

# Economic Support Strategies Part 3: Ending Cycles of Poverty

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TUESDAY, DECEMBER 10, 2024  
11 AM PT/2 PM ET



prevent  
connect  
A ValorUS® PROJECT



# Meet the PreventConnect Team



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Director of Prevention

she/her/hers



**Janae Sargent**

Project Coordinator

she/they



prevent  
connect

## **PreventConnect.org**

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[PreventConnect.org/email](https://PreventConnect.org/email) – email group

[Learn.PreventConnect.org](https://Learn.PreventConnect.org) – eLearning

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# Listen to our podcast!

QUEERING PREVENTION

Embracing Queerness as a Lens and Vehicle for Change

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Available on  Spotify  

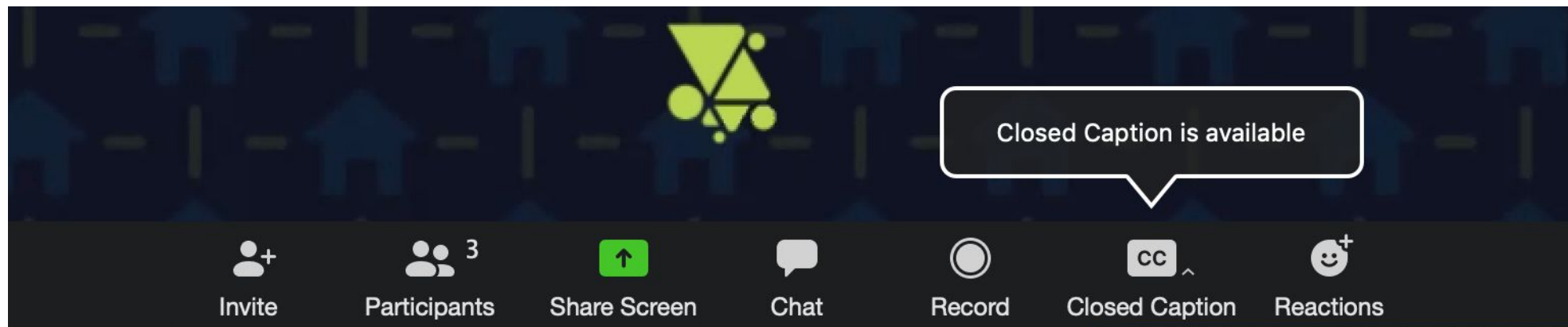
  
Brooklyn Arizmendi  
she/her  
Indiana Coalition  
Against Domestic  
Violence

  
Janae Sargent  
she/they  
PreventConnect



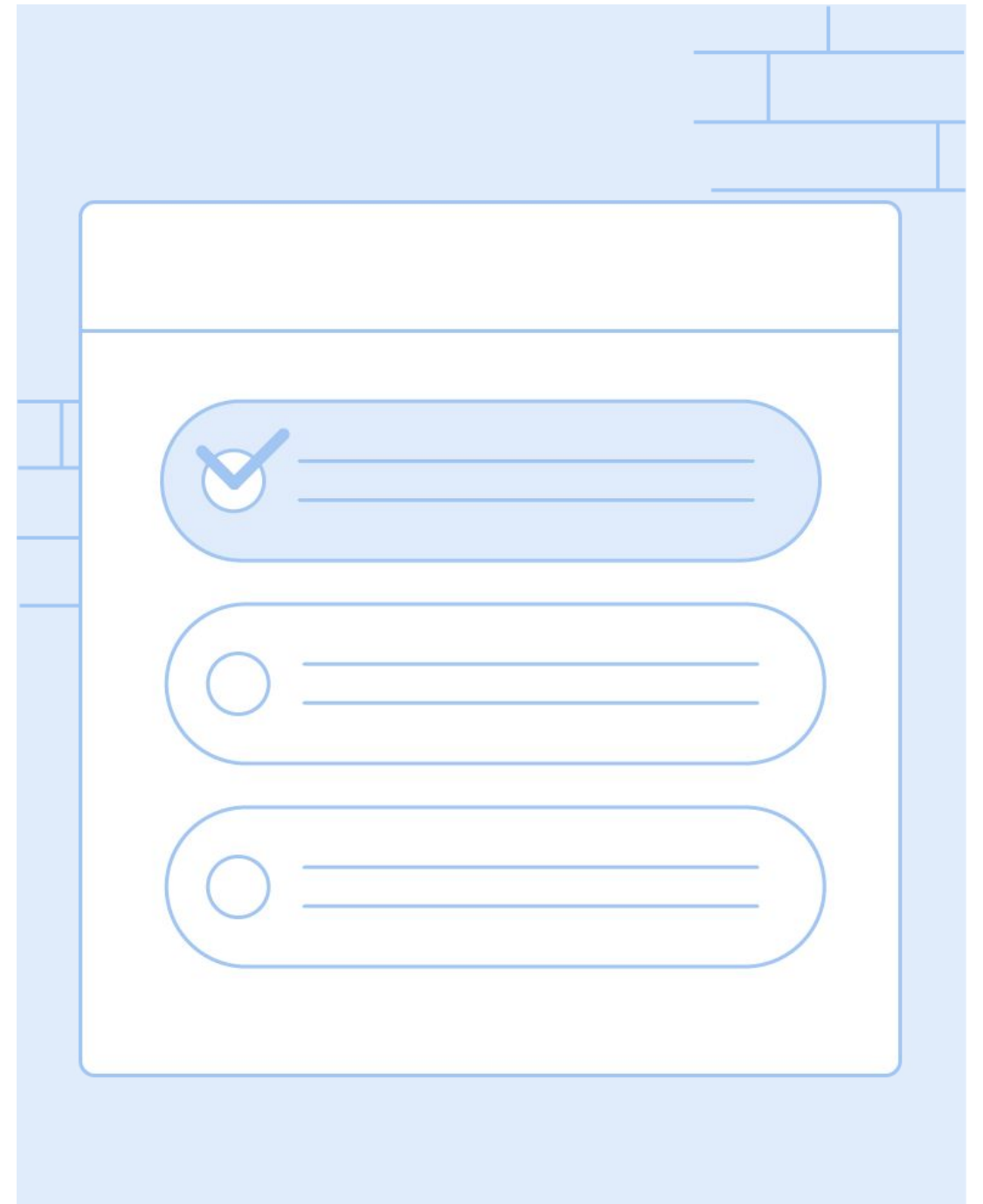
# How to use Zoom

- ▶ Text chat
- ▶ PowerPoint Slides
- ▶ Polling Questions
- ▶ Phone
- ▶ Closed Captioning
- ▶ Web Conference Guidelines



Have you attended a  
PreventConnect Web  
Conference before?

Polling Question



The diagram illustrates a polling question interface. It features a white rectangular box with rounded corners, set against a light blue background with a faint grid pattern. The box contains three vertically stacked radio button options. Each option consists of a circular radio button on the left and two horizontal lines representing text on the right. The top option is highlighted with a light blue background and contains a blue checkmark inside the radio button. The middle and bottom options have white backgrounds and empty radio buttons.

