Minneapolis Guaranteed Basic Income (GBI) Pilot Program Evaluation 18-Month Questionnaire

What characteristics and measures does this questionnaire capture, and where did questionnaire items come from?

Demographic information

Eligibility-related demographic information that is related to ongoing eligibility
- ZIP code

Demographic information that is <u>not</u> related to ongoing eligibility
- Current household size
- Marital/cohabitation status
- Education and job training

Items for these constructs are drawn from the U.S. Census Bureau's Household Pulse Survey, American Community Survey (ACS), and Current Population Survey (CPS). The list of neighborhoods was populated from the City of Minneapolis' website (see https://www.nrp.org/R2/index.html), with multi-neighborhood entries separated. Items about job training were created for this evaluation.

Housing
- Housing affordability
- Physical characteristics of housing
- Housing stability
- Moves

Items for these constructs are drawn from the U.S. Census Bureau's Household Pulse Survey, American Community Survey (ACS), American Housing Survey (AHS), and a McKinney-Vento housing stability screener for public school students. Items about moves were created for this evaluation.

Employment
- Labor force status (employed, unemployed, out of the labor force)
- Earnings and hours at main job and additional jobs

Items for these constructs are drawn from the Current Population Survey (CPS). Items about additional job(s) other than a main job were created for this evaluation.

Household finances
- Subjective financial well-being
- Giving and/or receiving financial support
- Savings and financial security (ability to weather shocks)
- Access to safe credit and financial services
- Debt
- Changes in financial decision-making (payment group participants only)
- Payment interactions with other benefits (payment group participants only)

Items for these constructs are drawn from the Federal Reserve's Survey of Household Economics and Decisionmaking (SHED) and the Current Population Survey (CPS). Items about non-work income were created for this evaluation. Items about changes in financial decision-making were created for this evaluation based on reporting categories and Minneapolis-Saint Paul response patterns in the Bureau of Labor Statistics' Consumer Expenditure Survey. An item about payment interactions with other benefits was created for this evaluation.

Well-being and health
- General health and subjective well-being
- Access to transportation
- Food security
- Health care use and access
- Mental health

As measures of health status constructs, this section uses the Kessler 10 non-specific psychological distress scale and items from the General Social Survey (GSS) and Behavioral Risk Factor Surveillance System (BRFSS) questionnaires.

As measures of food security constructs, this section uses the U.S. Department of Agriculture's Food Security Survey Module six-item short form.

As measures of health care use and access constructs, items are drawn from the Federal Reserve's Survey of Household Economics and Decisionmaking (SHED).

A transportation item was created for this evaluation.

Household information: For up to ten named household members:
- Age
- Relationship to GBI reference person
- Education and job training activity
- Work activity

Items for this section are drawn from the U.S. Census Bureau's Household Pulse Survey, American Community Survey (ACS), and Current Population Survey (CPS). Items about job training were created for this evaluation.

Operational notes

Current Minneapolis residence status is the only information collected on this survey that may affect a respondent's eligibility for payments. If a respondent reports a residence outside of Minneapolis, the City will follow up with them. Other data elements—including those related to eligibility upon program entry—do not affect ongoing eligibility.

Field names shown below are not visible to respondents.

Items marked [TO-CLEAN] will be removed entirely or stripped of information that could identify an individual respondent (that is, personally identifiable information (PII)) before data transfer to the Fed team. This applies to all fields into which a respondent is able to enter text or numbers. This is partially because, as of the baseline survey, the mobile version of Smartsheet was not able to enforce data validation (e.g., requiring that content entered in a field be a number).

Items marked [EDIT 18MO] or [NEW 18MO] reflect any edits and additions, respectively, to this survey relative to the twelve-month survey.

For items marked [FOLLOWUP], some responses will require the City to contact a respondent.

For accessibility, resourcing, and audit reasons, respondents requiring translation support will be paired with a live translator rather than receiving translated written documents. Respondents are directed by text at the top of the page in the six supported languages to the City's GBI communication channels.

Instructional text that appears to respondents is highlighted below in green. In some cases, this text only appears based on certain answer choices, the conditions of which are noted.

More information

A detailed pre-analysis plan for the data collected using this instrument is registered with the American Economic Association (https://www.socialscienceregistry.org/trials/11369). Current project contacts and further information are available on the Minneapolis Fed website.

Introductory text

Winter 2024 Basic Income Pilot Program Survey

The information you share below will help the City of Minneapolis understand how a guaranteed basic income (GBI) program could affect people's lives.

The survey should take about 20 to 30 minutes. Please complete it all at one time, because you will not be able to save your answers and come back later.

Please complete this survey by the end of the day on **Friday, January 26th, 2024**.

More information about the GBI pilot program can be found here. If you have more questions or would like to complete this survey in a language other than English (Español, Hmoob, Soomaaliga, ລາວ, Oromiffa, Tiếng Việt) please contact XXX at GBI@minneapolismn.gov or 612-XXX-XXXX.

