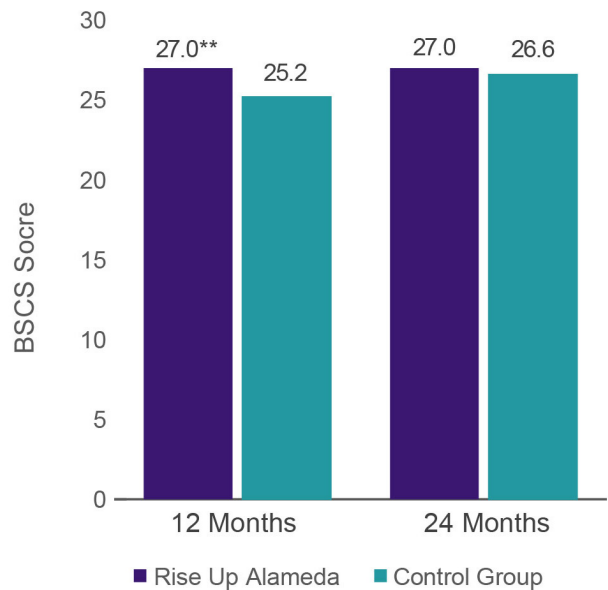
Although overall BSCS scores did not differ at 24 months, program group members reported higher levels of neighborhood needs fulfilment than members of the comparison group, one of the four BSCS subdomains. No differences were detected across the other three BSCS subdomains (Sense of Belonging, Neighborhood Influence, or Emotional Connection to Neighborhood).

Exhibit 9: Impacts on participating in volunteering or community activities



Note: Stars indicate level of statistical significance. *** = p-value less than or equal to .01, ** = p-value between .01 and .05, and * = p-value between .05 and .10

Exhibit 10. Impacts on Sense of Community



Note: Stars indicate level of statistical significance. *** = p-value less than or equal to .01, ** = p-value between .01 and .05, and * = p-value between .05 and .10

No consistent impacts on housing and food security

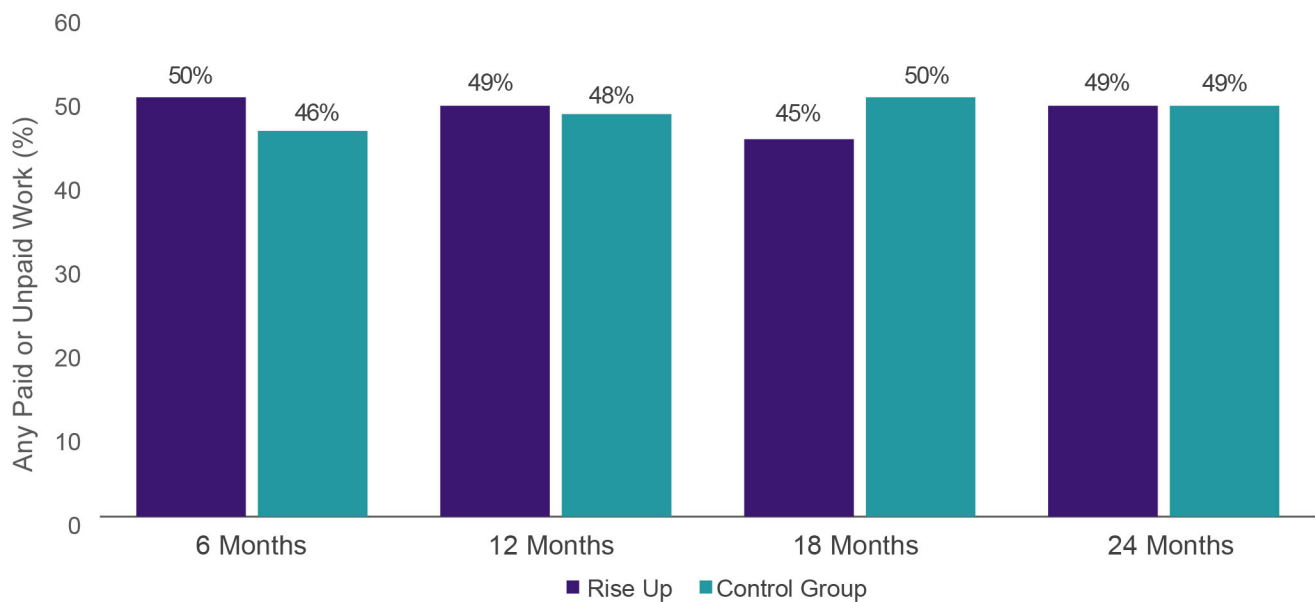
The evaluation examined five outcomes related to housing and food security, including food insecurity, housing situation (i.e., homeowner, renter, living in public housing, homeless, staying with friends or family), eviction, mortgage default, and household chaos. The study did not find clear evidence of impacts across these measures. For example, consistently high rates of food insecurity in both the program and control groups at 12 and 24 months (60% vs. 63% at 12 months; 62% vs. 67% at 24 months) suggest that, even with the additional income, low-income households continued to face trade-offs related to food spending.