# PreventConnect

- ▶ Domestic violence/intimate partner violence
- ▶ Sexual violence
- ▶ Violence across the lifespan, including child sexual abuse
- ▶ Prevent before violence starts
- ▶ Connect to other forms of violence and oppression
- ▶ Connect to other prevention practitioners

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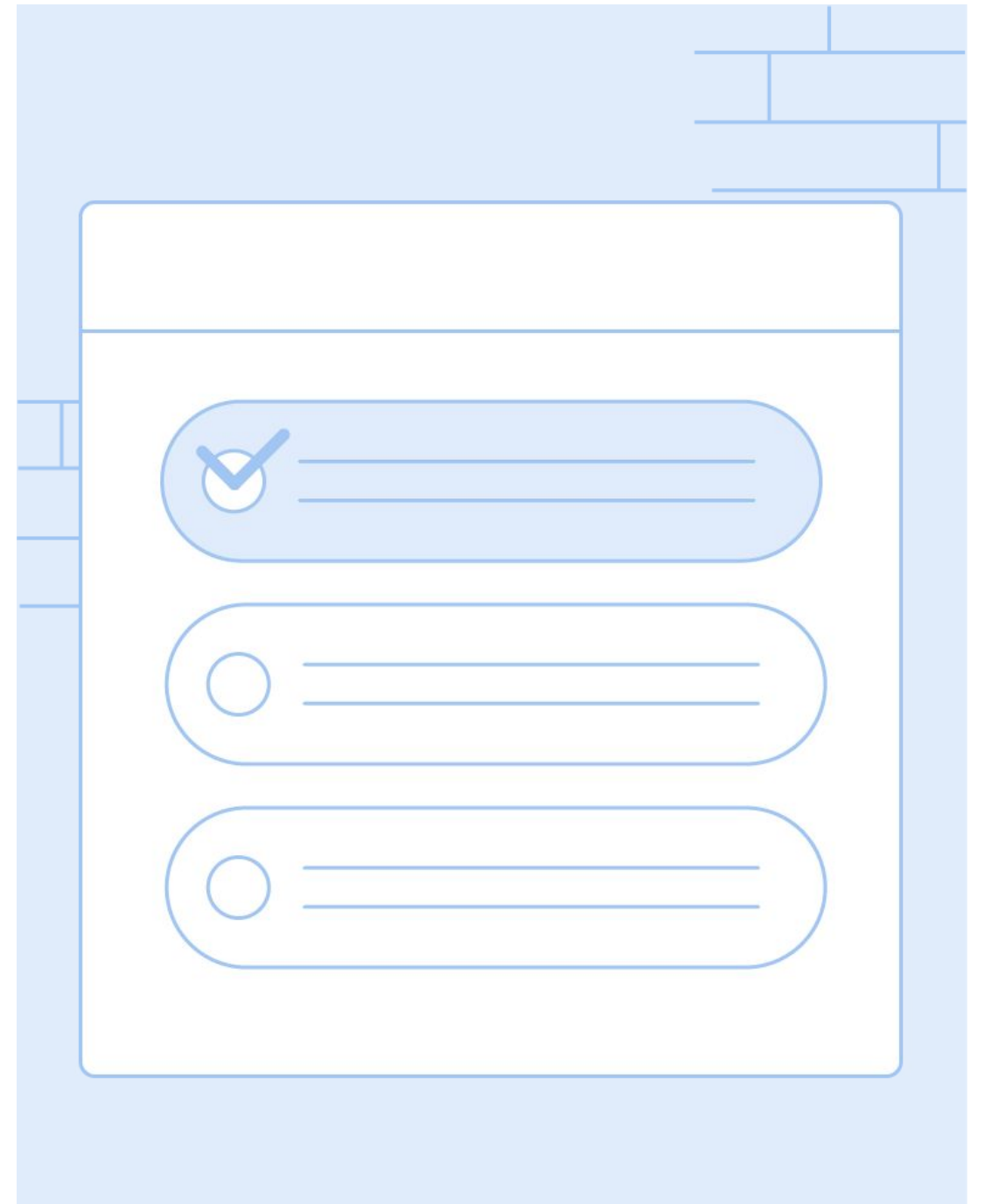


PreventConnect is a national project of ValorUS sponsored by the U.S. Centers for Disease Control and Prevention. The views and information provided in this web conference do not necessarily represent the official views of the U.S. government, CDC or VALOR.



Did you attend  
session 1 or 2, or  
watch the  
recordings?

Polling Question



The diagram illustrates a polling interface. It features a white rectangular area with rounded corners on a light blue background. At the top of this area is a white header bar. Below the header, there are three vertically stacked rounded rectangular buttons. Each button contains a radio button on the left and two horizontal lines on the right, representing text input fields. The top button has a blue checkmark inside its radio button, indicating it is the selected option. The middle and bottom buttons have empty radio buttons.

# Session 1 and 2 Recordings Available Now!

Evidence for Economic Supports



**HEALTH EQUITY & VIOLENCE PREVENTION RESOURCES**

**Back to Basics**

**A Health Equity Handbook**

**Briefing Paper**

**Interventions of Domestic Violence and Economic Security**

prevent connect

# What is Economic Security?

*And what does it have to do with sexual and intimate partner violence prevention?*

**The ability of individuals or families to satisfy their basic needs, like:**

- ▷ Food
- ▷ Housing
- ▷ Medical Care
- ▷ Stable childcare
- ▷ Fair wages



**Directly impacts**

**Sexual and Intimate Partner Violence Risk Factors, like:**

- ▷ Poverty
- ▷ Unemployment
- ▷ Financial stress
- ▷ Childcare instability
- ▷ Parental Stress
- ▷ Family conflict
- ▷ Depression
- ▷ Gender Inequality

<https://vetoviolence.cdc.gov/apps/violence-prevention-practice/node/218#!/>

# Evidence for Economic Supports

## Technical Packages for Violence Prevention



The Centers for Disease Control and Prevention (CDC) has developed technical packages to help states and communities take advantage of the best available evidence to prevent or reduce violence.

A technical package is a collection of strategies that represent the best available evidence to help stop violence before it starts. They can help improve the health and well-being of communities.

There are five technical packages to support your violence prevention efforts. Each focuses on one violence type:

- Child Abuse and Neglect
- Intimate Partner Violence
- Sexual Violence
- Suicide
- Youth Violence



**Download the technical packages today.**

Visit <https://www.cdc.gov/violenceprevention/communicationresources/pub/technical-packages.html>



**Centers for Disease Control and Prevention**  
National Center for Injury Prevention and Control

# Session 2: Spotlight on RPE and DELTA Programs



**Health and  
Human Services**





# Objectives

- Build knowledge base of economic justice and health equity.
- Explore innovative economic supports approaches to preventing multiple forms of violence and fostering equitable communities.
- Draw from lived expertise of community-based practitioners, to develop and implement culturally competent economic supports strategies and approaches to preventing violence.

# Meet Today's Guest Speakers



**Laura Clancy**  
The Bridge Project  
she/her/hers



**Sarah Blanton**  
4-CT  
she/her/hers



**Sarah Spunt**  
Lift, Chicago  
she/her/hers

# Meet Today's Guest Speakers



**Sarah Spunt**

Lift, Chicago

she/her/hers



# LIFT

**Economic Support  
Strategies for Safe  
and Equitable  
Communities:  
LIFT's Model and  
Two-Generation  
Prevention of  
Intimate Partner  
Violence**

## LIFT AT A GLANCE

### LIFT...

- was founded in 1998 and is focused on creating neighborhood spaces where families could go to get support from trained volunteers on a variety of needs; serving Chicago since 2000
- has refined our approach to this work by developing an evidence-informed coaching model that supports parents working on financial, career, educational, and well-being goals
- serves families directly in Chicago, Los Angeles, New York City, and Washington, DC and indirectly through Technical Assistance partnerships across the country