Data Practices Advisory

As a person who previously took a survey for the City of Minneapolis's Guaranteed Basic Income Program ("the program"), we are asking you to take a follow-up survey. We are asking you to provide this information for program evaluation purposes. Information about your current address will also be used to confirm your continuing eligibility. You are not required to take the survey, but the information you provide is very important to understanding how the program affects people's lives.

Some of the information requested may be considered "private" data under the Minnesota Government Data Practices Act (the "Act") and some of it may be considered "public" data under the Act. The data that you will be asked to provide includes the following information about you and members of your household:

- Identity and contact information
- demographic information
- housing information
- health screening questions/access to healthcare
- education information
- employment information
- financial well-being information

This information may be shared with the City of Minneapolis staff and its contractors whose jobs require them to see it, the Federal Reserve Bank and its contractors for purposes of conducting research and program evaluation, and the United States Department of Treasury if required for program reporting or audit purposes. Where access to the data is authorized by federal or state law or court order, it may be made available to others as so authorized. Information that is deemed "public" under the Minnesota Government Data Practices Act may also be released to the public to the extent required by law.

By checking the box below, I declare that I have read and understood this information.

ACKNOWLEDGEMENT *[checkbox]*

Basic information

GEN_EMAIL [data validation as email] [TO-CLEAN]

What is the email address where you received the link to this survey?

GEN_PARTID [data validation as number] [TO-CLEAN]

Please enter the ID number from the email you received that contained the link to this survey.

GEN_RESPWHO

Are you answering the questions on this survey for yourself, or for someone else?

- Answering for myself
- Answering on behalf of someone else

[IF GEN_RESPWHO == "…someone else"]
It is usually best for accuracy if the person who received the survey link completes the survey for themselves. If possible, please ask them to do so. However, if that is not the right choice for this person, please mark the checkbox below and continue.
GEN_RESPPROX_CHK [checkbox]

For this person, it is better if they do NOT complete the survey for themselves.

[IF GEN_RESPPROX_CHK == TRUE]
GEN_RESPPROXREL

Which of the following best describes your relationship to the person who received the link to this survey?

- Friend or relative
- Community based organization staff
- Other
- Don't know or prefer not to answer

[IF GEN_RESPPROXREL == "Other"]
GEN_RESPPROXREL_OTH [TO-CLEAN]

How would you describe your relationship to the person who received the link to this survey?

[IF GEN_RESPPROX_CHK == TRUE]
GEN_RESPPROXREAS

For which reason(s) are you helping the person who received the link to this survey complete it? Please select all that apply. What you share here may help improve accessibility in the future.

- Helping with technology
- Helping with language/translation
- Person who received the link is not available

- Other
- Don't know or prefer not to answer

[IF GEN_RESPPROXREL == "Other"]
GEN_RESPPROXREAS_OTH [TO-CLEAN]

Please share more about the reason(s) why you are helping the person who received the link to this survey complete it.

[IF GEN_RESPPROX_CHK == TRUE]
GEN_LANG

In which language is this survey being completed? If you are translating for the person who received the link to this survey, please select the language in which they are mostly answering the questions.

- English
- Hmong
- Lao
- Oromiffa
- Somali
- Spanish
- Vietnamese
- Other

[IF GEN_LANG == "Other"]
GEN_LANG_OTH [TO-CLEAN]

In which language is the survey being completed?

[IF GEN_RESPPROX_CHK == TRUE] display:
Thank you. For all of the remaining questions on the survey, please answer on behalf of the person who received the link to this survey. For example, for the question "What is your first name?", please provide that person's first name, not your own.

GEN_RESPNAMEF [TO-CLEAN]

What is your first name?

GEN_RESPNAMEL [TO-CLEAN]

What is your last name?

DEMO_ADDZIP [FOLLOWUP]

What is the ZIP code where you live? Below, select the ZIP code where you stay all or most of the time.

- 55403
- 55404
- 55405
- 55407
- 55411
- 55412
- 55413
- 55430
- 55454

- My ZIP code is not on this list
- Don't know or prefer not to answer

DEMO_ADDLIVE [TO-CLEAN]

What is the address where you live? Please share a physical address (not a PO box).

DEMO_PHONENUM [TO-CLEAN]

What is the best phone number to reach you?

GBI_GROUP

How have you been involved in the City of Minneapolis' GBI pilot?

- I was asked to participate in surveys only and have NOT been receiving monthly payments
- I have been regularly receiving monthly payments
- Other or don't know

[IF GBI_GROUP == "I was asked to participate in surveys only, and have NOT been receiving monthly payments"]
GBI_GETSURVPAY [FOLLOWUP]

Eligible people who complete this survey are entitled to a $150 payment for sharing their time and opinions. Did you complete an eligibility verification process AND receive a $150 payment for completing a GBI survey at some point in the past?

- Yes, I completed an eligibility verification process AND have received payment for completing a survey
- No, I have not yet received payment for completing a survey
- Other or don't know

[IF GBI_GETSURVPAY == "Yes, I completed an eligibility verification process AND have received payment for completing a survey"] display:
Since you have already received payment for completing a survey, no further eligibility verification is required. You will receive $150 for completing this survey.