Rise Up participants pursued more flexible working arrangements

Overall, GI payments did not affect whether participants were engaged in paid or unpaid work, nor did GI payments affect the number of hours participants worked per week. The share of individuals reporting any work involvement was similar across the program and control groups at all survey waves, with no statistically significant differences between the groups observed (Exhibit 11).

Additionally, the average number of hours worked per week was similar for the program and control groups at both 12 and 24 months (Exhibit 12). The modest reductions in the average number of hours worked for the program group (1.4 hours per week at 12 months; 2.4 hours per week at 24 months) were not statistically significant. Together, these

Exhibit 11. *Rise Up* participants and control group members had similar levels of work involvement

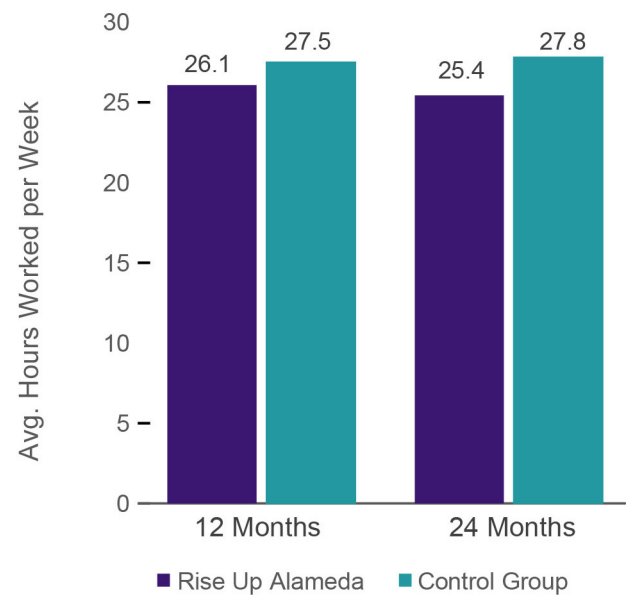


Note: Stars indicate level of statistical significance. *** = p-value less than or equal to .01, ** = p-value between .01 and .05, and * = p-value between .05 and .10

findings suggest that GI payments did not have a meaningful impact on the overall level of work involvement for members of the program group.