**LIFT's Mission is to  
break the cycle of  
poverty by investing  
in parents.**





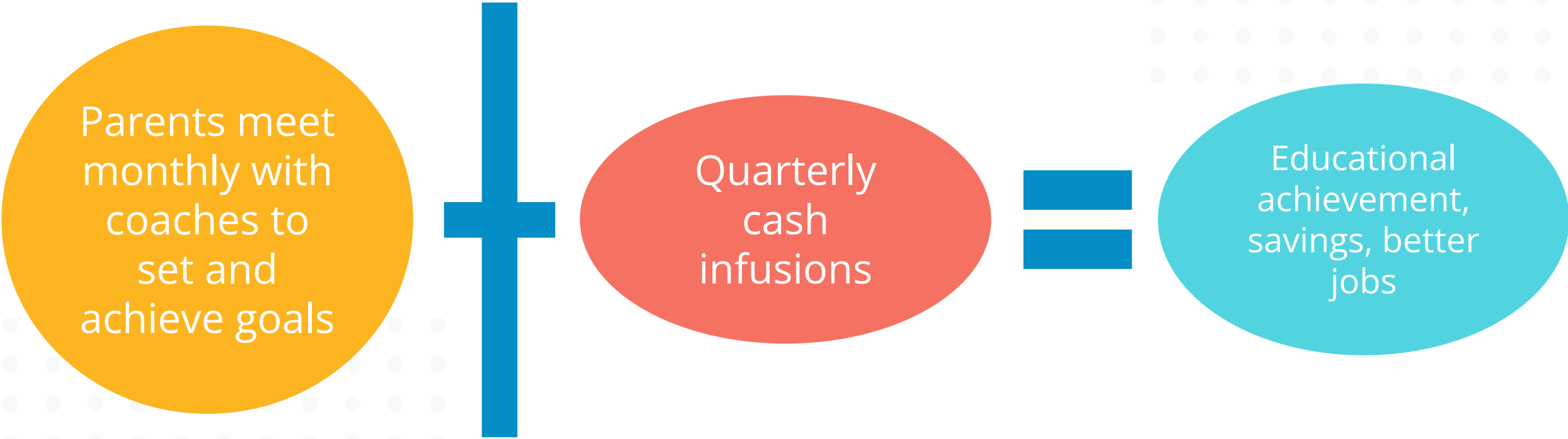
# LIFT'S APPROACH



LIFT helps families achieve their long-term goals and aspirations by connecting them with transformational coaching that meets them where they are and honors their values, priorities, and needs.

LIFT supports parents and caregivers by focusing on their personal well-being, financial strength, and social connections, all of which can provide a foundation for a family's success for generations!

# LIFT'S APPROACH



## WHERE WE STARTED

- Low income and economic stress associated with higher risk for intimate partner violence
- Cycle of violence for survivors
- Cycle of violence for children

## THE EVALUATION

- Literature review
- Quantitative analysis of quarterly LIFT member survey
- Survivor case studies review\*

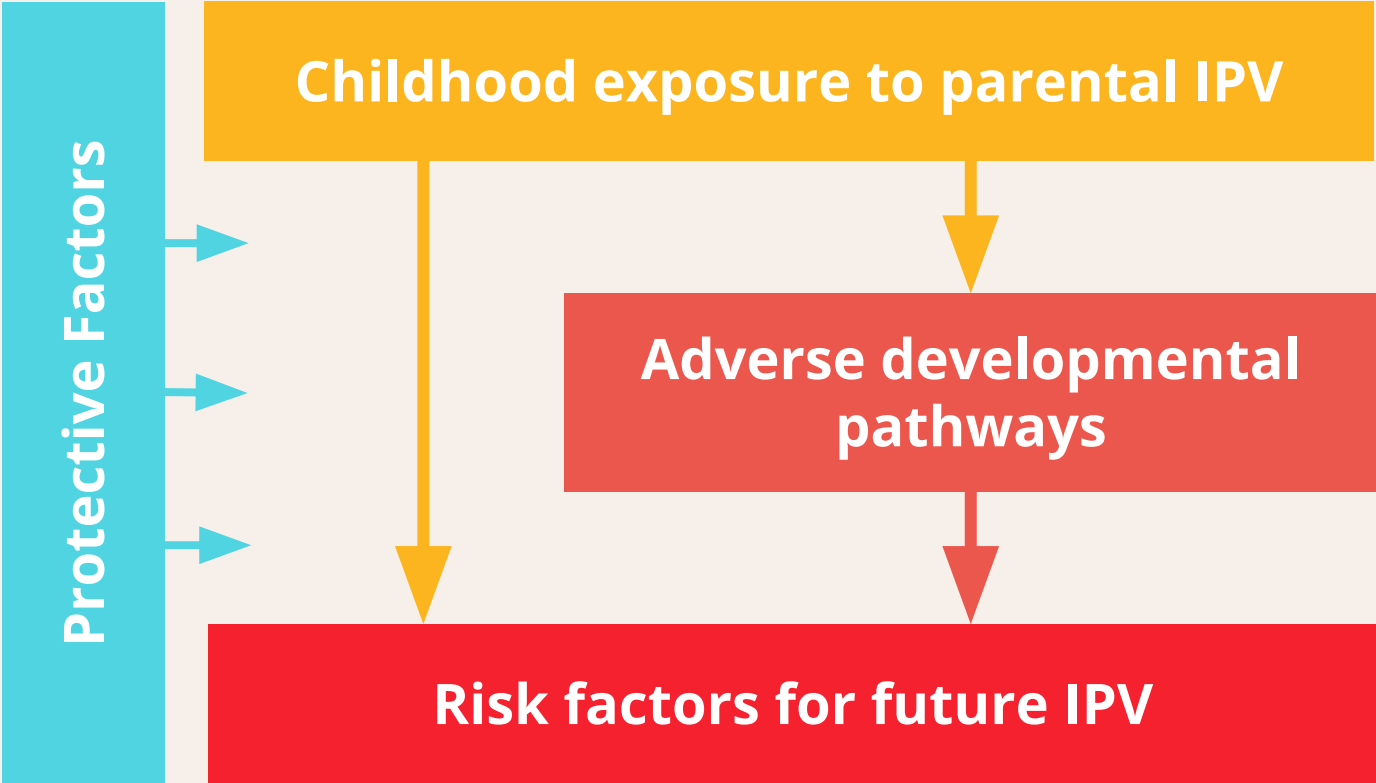
# LITERATURE REVIEW KEY FINDINGS



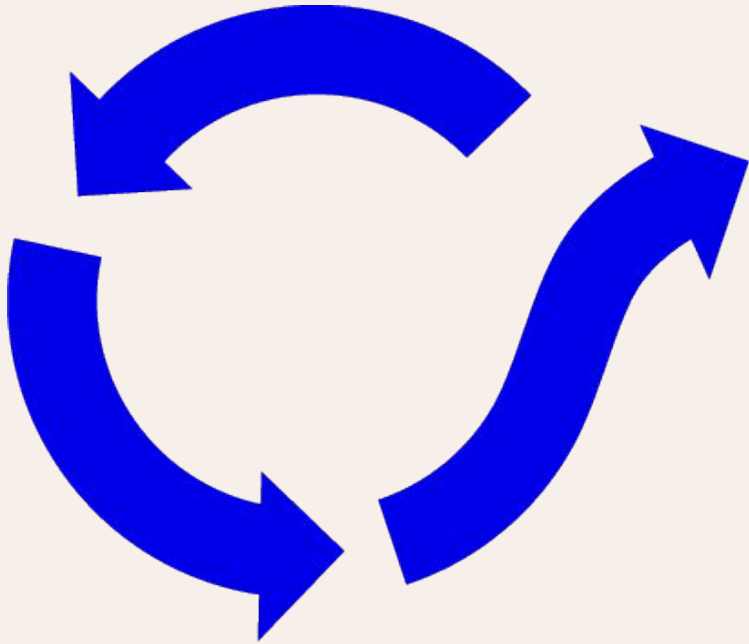
## IPV RISK AND PROTECTION

- Consensus that economic stress and low income are strong predictors of IPV risk, across racial and ethnic identities and when controlling for a variety of other factors
- Social isolation and social connection are key themes among IPV risk and protective factors
- Several dimensions of well-being prioritized by LIFT are protective factors for IPV

# INTERGENERATIONAL IPV RISK



# TWO-GENERATION APPROACHES TO PREVENTION



- Existing 2-gen approaches work with **both** generations to address **individual** and **relational** dynamics.
- No studies identified of prevention efforts that intervened on **parental economic mobility** and assessed changes in risk and protective factors or violence **outcomes among children**.

