

OPENRESEARCH UNCONDITIONAL INCOME STUDY (ORUS)

Initial Findings

September 2024

BACKGROUND

The **OpenResearch Unconditional income Study (ORUS)** began in November 2020 and ended in October 2023. ORUS provided a guaranteed income of \$1,000 per month to a randomly selected group of 1,000 study participants (referred to as the “treatment group” below). ORUS also provided \$50 per month to a randomly selected group of 2,000 study participants (referred to as the “control group” below). The study was designed as a randomized controlled trial (RCT) and compared these two groups of participants over the course of three years.

Participants in ORUS were recruited from a **mix of urban, suburban and rural counties** in Illinois and Texas. Study participants are representative of the populations of these two states on several important dimensions. Eligibility criteria for ORUS required that participants be **between 21 and 40 years old** at enrollment, and that their household income be **less than 300 percent of the federal poverty line**. Most study participants learned about the program through mailers sent to residential addresses.

ORUS collected data on participant outcomes via surveys and secured consent to access commercial and administrative data at a later date. The study benefits from **survey response rates that are very high** at every follow-up period (90 percent and higher) and very similar for both groups.

STRENGTHS & LIMITATIONS

- ORUS distributed \$1,000 per month for three years, which is a **higher level of cash assistance** for a **longer duration** than many guaranteed income pilots that launched during and after the pandemic.
- Because survey response rates are unusually high and very similar for the treatment and control groups, **comparisons across the two groups are very reliable**. Additionally, because the study sample is broadly representative of two large and diverse states, ORUS can help us understand how a guaranteed income might benefit low-to-moderate income Americans on average. *The study's size limits our ability to draw definitive conclusions about how such supports affect specific groups in our society (e.g., racial and ethnic minorities).*
- Because the study focused on younger adults, ORUS can also help us to understand how a guaranteed income might affect family formation, children, or long-term career trajectories. *The study does not allow us to draw conclusions about how such supports might affect older adults.* Additionally, because most study participants learned about the program through the mail, *the study does not address how a guaranteed income might benefit individuals who are homeless.*
- Finally, ORUS launched before vaccines against COVID-19 were widely available. Policies aimed at slowing the spread of COVID-19, as well as individual concerns about contracting the virus, may have shaped participant behavior in the earlier years of the study that might be less relevant today. Nevertheless, given the design of the study, the comparisons between treatment and control groups remain robust and reliable within the context of the study.

KEY TAKEAWAYS

- Guaranteed income recipients **increase reported consumption by at least \$310 per month**, with the greatest increases to spending on basic needs such as **food, rent and transportation**. They report **greater financial health and less volatile consumption patterns**.
 - **Savings account balances for members of the treatment group increase by \$1,000-\$2,300 over the course of the study**. At the same time, members of the treatment also **borrow more**, with the result that **overall household net worth may be slightly lower** for individuals who receive guaranteed income support.
- Individuals who receive a guaranteed income **initially report improvements in their mental health, but this effect diminishes** by the end of the study.
- Individuals who receive guaranteed income support report **higher overall income, but slightly lower earned income**.
 - While employment rates and income increase over the course of the three-year study for both treatment and control groups, increases in the treatment group were not as large as increases in the control group.
 - On average, the employment rate for members of the treatment group is two percentage points lower during years two and three, and those who are employed work an average of 1.3 fewer hours per week. This results in a **five percent reduction in earned income**, which is small relative to the support provided.
 - There is *suggestive evidence* that this reduction is driven by individuals under the age of 30, who are four percentage points less likely to work and work an average of 1.8 fewer hours per week. There is also *suggestive evidence* that enrollment in postsecondary education increases for this group, which may explain lower rates of employment.
- **Individuals who are unemployed report being more likely to actively search for a job** while receiving a guaranteed income, and more likely to have applied for a job. However, they **also apply to fewer jobs**.
 - This might be explained by individuals receiving a guaranteed income exercising **more selectivity** about the jobs they apply for. Nevertheless, receiving a guaranteed income does not appear to affect job quality at the end of the study.
- Individuals who received a guaranteed income expressed **greater interest in starting a business**, but there is **no statistically significant effect on business creation**.

KEY TAKEAWAYS CONTINUED

- Individuals who received guaranteed income support were **11 percent more likely to move neighborhoods** and **10 percent more likely to move housing units**. Guaranteed income recipients were also **more likely to pay for their own housing** (as opposed to living with family and friends), and this **effect appears to be largest for the lowest-income individuals**.
- Individuals who receive a guaranteed income show no reported improvements to physical health after 36 months. Individuals who receive a guaranteed income report being more likely to see a specialist, including being **10 percent more likely to receive dental care**. Members of the treatment group are also more likely to report visiting an emergency department and spend about \$20 per month more on medical care. Individuals receiving guaranteed income do report drinking more on average but are also **20 percent less likely to report drinking that interferes with responsibilities**. This benefit appears to be greatest for men.

OPEN QUESTIONS

The findings summarized above largely rely on surveys conducted through October 2023. Data collection is ongoing, and the initial papers on ORUS do not speak to long-term outcomes and omit several important outcomes that will be explored in the future with administrative, commercial, additional survey, and qualitative data in the future. Importantly, these early findings do not speak to benefits for other members of the household, including children.

TO LEARN MORE

[OpenResearch Lab website](#)

[Does Income Affect Health? Evidence from a Randomized Controlled Trial of a Guaranteed Income](#) (NBER Working Paper)

[The Employment Effects of a Guaranteed Income: Experimental Evidence from Two U.S. States](#) (NBER Working Paper)

[The Impact of Unconditional Cash Transfers on Consumption and Household Balance Sheets: Experimental Evidence from Two US States](#) (NBER Working Paper)