[IF GBI_GETSURVPAY == "No, I have not yet received payment for completing a survey"] display:
A City representative will contact you to complete a brief process to verify that you live in Minneapolis and meet income rules. Once your verification is complete, you will receive $150 for this survey AND $150 for each survey you may have already completed.

[IF GBI_GETSURVPAY == "Other or don't know" OR GBI_GROUP == "Other or don't know"] display:
A City representative will review your information to better understand your situation and contact you if needed.

[IF GBI_GROUP == "I have been regularly receiving monthly payments"] display:
The next few questions will help the City better understand your personal experience of receiving GBI payments. There are no right or wrong answers.

[IF GBI_GROUP == "I have been regularly receiving monthly payments"]
GBI_CHOICES_OPEN [TO-CLEAN]

The GBI payments you receive have no rules about how the money is spent. Please share your thoughts about how this has—or has not—affected how you think about money choices in your household.

[IF GBI_GROUP == "I have been regularly receiving monthly payments"]
GBI_SPENDCAT1

Since you began receiving monthly GBI payments, which of the things below would you say has been the MOST IMPORTANT use of the extra money?

[IF GBI_GROUP == "I have been regularly receiving monthly payments"]
GBI_SPENDCAT2

Since you began receiving monthly GBI payments, which of the things below would you say has been the SECOND MOST IMPORTANT use of the extra money?

[IF GBI_GROUP == "I have been regularly receiving monthly payments"]
GBI_SPENDCAT3

Since you began receiving monthly GBI payments, which of the things below would you say has been the THIRD MOST IMPORTANT use of the extra money?

- Child care
- Clothing
- Debt: Paying it down
- Education (not including child care)
- Entertainment
- Food at home
- Food away from home (restaurants)
- Healthcare
- Housing: Shelter, such as rent or mortgage
- Housing: Utilities, such as gas, electric, water, and Internet
- Housing: Other household items
- Transportation: Gas/fuel and oil
- Transportation: Vehicle purchases, payments, or repairs
- Saving
- Sharing the money with others
- Other category not listed
- Don't know or prefer not to answer

[IF GBI_SPENDCAT1 == "Other" OR GBI_SPENDCAT2 == "Other" OR GBI_SPENDCAT3 == "Other"]
GBI_SPENDCAT_OTH [TO-CLEAN]

Please share more about the most important uses of the extra money to you.

[IF GBI_GROUP == "I have been regularly receiving monthly payments"]
GBI_ASSTCHNG [FOLLOWUP]

Have the $500 monthly GBI payments caused any changes to other income-based forms of assistance that you may be receiving? Examples could include changes to things like SNAP, WIC, housing vouchers (Section 8), and child care assistance.

- Yes
- No
- Don't know or prefer not to answer

[IF GBI_ASSTCHNG == "Yes"]
GBI_ASSTCHNG_OPEN [TO-CLEAN]

Please share more about the changes to other income-based forms of assistance caused by the $500 monthly GBI payments. This will help the City understand how different types of support do or do not work together.

GBI_OVERALL_OPEN [TO-CLEAN]

[IF GBI_GROUP != "I have been regularly receiving monthly payments"]
Compared to ONE YEAR AGO, how would you describe your current household financial situation?

[IF GBI_GROUP == "I have been regularly receiving monthly payments"]
Compared to just before you began receiving GBI payments, how would you describe your current household financial situation?

More about you

DEMO_MARLIVSTAT

Which of the following best describes your current living situation?

- Legally married, spouse living with you
- Living with partner, but not legally married
- Not living with partner (for example, single, separated, divorced, or widowed)
- Don't know or prefer not to answer

Household" means the people you live with and with whom you share resources. Do not count roommates, friends, or other people with whom you do not share resources.

HH_COUNT

How many total people—adults and children—currently live in your household, INCLUDING yourself?

- 1 person (just you)
- 2 people (you and one other person)
- 3 people
- 4 people
- 5 people
- 6 people
- 7 people
- 8 people
- 9 people
- 10 people
- 11 or more people
- Don't know or prefer not to answer

HH_OTH

Are there other people who are NOT part of your household living or staying with you? This could include roommates, friends, or other people with whom you do NOT share resources.

- Yes
- No
- Don't know or prefer not to answer

[IF HH_OTH == "Yes"]
HH_OTHCOUNT

How many people who are NOT part of your household are living or staying with you?

- 1 non-household person

- 2 non-household people
- 3 non-household people
- 4 non-household people
- 5 non-household people
- 6 non-household people
- 7 non-household people
- 8 non-household people
- 9 non-household people
- 10 non-household people
- 11 or more non-household people
- Don't know or prefer not to answer

EDUC_SCHATT6

At any time IN THE LAST 6 MONTHS, have you attended school or college? Include only schooling that leads to a high school diploma or a college degree. Do not count job training programs, which we will ask about later.

- Yes
- No
- Don't know or prefer not to answer

EDUC_SCHCOMP

What is the highest degree or level of school you have completed?