# EVALUATION RESULTS

## CONCLUSIONS

LIFT programming has **already demonstrated success** in making changes that support IPV prevention, **without any inequities by race or primary language spoken** in the assessed results.

Showed statistically significant outcomes:

- Increasing income
- Educational enrollment and achievement
- Reducing financial stress

LIFT's model of cash transfers, economic mobility coaching, and events that build social connection is a **promising, novel, and evidence-informed approach** for **preventing intimate partner violence across two generations:** for both LIFT members AND for their children.





**social determinants of health**

**shared risk and protection**

**upstream prevention**

**two-generation change**

**survivor well-being**

**adverse childhood experiences**

**root causes**

Partnering with IPV Organizations

## SPOTLIGHT: AFFORDING SURVIVAL PILOT

### **Partnership: The Network: Advocating Against Domestic Violence**

- Collaborative of 40+ organizations focused on improving lives impacted by gender-based violence.
- Areas of focus: education, public policy, advocacy, connecting community members to service providers.
- Aims to address intersections of systemic and gender-based violence.
- Operates direct cash assistance program for survivors since 2020.
- Leads service design efforts and collaborative projects with member organizations.

### **Expanding Survivor Fund Program**

- Addressing substantial economic needs of survivors for safety and independence.
- Expanding Survivor Fund to provide guaranteed basic income for selected survivors in rapid rehousing.

**Survivors will receive \$1K/mo for 12 months + support from an advocate training family economic mobility coaching**

## SPOTLIGHT: AFFORDING SURVIVAL PILOT

### **LIFT Role: Training and Technical Assistance**

- Offering training and technical assistance to domestic violence advocates to incorporate Family Economic Mobility coaching while supporting survivors
- Advising on provision of social capital and connection to financial institutions.
- Advocates will help families with economic independence and safety planning.

# AFFORDING SURVIVAL RESULTS

## Effectiveness

- **100%** of staff agree LIFT's Coaching Model is effective in the organization's context
- **100%** of staff agree the benefit of integrating LIFT's coaching model is worth the effort

## Knowledge

- **80%** of staff increased or achieved a high-level of knowledge about LIFT coaching

## Use

- **100%** of staff have used LIFT's Coaching Interventions in recent client interactions

# AFFORDING SURVIVAL RESULTS

## Client Experience

- **100%** of staff believe their clients have been receptive to LIFT's coaching approach

## Satisfaction

- 100% of staff are satisfied overall with LIFT's Technical Assistance support
- 100% of staff would recommend LIFT's Technical Assistance support to other organizations



# AFFORDING SURVIVAL RESULTS

- Staff reiterated their belief in the efficacy of coaching to help survivors achieve their goals
- Staff mentioned that their coaching practice had strengthened since the training and ongoing supports
- Staff asked for more training focused on specific financial tools and topics

THANK YOU

Questions? Follow-up?

Contact Sarah Spunt  
LIFT-Chicago, Executive Director  
[SSPUNT@WHYWELIFT.ORG](mailto:SSPUNT@WHYWELIFT.ORG)

# Meet Today's Guest Speakers



**Laura Clancy**

The Bridge Project  
she/her/hers

# THE BRIDGE PROJECT



A SCALABLE SOLUTION TO  
CHILD POVERTY



# THE BRIDGE PROJECT IS THE LARGEST CONSISTENT, UNCONDITIONAL CASH PROGRAM FOR BABIES & NEW MOTHERS IN THE NATION.

We provide low-income mothers with cash on a biweekly basis during pregnancy, birth, and the earliest days of their babies' lives to support healthy development, avoid adverse childhood experiences, and break intergenerational cycles of poverty.



# THE BRIDGE PROJECT » BY THE NUMBERS



**2,000**

Babies served and counting



**6**

States by the end of 2024



**\$60M**

Committed to date



**26**

Average age of a Bridge mom



**\$16,800**

Average household income of a Bridge mom



**96%**

Funds going into the hands of moms



# OUR EARLY IMPACT

242%

Savings increase after 6 months in the program

63%

Moved into permanent housing after 9 months if started in transitional housing

90%

Reported improved mental health and stress levels after receiving just one payment

80%

Working in a full or part time capacity after 18 months in the program

17%

Pursuing post-secondary education while in program

“This program allowed me to stay home during the week to study, take care of my baby, and go to nursing school during the weekend. I am almost done and hope to make better money in the future. It was a massive blessing.”  
– *First-time mom, unemployed*

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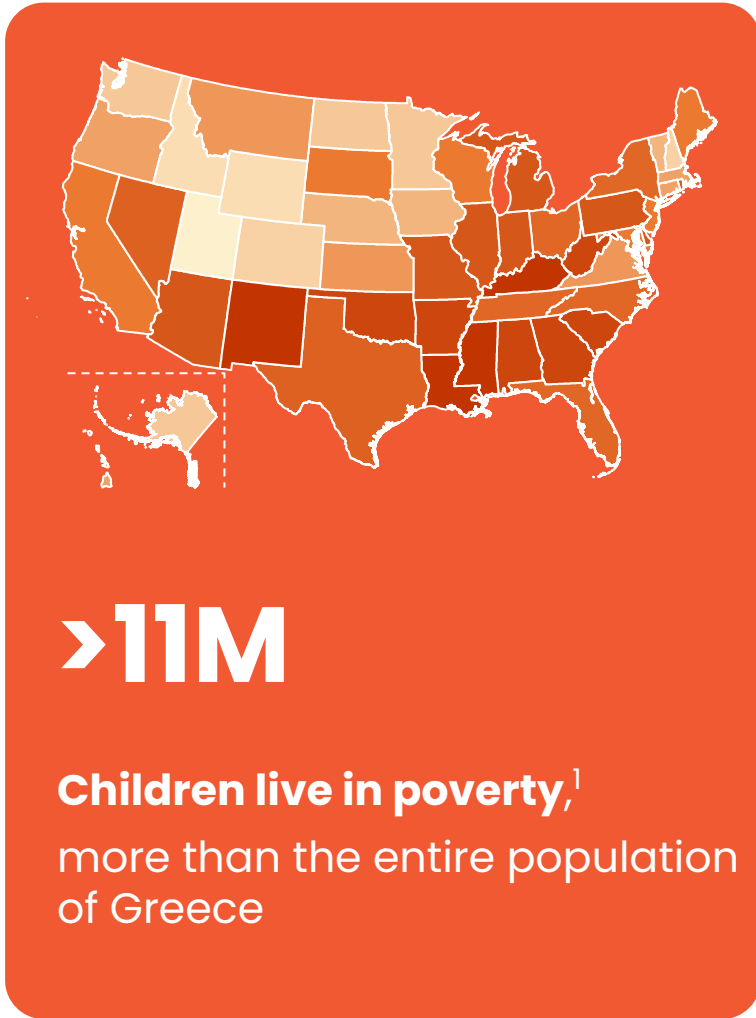
- **WHY BABIES?**