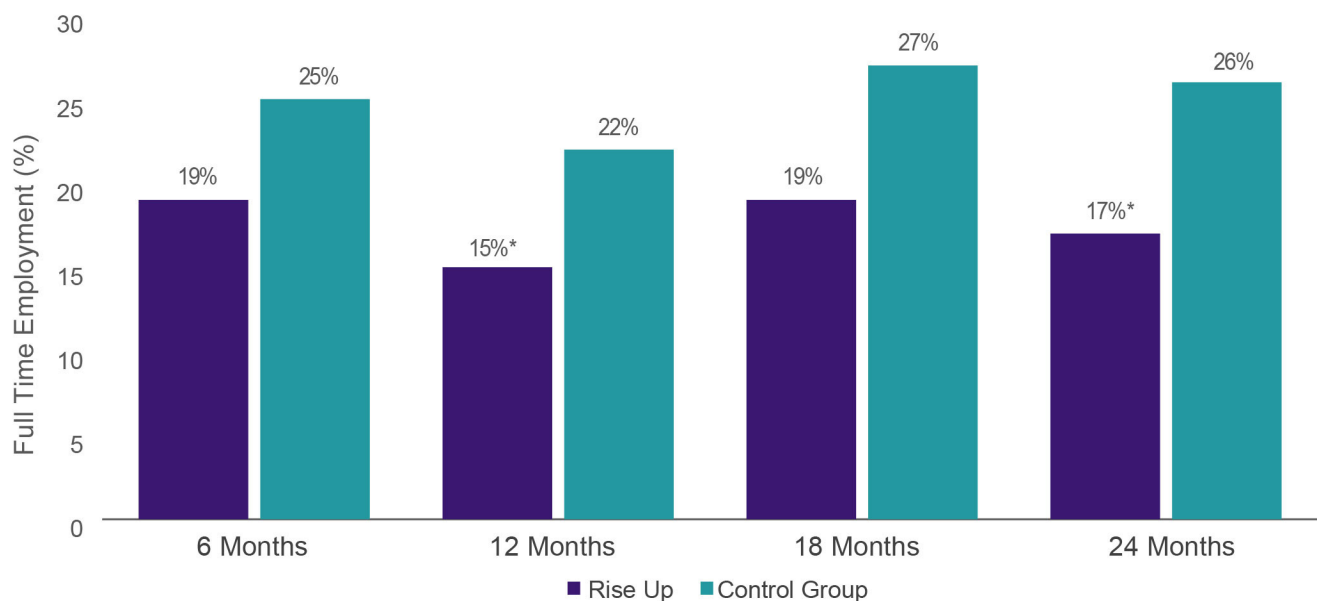
However, GI appears to have influenced *how* participants worked. Participants were less likely to report working full time at 12 and 24 months (Exhibit 13) and were more likely to report working part time at 6 and 24 months (Exhibit 14). These findings suggest that participants may have used the additional income to pursue more flexible work arrangements.

Exhibit 12. On average, *Rise Up* participants and control group members worked a similar number of hours per week



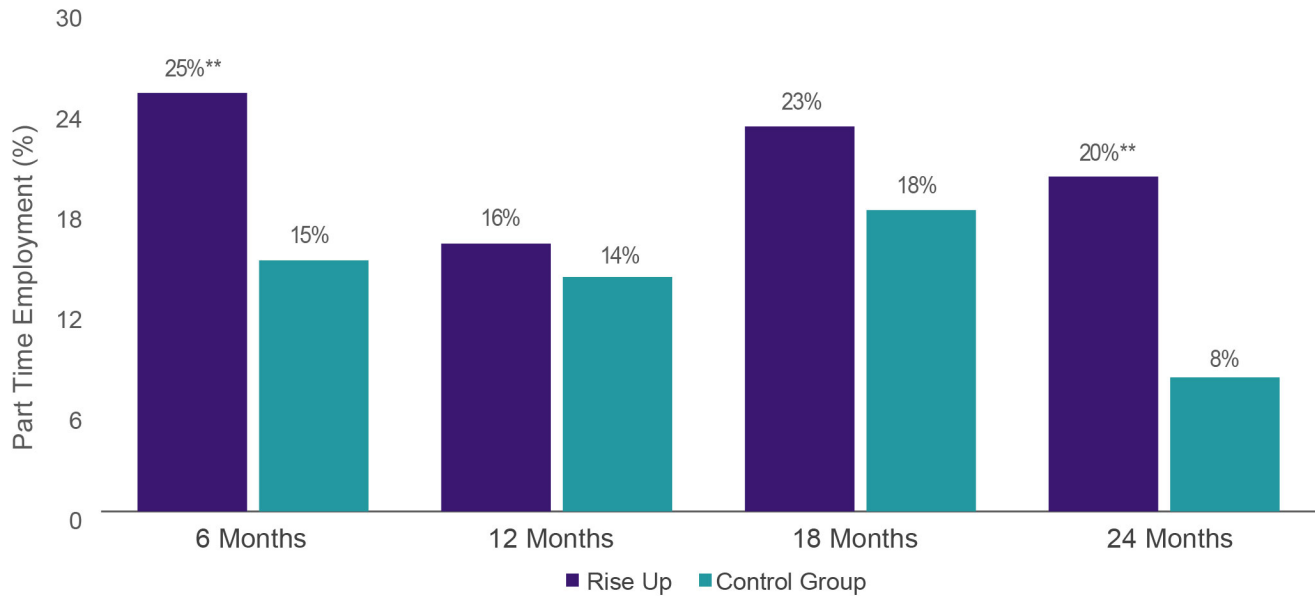
Note: Stars indicate level of statistical significance. *** = p-value less than or equal to .01, ** = p-value between .01 and .05, and * = p-value between .05 and .10