- Less than 8th grade
- Less than a high school diploma
- High school diploma or equivalent (for example: GED)
- Some college but no degree
- Associate's degree (for example: AA, AS)
- Bachelor's degree (for example: BA, AB, BS)
- Master's degree (for example: MA, MS, MEng, MEd, MSW, MBA)
- Professional school degree (for example: MD, DDS, DVM, LLB, JD)
- Doctorate degree (for example: PhD, EdD)
- Don't know or prefer not to answer

EDUC_TRAINATT6

At any time IN THE LAST 6 MONTHS, have you attended a job training program? Examples could include trade school (such as cosmetology school), a job-focused "boot camp," or a youth job program like Step Up.

- Yes, full-time
- Yes, part-time
- No
- Don't know or prefer not to answer

[IF EDUC_TRAINATT6 == "Yes, full-time" OR "Yes, part-time"]
EDUC_TRAINCOMP6

Did you successfully complete this program?

- Yes
- No, but still attending
- No, and not currently attending

- Don't know or prefer not to answer

WORK_ANYMONTH

In the LAST MONTH, did you do ANY work for either pay or profit?

- Yes
- No
- Don't know or prefer not to answer

Housing

The questions in this section will ask you about where you live. Please think of the place where you stay most or all of the time.

The first few questions will ask about your **housing costs.**

HOUSE_CURR

Which of the following best describes the place where you live?

- House
- Apartment
- Other
- Don't know or prefer not to answer

[IF HOUSE_CURR == "Other"]
HOUSE_CURR_OTH [TO-CLEAN]

How would you describe the place where you live?

[IF HOUSE_CURR == "House" OR "Apartment"]
HOUSE_OWNRENT

Is the house or apartment where you are living...

- Owned by you or someone in your household with a mortgage or loan? Include home equity loans.
- Owned by you or someone in your household free and clear (that is, without a mortgage or loan)?
- Rented by you?
- Occupied without payment of rent?
- Don't know or prefer not to answer

[IF HOUSE_OWNRENT == "Owned...with a mortgage or loan" OR "Rented by you"]
HOUSE_COSTMO [TO-CLEAN]

In a typical MONTH, about how much does your household spend on rent or mortgage? Please use your best guess to enter the dollar amount below. If you don't know or prefer not to answer, please mark the checkbox below.

HOUSE_COSTMO_OPTOUT *[checkbox]*
Monthly rent or mortgage: Don't know or prefer not to answer

[IF HOUSE_OWNRENT == "Owned...with a mortgage or loan" OR "Rented by you"]

HOUSE_AFFORD6

During the LAST 6 MONTHS, how often was it difficult for your household to afford your rent or mortgage?

- Never
- 1 or 2 months
- 3 or 4 months
- 5 or 6 months
- Don't know or prefer not to answer

[IF HOUSE_OWNRENT == "Owned...with a mortgage or loan" OR "Rented by you"]
HOUSE_LATE6

In the LAST 6 MONTHS, was your household ever late or behind in paying its rent or mortgage?

- Yes
- No
- Don't know or prefer not to answer

The next few questions will ask about your **physical housing situation.**

HOUSE_BEDROOMS

In the place where you live, how many bedrooms are there?

- 0 bedrooms
- 1 bedroom
- 2 bedrooms
- 3 bedrooms
- 4 bedrooms
- 5 bedrooms
- 6 or more bedrooms
- Don't know or prefer not to answer

HOUSE_CROWD

In the place where you live, think about the number of people and the space that there is. In your opinion, are there more people staying here than can live comfortably in this unit?

- Yes
- No
- Don't know or prefer not to answer

HOUSE_INST6

In the LAST 6 MONTHS, has your household experienced any of these living situations? Please select all that apply.

- Moving from place to place/couch surfing
- In a house or apartment with another family
- Hotel/motel
- Shelter
- A car, park, campsite, or similar location
- Transitional housing
- In a residence with inadequate facilities (for example, no water, heat, and/or electricity)

- Other housing uncertainty or instability
- None of the above
- Don't know or prefer not to answer

HOUSE_MOVEFWORRY6

During the LAST 6 MONTHS, how often would you say your household was worried or stressed about being forced to move? "Forced moves" may be caused by evictions (or the threat of eviction), foreclosures, or housing being condemned.

- Never
- Rarely
- Sometimes
- Usually
- Always
- Don't know or prefer not to answer

HOUSE_MOVE6

In the LAST 6 MONTHS, have you moved?

- Yes
- No
- Don't know or prefer not to answer

[IF HOUSE_MOVE6 == "Yes"]
HOUSE_MOVE6REAS

Did you move because... Please select all that apply.

- Forced to move or thought you might be (for example: anticipated or experienced eviction, foreclosure, or condemned housing)
- Makeup of household changed (for example: marriage, divorce, new child)
- Wanted to change location
- Wanted or needed lower housing costs
- Wanted better housing amenities
- Other
- Don't know or prefer not to answer

[IF HOUSE_MOVE6REAS == "Other"]
HOUSE_MOVE6REAS_OTH [TO-CLEAN]

Please share more about your reason(s) for moving.