- **WHY CASH?**

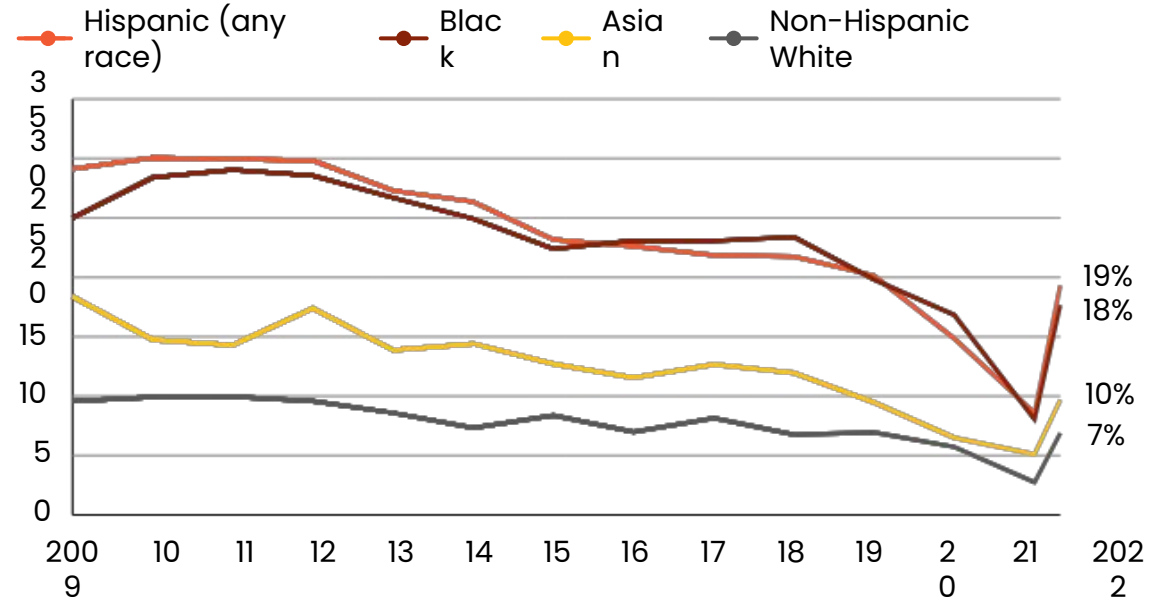
- **THE BRIDGE PROJECT » IN DEPTH**



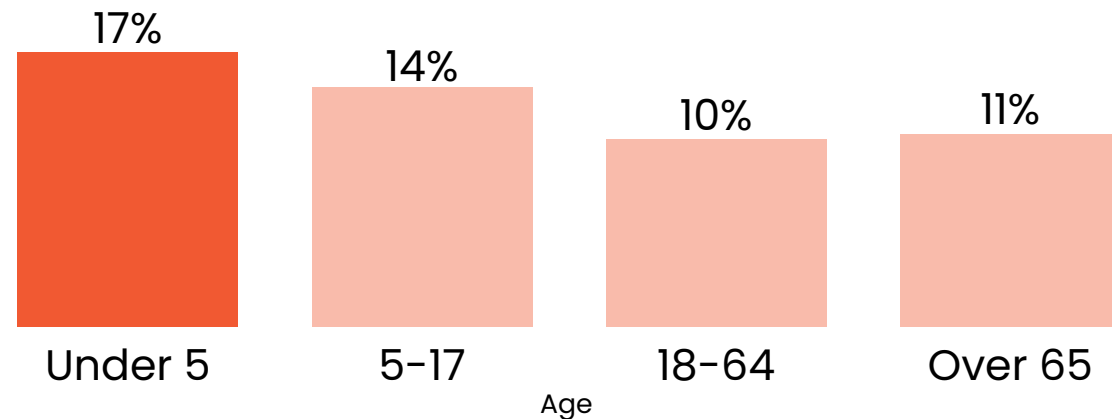
# U.S. CHILD POVERTY IS WIDESPREAD...



..and **higher** in marginalized communities




... and with our **youngest** children




1. Defined as 100% of the Federal Poverty Line  
 Source: [US Census Bureau: Poverty Status in 2023](#), [US Census Bureau: Poverty Rate by Age Group](#)


# FIRST 1,000 DAYS OF LIFE ARE CRITICALLY IMPORTANT



**25%** OF ADULT BRAIN SIZE AT BIRTH



**50%** BY AGE ONE



**80%** BY AGE THREE

"[Early experiences] have a disproportionately important impact on your long-term health and development...The child who has only two months of really bad experiences does worse than the child with almost twelve years of bad experiences, all because of the timing of the experiences."

- Dr Bruce Perry, co-author with Oprah Winfrey of "What Happened to You?"



## Education

Within 2 years of living below the poverty line, children had 8-10% less grey matter and scored 4-7 points less on standardized tests<sup>1</sup>



## Employment

Those who were persistently poor in childhood were 30% less likely to be consistently employed in young adulthood<sup>2</sup>

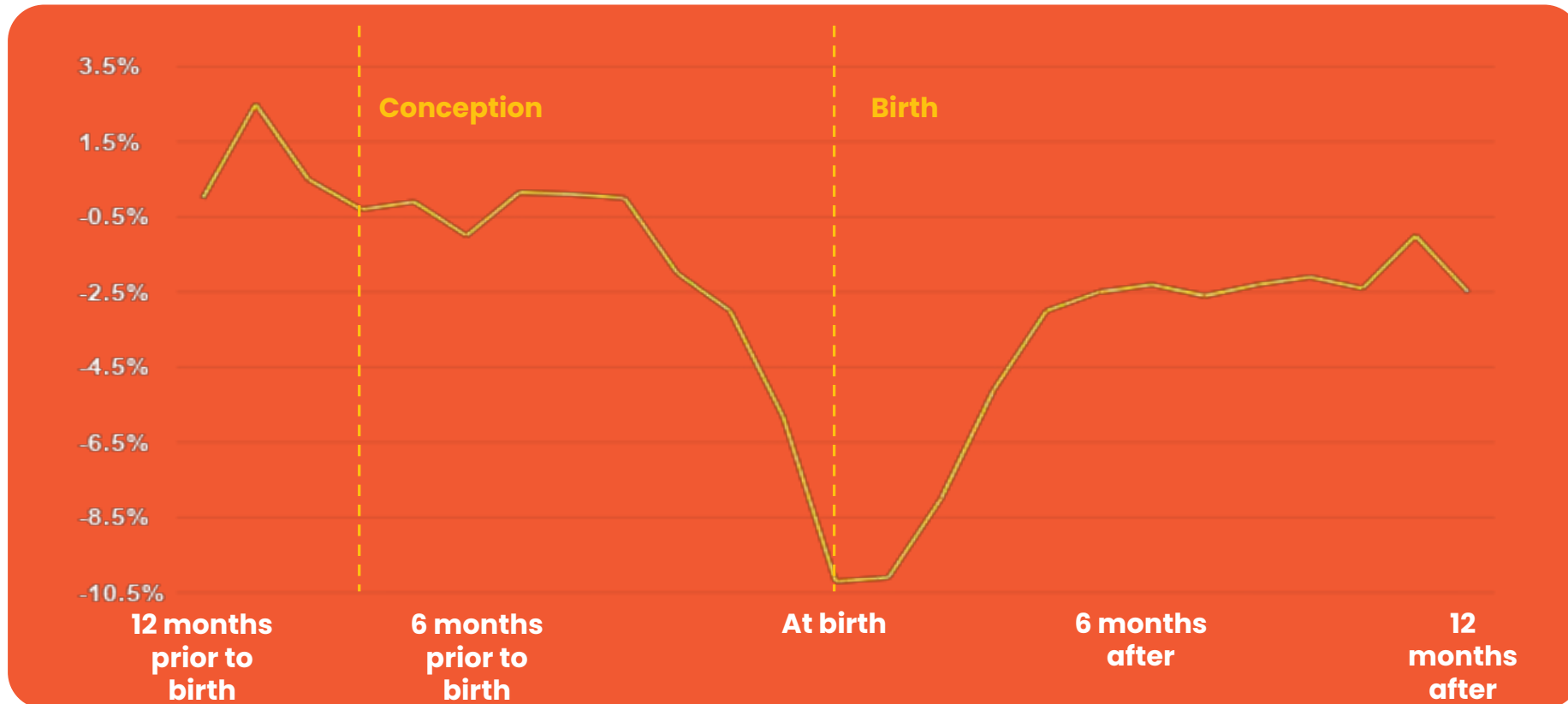


## Health

Increased adverse childhood events have been shown to increase the risk of chronic conditions (e.g., asthma, autoimmune diseases) and shorten lifespans by up to 20 years<sup>3</sup>