Exhibit 13. *Rise Up* participants were less likely to report working full time



Note: Stars indicate level of statistical significance. *** = p-value less than or equal to .01, ** = p-value between .01 and .05, and * = p-value between .05 and .10

Exhibit 14. *Rise Up* participants were more likely to report working part time



Note: Stars indicate level of statistical significance. *** = p-value less than or equal to .01, ** = p-value between .01 and .05, and * = p-value between .05 and .10

Some impacts varied by baseline employment

At 24 months, the impacts of GI differed for participants who were employed at the start of the study (i.e., at the time they completed the baseline survey) for seven outcomes. Of these seven outcomes, we observed consistent patterns at both 12 and 24 months for the following two outcomes:

- For those employed at the start of the study, GI may have been more effective in enabling a shift to flexible work arrangements by decreasing the share of those working full time and increasing the share of those working part time. This impact was not observed for participants who were not employed at the start of the study (those individuals were not working full time).
- Among those employed at the start of the study, GI may have been more effective at increasing participation in community activities, compared to those not employed at the start of the study.

Complete impact estimates for study participants who were employed or not employed at the start of the study are provided in Appendix Table D1.

Some impacts of *Rise Up* may vary by participants' education level

At 24 months, we found differences in *Rise Up* impacts by participant education for six outcomes in our statistical tests. This is slightly more than would be expected due to random chance. However, there was no consistency in the pattern of findings for these six outcomes at 24 months compared to 12 months.

Therefore, there is not clear evidence of systematic differences in *Rise Up* impacts by participant education. As a result, we do not report specific findings here. Complete impact estimates for study participants with more than a high school diploma or a high school diploma or less are provided in Appendix Table D2.

Findings did not suggest that older *Rise Up* participants were affected differently from working-age *Rise Up* participants

At 24 months, we found differences in *Rise Up* impacts by participant age for just four outcomes in our statistical tests, no more than might be observed due to random chance. Therefore, we do not report specific subgroup findings here. Complete impact estimates for study participants over 62 or under 62 are provided in Appendix Table D3.

Findings did not suggest that *Rise Up* participants with children were affected differently from participants without children

At 24 months, we found differences in *Rise Up* impacts by whether the participant had a child at baseline for just four outcomes in our statistical tests, no more than might be observed due to random chance. Therefore, we do not report specific subgroup findings here. Complete impact estimates for study participants with and without children at baseline are provided in Appendix Table D4.



Chapter 5: What do these results mean?

After two years of providing \$1,000 per month to 150 Alameda residents, this evaluation finds that guaranteed income (GI) led to several improvements in participants' lives. This study examined 40 outcome measures and found evidence of improvements in 17 outcomes at 12 months (42 percent) and 10 outcomes at 24 months (25 percent).

As noted in the previous chapter, this report documents consistent and sustained impacts across five outcomes related to savings, debt, employment flexibility, psychological distress, and perceived stress. The key findings from this evaluation are:

- GI payments helped *Rise Up* Alameda participants increase their savings, with more participants reporting having at least \$500 in savings.
- GI improved financial resilience, with fewer participants reporting that they were going into debt.
- GI payments may have enabled participants to pursue more flexible part-time work arrangements without causing detectable reductions to participants' overall engagement in work or their average number of hours worked per week.
- GI payments improved some aspects of mental health and wellbeing, with participants reporting lower levels of psychological distress and perceived stress.
- GI payments decreased utilization of certain public benefits, with participants less likely to report receiving SSI, SNAP, WIC, or SSDI benefits in the preceding 12 months.

Findings on the relationship between GI payments and community engagement were mixed. At 12 months, participants were more likely to report engaging in community activities and to feel a sense of belonging in their community. However, those differences were not clearly evident at 24 months. Additional research is needed to better understand how GI may influence community engagement over time.

The study did not find consistent evidence of impacts on housing or food security outcomes. Although GI payments increased savings, these gains may not have been sufficient to support a change in housing status, such as purchasing a home or moving out of a shared living arrangement. Similarly, comparable rates of food insecurity in both the program and control groups suggest that, even with the additional income, low-income households continued to face trade-offs related to food spending.

Subgroup analyses suggest that the impact of GI may vary by certain demographic groups, but few clear and consistent patterns emerged. Future research with larger sample sizes is needed to better understand how GI impacts differ across populations.

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