Employment

The questions in this section will ask about your work activities.

WORK_ANYWEEK

LAST WEEK, did you do any work for either pay or profit?

- Yes
- No
- Don't know or prefer not to answer

[IF WORK_ANYWEEK == "No"]
WORK_TEMPABS

Did you NOT work for pay or profit LAST WEEK because you were temporarily absent from your job? For example, you have a job but did not work due to reasons such as vacation, illness, childcare problems, maternity or paternity leave.

- Yes
- No
- Don't know or prefer not to answer

[IF WORK_TEMPABS == "No" OR WORK_TEMPABS == DK/PNTA]
WORK_TEMPLAY

Did you NOT work for pay or profit LAST WEEK because you were on temporary layoff from your job? Temporary layoff means that your employer expects you to return to work within the next 6 months or at some other specific date.

- Yes
- No
- Don't know or prefer not to answer

[IF WORK_TEMPLAY == "No" OR WORK_TEMPLAY == DK/PNTA]
WORK_UNPAYFAM

Although you did NOT work for pay or profit LAST WEEK, did you do any unpaid work in a family business?

- Yes
- No
- Don't know or prefer not to answer

[IF WORK_UNPAYFAM == "No" OR WORK_UNPAYFAM == DK/PNTA]
WORK_SEARCH

Have you been doing anything to find work during the LAST 4 WEEKS?

- Yes
- No
- Don't know or prefer not to answer

[IF WORK_UNPAYFAM == "No" OR WORK_UNPAYFAM == DK/PNTA]
WORK_AVAIL

LAST WEEK, could you have started a job if one had been offered?

- Yes
- No
- Don't know or prefer not to answer

[IF WORK_UNPAYFAM == "No" OR WORK_UNPAYFAM == DK/PNTA]
WORK_NOTREAS

What is your main reason for not working for pay or profit LAST WEEK? Please select only one answer. If there are multiple reasons you didn't work, choose the primary reason.

- In school or training
- Retired
- Health limitations or disability
- Childcare
- Other family or personal obligations
- Looking for work
- Other
- Don't know or prefer not to answer

[IF WORK_NOTREAS == "Other"]
WORK_NOTREAS_OTH [TO-CLEAN]

Please share more about your main reason for not working for pay or profit LAST WEEK.

[IF WORK_ANYWEEK == "Yes" OR WORK_TEMPABS == "Yes"]
For the next questions, think of your main job: the job from which you earned the most income in the past MONTH.

[IF WORK_ANYWEEK == "Yes" OR WORK_TEMPABS == "Yes"]
WORK_MAINFTPT

At your main job, do you usually work full-time or part-time?

- Usually full-time
- Usually part-time
- Don't know or prefer not to answer

[IF WORK_ANYWEEK == "Yes" OR WORK_TEMPABS == "Yes"
WORK_MAINHRWK

At your main job, about how many hours per week do you usually work? Please use your best guess to select the number of weekly hours below.

- Less than 1 hour per week
- [Dropdown with single-hour "hours per week" 1 to 100]
- More than 100 hours per week
- Don't know or prefer not to answer

[IF WORK_ANYWEEK == "Yes" OR WORK_TEMPABS == "Yes"]
WORK_MAINEARNPERIOD

The next question will ask about your earnings BEFORE taxes and other deductions at your main job. Which of the following time periods is the best way for you to report these earnings?

- Hourly
- Weekly
- Every two weeks
- Twice monthly
- Monthly
- Annually
- Don't know or prefer not to answer

[IF WORK_MAINEARNPERIOD != DK/PNTA]
WORK_MAINEARNAMT [data validation as number] [TO-CLEAN]

What is your best estimate of your rate of pay at your main job, BEFORE taxes or other deductions?

> [IF WORK_MAINEARNPERIOD == "Hourly"] display:
> per hour. Enter dollars and cents as accurately as you can.
> [IF WORK_MAINEARNPERIOD == "Weekly"] display:
> per week. Enter dollar value as accurately as you can.
> [IF WORK_MAINEARNPERIOD == "Every two weeks"] display:
> every two weeks. Enter dollar value as accurately as you can.
> [IF WORK_MAINEARNPERIOD == "Twice monthly"] display:
> twice per month. Enter dollar value as accurately as you can.
> [IF WORK_MAINEARNPERIOD == "Monthly"] display:
> once per month. Enter dollar value as accurately as you can.
> [IF WORK_MAINEARNPERIOD == "Annually"] display:
> per year. Enter dollar value as accurately as you can.

[IF WORK_ANYWEEK == "Yes" OR WORK_TEMPABS == "Yes"]
WORK_ANYADDLWK

In the last week, did you do additional work for pay or profit OTHER THAN your main job? This could include another job, "gig" work such as driving, or any other way of earning money.

- Yes
- No
- Don't know or prefer not to answer

[IF WORK_ANYADDLWK == "Yes"]
WORK_ADDLHRWK

EXCLUDING your main job, about how many hours per week do you usually work at other jobs? Please use your best guess to select the number of weekly hours below.