# FAMILY INCOME DROPS SHARPLY AROUND A CHILD'S BIRTH

% change in household income



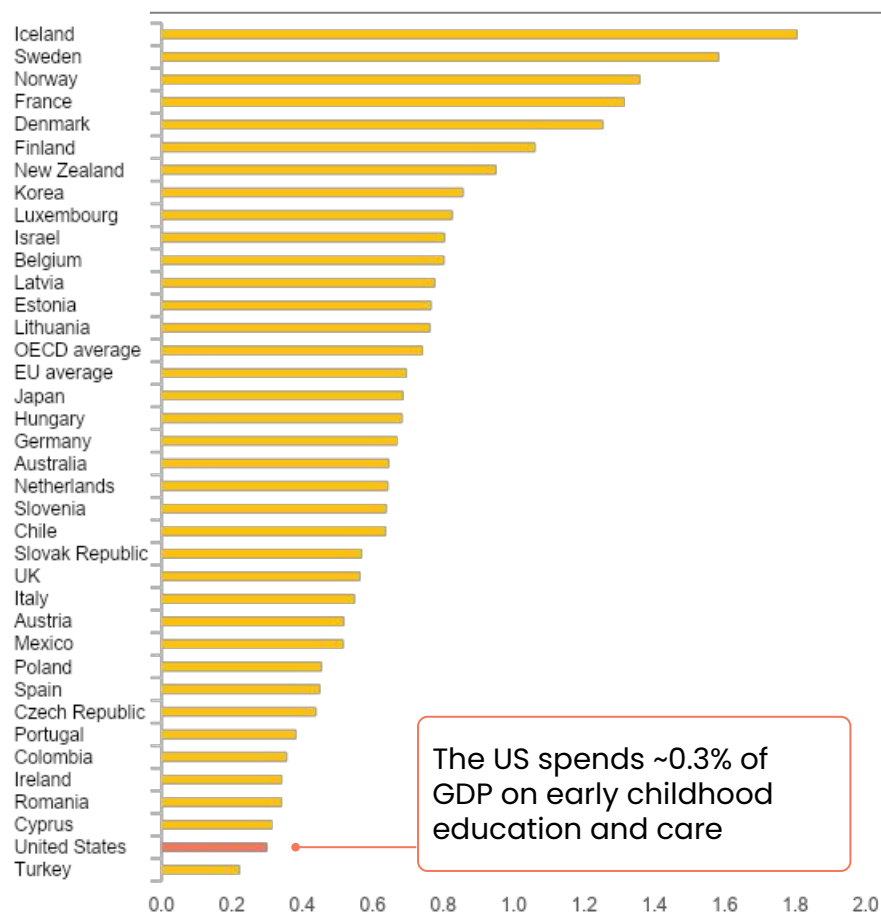


# YET, CURRENT INVESTMENTS ARE LIMITED AND COMPLICATED

US invests very little in the earliest years

Government programs are complex and restrictive, leaving critical gaps in support

Public Expenditure On Early Childhood Education And Care (% of GDP)



The US spends ~0.3% of GDP on early childhood education and care

EITC<sup>1</sup> and CTC<sup>2</sup>

Employment requirement with delayed relief

SNAP<sup>3</sup>

Complex application and limited coverage

WIC clinics<sup>4</sup>

Limited reach and benefits

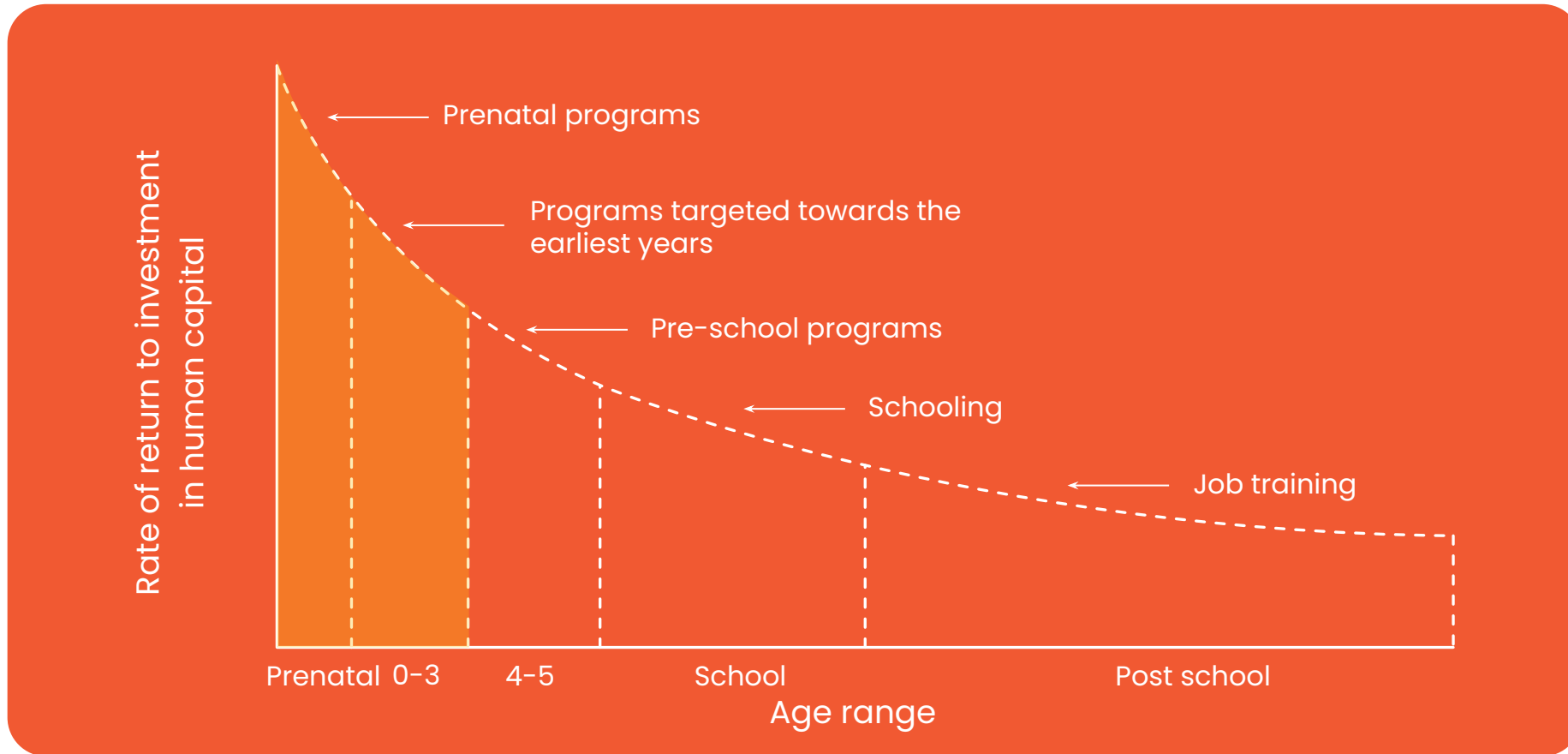
Medicaid

Limited postpartum coverage with no focus on financial stability

1. Earned Income Tax Credit (EITC) is a tax credit for low-income working families; 2. Child Tax Credit (CTC) is a tax credit for families with children; 3. Supplemental Nutrition Assistance Program (SNAP) is a program for low-income individuals and families; 4. Women, Infants, and Children (WIC) clinics offer education, breastfeeding support, and referrals to low-income pregnant/post-partum women, infants and children

Source: [Organization For Economic Cooperation And Development](#), [Earned Income Tax Credit website](#), [Child Tax Credit website](#), [Supplemental Nutrition Assistance Program website](#), [Women, infants, and Children Clinics website](#), [Medicaid website](#)