- Less than 1 hour per week
- [Dropdown with single-hour "hours per week" 1 to 100]
- More than 100 hours per week
- Don't know or prefer not to answer

[IF WORK_ANYADDLWK == "Yes"]
WORK_ADDLEARNWK [data validation as number] [TO-CLEAN]

EXCLUDING your main job, about how much are your weekly earnings from other jobs? Please use your best guess to enter a dollar amount below. If you don't know or prefer not to answer, please mark the checkbox below.

WORK_ADDLEARNWK_OPTOUT *[checkbox]*
Earnings at other job(s): Don't know or prefer not to answer

Household finances

The questions in this section will ask you some questions about your savings, debt, and other parts of your financial situation.

FIN_OVERALL

Overall, which one of the following best describes your household's financial situation?

- Living comfortably
- Doing okay
- Just getting by
- Finding it difficult to get by
- Don't know or prefer not to answer

The next few questions will ask about how your household gives and receives **financial support.**

FIN_HOUSEINCNOWORKYN

[IF GBI_GROUP != "I have been regularly receiving monthly payments"]
IN THE LAST 6 MONTHS, did your household get income from sources other than working? This could include public assistance programs, support from family or friends, or other sources.

[IF GBI_GROUP == "I have been regularly receiving monthly payments"]
IN THE LAST 6 MONTHS, excluding your GBI payments, did your household get income from sources other than working? This could include public assistance programs, support from family or friends, or other sources.

- Yes
- No
- Don't know or prefer not to answer

[IF FIN_HOUSEINCNOWORKYN == "Yes"]
FIN_ HOUSEINCNOWORKAMT

IN THE LAST 6 MONTHS, about how much income did your household get PER MONTH from these sources? Please use your best guess to choose a dollar amount below.

- Less than $100 per month
- Between $100 and $249 per month
- Between $250 and $499 per month
- Between $500 and $749 per month
- Between $750 and $999 per month
- Between $1000 and $1249 per month
- Between $1250 and $1499 per month
- Between $1500 and $1749 per month
- Between $1750 and $1999 per month
- $2000 or more per month
- Don't know or prefer not to answer

FIN_SUPPFOOD6

During the LAST 6 MONTHS, has your household received free groceries or meals through a food pantry, religious organization, or community organization?

- Yes
- No
- Don't know or prefer not to answer

FIN_SUPPFINORG6

During the LAST 6 MONTHS, has your household received financial assistance from a religious organization or community organization?

- Yes
- No

- Don't know or prefer not to answer

FIN_SUPPFINPERS6

During the LAST 6 MONTHS, has your household received financial assistance from friends or family members not living with you?

- Yes
- No
- Don't know or prefer not to answer

FIN_SUPPFINPERSPROV

Do members of your household PROVIDE regular financial support to anyone living outside of your household (such as a parent, child, other relatives, or friends)? This may include cash or help with rent, groceries, education expenses, student loans, car payments, or other expenses.

- Yes
- No
- Don't know or prefer not to answer

FIN_SAVE3MO

The next few questions will ask about your household's response to **unexpected expenses**.

Has your household set aside emergency funds that would cover your expenses for 3 MONTHS in the case of sickness, job loss, economic downturn, or other emergencies?

- Yes
- No
- Don't know or prefer not to answer

[IF FIN_SAVE3MO == "No"]
FIN_COVER3MO

If your household were to lose its main source of income (for example job or government benefits), could your household cover its expenses for 3 MONTHS by borrowing money, using savings, or selling assets?

- Yes
- No
- Don't know or prefer not to answer

FIN_400HOW

Suppose that your household has an emergency expense that costs $400. Based on your household's current financial situation, how would your household pay for this expense? Select all that apply.

- Put it on my credit card and pay it off in full at the next statement
- Put it on my credit card and pay it off over time
- With the money currently in my checking/savings account or with cash
- Using money from a bank loan or line of credit
- By borrowing from a friend or family member
- Using a payday loan, deposit advance, or overdraft
- By selling something
- I wouldn't be able to pay for the expense right now
- Some other way

- Don't know or prefer not to answer

FIN_PAYBILL

Which best describes your household's ability to pay all of its bills in full THIS MONTH?

- Able to pay all bills
- Can't pay some bills
- Don't know or prefer not to answer

The next few questions will ask about your household's **use of credit and financial services.**

FIN_CREDMONORD

In the LAST 6 MONTHS, did anyone in your household purchase a money order from a place other than a bank?

- Yes
- No
- Don't know or prefer not to answer

FIN_CREDCHCASH

In the LAST 6 MONTHS, did anyone in your household cash a check at a place other than a bank?

- Yes
- No
- Don't know or prefer not to answer

FIN_CREDPAYDAY

In the LAST 6 MONTHS, did anyone in your household take out a payday loan or payday advance?

- Yes
- No
- Don't know or prefer not to answer

FIN_CREDLOAN

In the LAST 6 MONTHS, did anyone in your household take out a pawn shop loan or an auto title loan?

- Yes
- No
- Don't know or prefer not to answer

FIN_CC

Do you currently have at least one credit card?