# EARLIEST INTERVENTIONS HAVE THE HIGHEST RATE OF ECONOMIC RETURNS



# CONTENTS

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- **WHY BABIES?**

- **WHY CASH?**

- **THE BRIDGE PROJECT » IN DEPTH**



# WHY CASH?

## EFFECTIVE

- Cash during pregnancy and infancy boosts birth weight, educational attainment, and food security<sup>1</sup>
- Cash is linked to higher levels of infant cognitive activity due to reduced maternal stress<sup>2</sup>
- Cash has positive effects on infant mortality in the first year of life<sup>3</sup>

## EFFICIENT

- 10X ROI for Expanded Child Tax Credit<sup>4</sup>
- Reduces reliance on social services, generating savings of \$8,277/person/year<sup>5</sup>
- SNAP (food stamps) is the most efficient government program and is valued at 80¢ on the dollar by participants and 65¢ on the dollar on the black market<sup>6</sup>

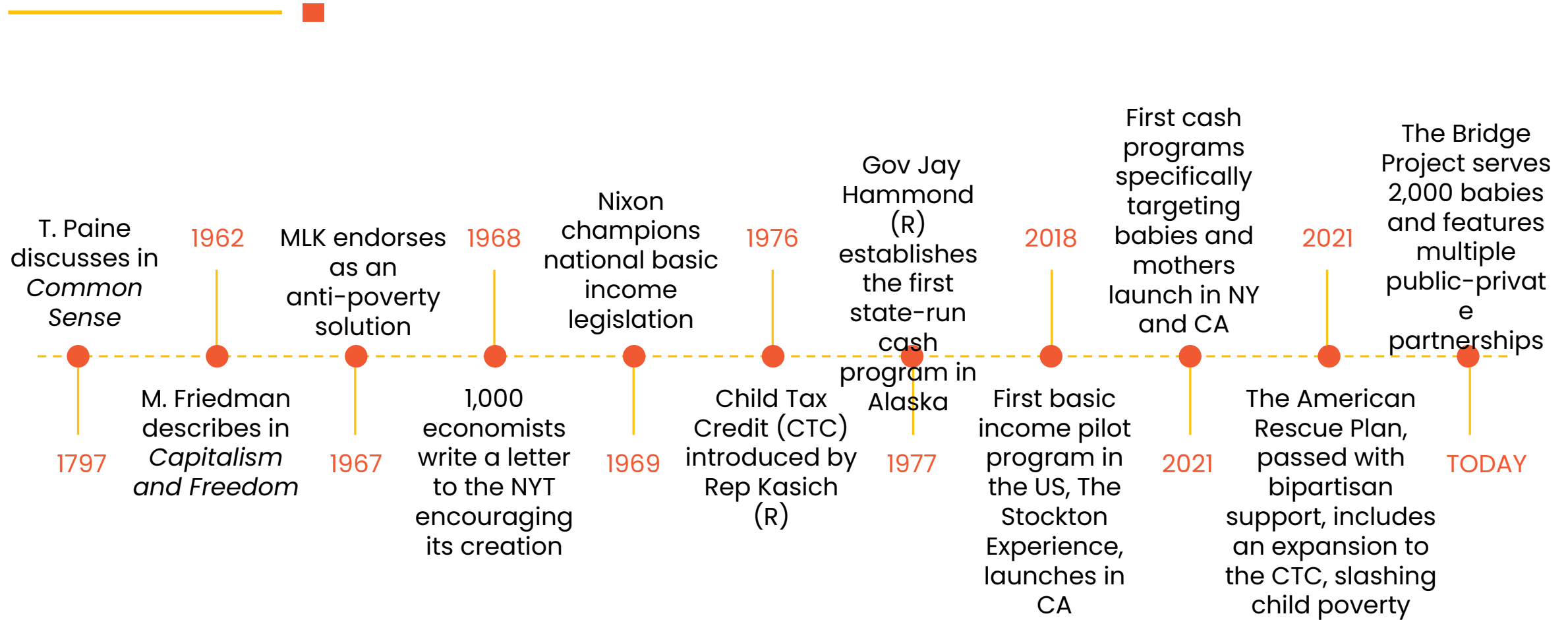
## SCALABLE

- Can take Bridge anywhere quickly and get money into moms' hands in weeks, not months or years
- Can reach populations of interest such as homeless pregnant women, female veterans, or Indigenous women

## FLEXIBLE

- Accounts for place-based differences
- Able to partner with local organizations
- Aligned with current trends in trust-based philanthropy