- Yes
- No
- Don't know or prefer not to answer

[IF FIN_CC == "Yes"]
FIN_CCBALFREQ6

In the LAST 6 MONTHS, how frequently have you carried an unpaid balance on one or more of your credit cards?

- Never carried an unpaid balance (always pay in full)
- Once
- Some of the time
- Most or all of the time
- Don't know or prefer not to answer

FIN_DEBTBEHIND

Are you behind on payments or in collections for one or more of your household's debt obligations? These include student loans, medical debt, mortgage, credit card debt, and "buy now, pay later" programs. Do not include rent or any debt that is in deferral or forbearance.

- Yes
- No
- Don't know or prefer not to answer

Well-being and health

The questions in this section will ask you about your access to food, access to health care, and other parts of well-being.

WELL_HEALTH

Would you say your health in general is:

- Excellent
- Very good
- Good
- Fair
- Poor
- Don't know or prefer not to answer

WELL_HAPPY

Taken all together, how would you say things are these days—would you say that you are very happy, pretty happy, or not too happy?
- Very happy
- Pretty happy
- Not too happy
- Don't know or prefer not to answer

WELL_SATIS

In general, how satisfied are you with your life?
- Very satisfied
- Satisfied
- Dissatisfied
- Very dissatisfied
- Don't know or prefer not to answer

WELL_TRANS

To what extent would you say you have access to reliable transportation that allows you to meet your daily needs?

- Always
- Often
- Sometimes
- Rarely
- Never
- Don't know or prefer not to answer

The next few questions will ask about your household's **food situation.** For these questions, please think back over the LAST 30 DAYS.

FOOD_LAST

Please read this statement: "The food that we bought just didn't last, and we didn't have money to get more." In the LAST 30 DAYS, would you say that was often, sometimes, or never true for your household?

- Often true
- Sometimes true
- Never true
- Don't know or prefer not to answer

FOOD_BAL

Please read this statement: "We couldn't afford to eat balanced meals." In the LAST 30 DAYS, would you say that was often, sometimes, or never true for your household?

- Often true
- Sometimes true
- Never true
- Don't know or prefer not to answer

FOOD_SIZESKIP

In the LAST 30 DAYS, did you or other adults in your household ever cut the size of your meals or skip meals because there wasn't enough money for food?

- Yes
- No
- Don't know or prefer not to answer

[IF FOOD_SIZESKIP == "Yes"]
FOOD_SIZESKIPFREQ

In the LAST 30 DAYS, about how many days did this happen? Please use your best guess to select the number of days below.

- 1 day out of the last 30
- [Dropdown with single-day numbers 2 to 29]
- 30 days out of the last 30 (every day)
- Don't know or prefer not to answer

FOOD_EATLESS

In the LAST 30 DAYS, did you ever eat less than you felt you should because there wasn't enough money for food?

- Yes
- No
- Don't know or prefer not to answer

FOOD_NOEAT

In the LAST 30 DAYS, were you ever hungry but didn't eat because there wasn't enough money for food?

- Yes
- No
- Don't know or prefer not to answer

The next few questions will ask about your household's **use** of healthcare.

Think about the LAST 6 MONTHS. During this time, was there a time when anyone in your household **did** each of the following?

HEALTH_UPRESC6

Got prescription medicine?

- Yes
- No
- Don't know or prefer not to answer

HEALTH_UDOC6

Saw a doctor or specialist? Do not include dental care or mental health care.

- Yes
- No
- Don't know or prefer not to answer

HEALTH_UMENT6

Got mental health care or counseling?

- Yes
- No
- Don't know or prefer not to answer

HEALTH_UDENT6

Got dental care?

- Yes
- No
- Don't know or prefer not to answer

HEALTH_UFOLL6

Got follow-up care?

- Yes
- No
- Don't know or prefer not to answer

HEALTH_UEROOM6

Used an emergency room?

- Yes
- No
- Don't know or prefer not to answer

The next few questions will ask about your household's **access** to healthcare.

Think about the LAST 6 MONTHS. During this time, was there a time when anyone in your household needed each of the following, but went without because you couldn't afford it?

HEALTH_NPRESC6

Prescription medicine

- Yes
- No
- Don't know or prefer not to answer

HEALTH_NDOC6

Seeing a doctor or specialist. Do not include dental care or mental health care.

- Yes
- No
- Don't know or prefer not to answer

HEALTH_NMENT6

Mental health care or counseling

- Yes
- No
- Don't know or prefer not to answer

HEALTH_NDENT6

Dental care

- Yes
- No
- Don't know or prefer not to answer

HEALTH_NFOLL6

Follow-up care

- Yes

- No
- Don't know or prefer not to answer

HEALTH_NEROOM6

Emergency room visit

- Yes
- No
- Don't know or prefer not to answer

The next few questions will ask about your **feelings and mental health**. For these questions, please think back over the LAST 30 DAYS. Your responses will help the City understand how the GBI pilot program could affect people's mental health.

HEALTH_KTIRED

During the last 30 days, how often did you feel tired out for no good reason?

- None of the time
- A little of the time
- Some of the time
- Most of the time
- All of the time
- Don't know or prefer not to answer

HEALTH_KNERV

During the last 30 days, how often did you feel nervous?

- None of the time
- A little of the time
- Some of the time
- Most of the time
- All of the time
- Don't know or prefer not to answer

HEALTH_KCALM

During the last 30 days, how often did you feel so nervous that nothing could calm you down?

- None of the time
- A little of the time
- Some of the time
- Most of the time
- All of the time
- Don't know or prefer not to answer

HEALTH_KHOPE

During the last 30 days, how often did you feel hopeless?

- None of the time
- A little of the time
- Some of the time
- Most of the time
- All of the time

- Don't know or prefer not to answer

HEALTH_KREST

During the last 30 days, how often did you feel restless or fidgety?

- None of the time
- A little of the time
- Some of the time
- Most of the time
- All of the time
- Don't know or prefer not to answer

HEALTH_KSTILL

During the last 30 days, how often did you feel so restless that you could not sit still?

- None of the time
- A little of the time
- Some of the time
- Most of the time
- All of the time
- Don't know or prefer not to answer

HEALTH_KDEPR

During the last 30 days, how often did you feel depressed?

- None of the time
- A little of the time
- Some of the time
- Most of the time
- All of the time
- Don't know or prefer not to answer

HEALTH_KCHEER

During the last 30 days, how often did you feel so depressed that nothing could cheer you up?

- None of the time
- A little of the time
- Some of the time
- Most of the time
- All of the time
- Don't know or prefer not to answer

HEALTH_KEFFORT

During the last 30 days, how often did you feel that everything was an effort?

- None of the time
- A little of the time
- Some of the time
- Most of the time
- All of the time
- Don't know or prefer not to answer

HEALTH_KWORTH

During the last 30 days, how often did you feel worthless?

- None of the time
- A little of the time
- Some of the time
- Most of the time
- All of the time
- Don't know or prefer not to answer

Your household	*Operational notes (not visible to respondents):*
	- *Questions in this section repeat for each named member of a household*
	- *The number of sets of questions displayed is controlled by the number of household members the respondent identifies in "General information" (e.g., the Person #3 set of questions displays only for those respondents who say their household size—including themselves—is four or more)*
	- *The only conditional item within each item set is driven by HH_P0XREL == "Other"*

Above, you shared that your household includes people other than you. "Household" means the people you live with and with whom you share resources, such as partners, children, or extended family. It does NOT include roommates, friends, or other people in the place where you live with whom you do NOT share resources.

The questions below will ask you some questions about the people in your household, one person at a time. This is the last section of the survey.

For the next few questions, think of a person in your household other than yourself. We will call them **Person #1.**

HH_P0XAGEY

How many years old is Person #X? Please use your best guess to select their age below.

- Under 18 years old
- [Dropdown with single-year ages 18 to 100]
- Over 100 years old
- Don't know or prefer not to answer

HH_P0XREL

How is Person #X related to the person who received the link to this survey? Person #X is their…
- Spouse/Husband/Wife
- Unmarried partner
- Biological or adopted child
- Stepchild
- Foster child
- Brother or sister
- Father or mother
- Grandchild
- Parent-in-law

- Son-in-law or daughter-in-law
- Grandparent
- Other
- Don't know or prefer not to answer

[IF HH_P0XREL = "Other"]
HH_P0XREL_OTH [TO-CLEAN]

   Please describe Person X's relationship to the person who received the link to this survey. Person #X is their…

HH_P0XSCHATT6

   At any time in the LAST 6 MONTHS, has Person #X attended school or college? Include only nursery or preschool, kindergarten, elementary school, home school, and schooling that leads to a high school diploma or a college degree. Do not count job training programs, which we will ask about next.

   - Yes
   - No
   - Don't know or prefer not to answer

HH_P0XTRAINATT6

   At any time in the LAST 6 MONTHS, has Person #X attended a job training program? Examples could include trade school (such as cosmetology school), a job-focused "boot camp," or a youth job program like Step Up.

   - Yes, full-time
   - Yes, part-time
   - No
   - Don't know or prefer not to answer

HH_P0XWORKANYMONTH

   In the LAST MONTH, did Person #X do ANY work for either pay or profit?

   - Yes
   - No
   - Don't know or prefer not to answer

This is the end of the survey. Please check that you have answered all of the questions above before you click Submit.

Once you submit your responses, you will not be able to come back to this page.

Confirmation message

Thank you! Your survey responses have been received.

What you have shared will help the City of Minneapolis understand how a guaranteed basic income (GBI) program could affect people's lives.

To follow updates about the GBI pilot program, please visit:
https://www.minneapolismn.gov/government/programs-initiatives/basic-income/

Email receipt	*Operational notes (not visible to respondents):* • *We sent email receipts during the baseline survey wave to respondents who checked a box indicating that they wanted a receipt, as a confirmation that respondents' applications had been received* • *Such a need does not exist for post-baseline surveys, so we will not enable this feature*