# CASH IS AN OLD BIPARTISAN IDEA

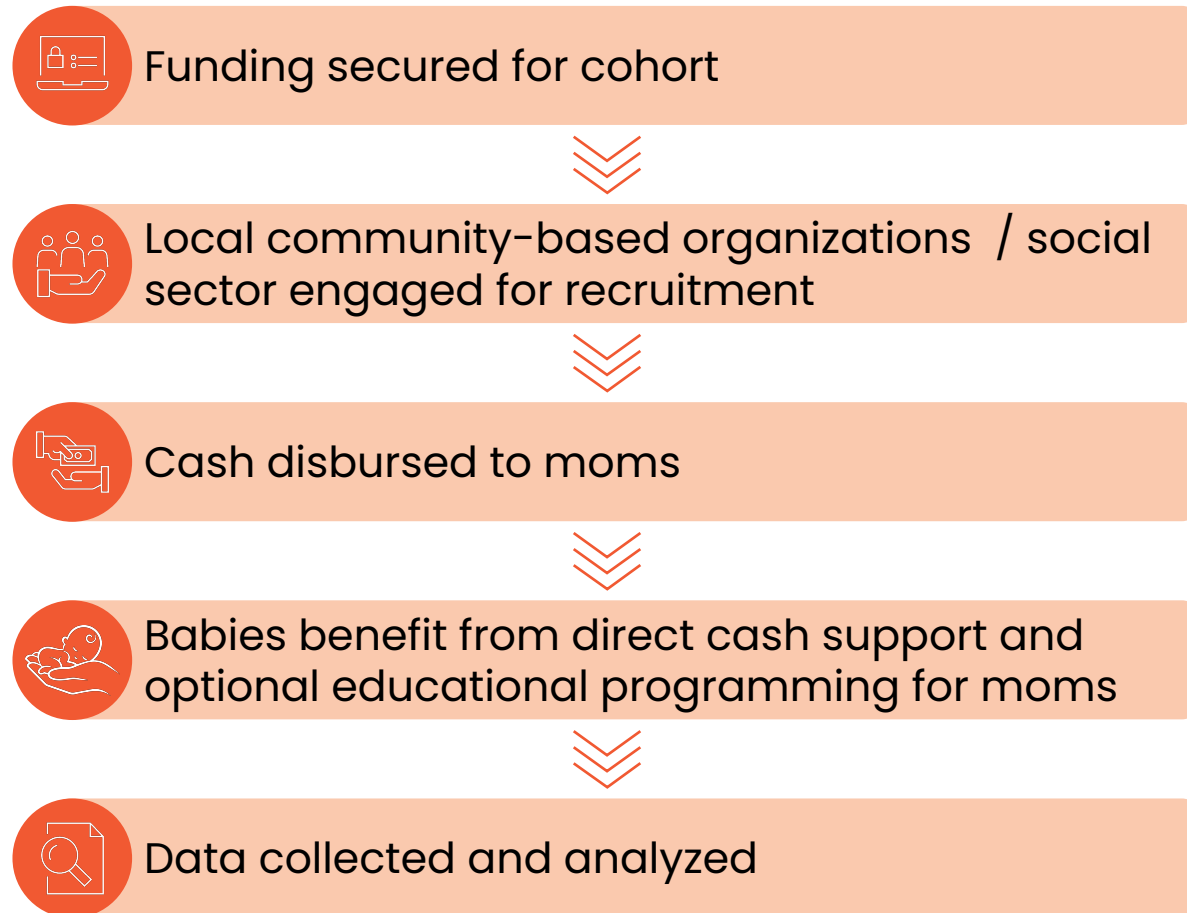


# SEVERAL MYTHS PERSIST ABOUT CASH

Myth	Reality and supporting data
<b>People will stop working</b>	<ul style="list-style-type: none"><li>▪ A recent study by OpenResearch<sup>1</sup> illustrated that recipients overall work the same amount and single mothers work slightly less. We take that as a good thing – care work is work! <b>80% of The Bridge Project recipients are working after 18 months in the intervention.</b></li><li>▪ A study of a cash program in Stockton, CA<sup>2</sup> showed that <b>participants went from part-time to full-time employment at more than twice the rate of non-participants.</b></li></ul>
<b>People will spend the money on vices</b>	<ul style="list-style-type: none"><li>▪ A major study by the World Bank demonstrated that in 82% of all researched cases in Africa, Latin America and Asia, <b>alcohol and tobacco consumption declined.</b><sup>3</sup></li><li>▪ A systematic review and meta-analysis examining 19 studies of cash transfers in low / middle-income countries<sup>4</sup> found either <b>no significant impact or a negative impact of transfers on temptation goods.</b></li></ul>
<b>People need financial literacy</b>	<ul style="list-style-type: none"><li>▪ Meta analysis across 201 studies showed <b>“interventions to improve financial literacy explain only 0.1% of variance in financial behaviors studied.”</b><sup>5</sup></li></ul>
<b>Cash with conditions would be better than unconditional cash</b>	<ul style="list-style-type: none"><li>▪ Conditional cash can have notable associated costs, with one program estimating that <b>administrative expenses were as high as 63% of transfers made.</b><sup>6</sup></li></ul>

# OUR MODEL IS SIMPLE AND ROOTED IN THREE CORE BELIEFS

## Fundamental model



## Core beliefs

- Prevent, don't undo** We focus our intervention on preventing poverty at the earliest stage, not simply undoing its effects later in life
- Return on investment matters** We have no interest in wasting money on inefficient, overly burdensome programs that aren't grounded in evidence
- Dignity is paramount** We trust mothers to make the best decisions for their babies with no judgment and no strings attached

Unconditional cash is the **simple, scalable, and human-centered solution** to ending child poverty **for good**

# THE BRIDGE PROJECT CONTINUES TO EXPAND RAPIDLY

## Wisconsin

- 100 moms in Milwaukee
- Partnership with Zilber Family Foundation
- \$350K in ARPA funds approved by Milwaukee City Council

## New York

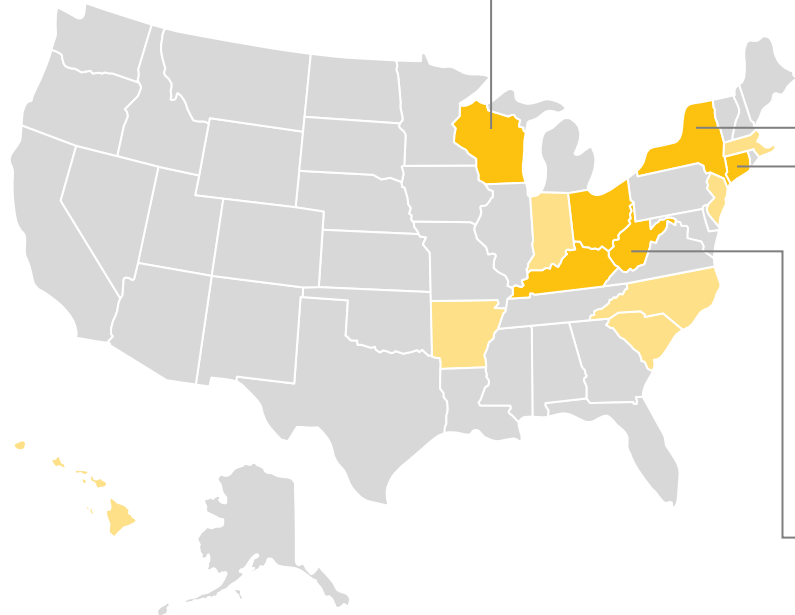
- 1,400 moms across NYC, Buffalo, and Rochester
- Randomized controlled trial (RCT) with UPenn's Center for Guaranteed Income Research on first cohort
- Partnerships with the NY Governor's Office, members of the NY legislature, and mayors' offices
- \$1.5M from NYC Council to target pregnant homeless moms

## Connecticut

- 500 moms statewide
- 1,000+ applications within 24 hours
- Partnership with two private philanthropists and local community foundation

## Appalachia

- 2025: 500 moms in OH, WV, KY
- RCT with Columbia's Transition to Parenthood Center



Light yellow indicates exploration conversations: NJ (seed funding secured), Arkansas (feasibility funding secured), the Carolinas, Indiana, Boston, and Hawaii





The Bridge Project is sparking government to act differently today...

- **NYC Council** allocated \$1.5M in FY25 budget for 1 in 8 homeless pregnant women in NYC; research underway on cost savings from shorter shelter stays
- Milwaukee's City Council allocated \$350K in **ARPA funds** with a supermajority
- Several states have approached Bridge as an upstream **foster care** intervention



...and laying the groundwork for the future

- Founded and house **the Mother Infant Cash Coalition (MICC)**, with 19 mother-infant cash programs nationally, that is creating a federal policy agenda
- In NY State, made significant progress on a new \$250M bill to create **the Mothers & Infants Lasting Chance (MILC) Allowance**, which will be reintroduced in the coming session
- Created the **New York State Cash Coalition** to advance shared policy goals statewide

# CASE STUDY: HOMELESS PREGNANT WOMEN IN NYC

## Inspiring others and de-risking cash for government

### SITUATION

- 1,300 babies born into NYC shelter system per year
- Two major events that drive women in NYC into shelter – domestic violence and giving birth
- Most common age to be homeless in NYC is 1 year old
- NYC spends \$6k/month to house a woman in shelter vs. \$1k/month through our program
- NYC Council decides to give The Bridge Project (first time ever support of a cash program) \$1.5M – and we decide to focus on homeless women

#### Rapid standup and deployment

- 4 weeks from making grant to distributing first payments
- Cultivated new partnerships (eviction lawyers, domestic violence orgs, shelter providers)
- 500+ applications for ~150 spots

#### Launch campaign with partners for “no baby born homeless”

- Work with local funding collaborative and DSS to develop plan
- Conduct research on cost savings from Bridge families

#### Inspire other cities to adopt NYC model

- Continue economic research
- Share findings with other local governments

### TIMEFRAME

Q4 2024

2025

2026+







# Meet Today's Guest Speakers



**Sarah Blanton**

4-CT

she/her/hers

# EMPOWERING CONNECTICUT RESIDENTS TO IMPROVE THEIR LIVES



4-CT partners with community-based organizations across Connecticut to empower individuals in need to improve their lives.

By leveraging the potential of direct cash assistance and strategic collaborations, we efficiently address immediate crises and systemic injustices.

### Current Partners



Since 2020

# \$7.7 million

in direct cash assistance to CT's most vulnerable



## 15,619

prepaid cards distributed



## 41,156

individuals reached

# Our Programs

4-CT designs, implements and provides operational and administrative support for direct cash assistance pilots. We also serve as a platform, providing operational and administrative support, for organizations that wish to design their own cash assistance initiatives.

While we are primarily focusing our pilots on violence prevention and intervention, we are exploring other ways in which direct cash assistance can proactively address systemic injustices and racial inequity.

# Why Community Safety

According to the CDC, strengthening economic and household security reduces the risk for violence and suicide. In addition, an analysis of state Earned Income Tax Credit (EITC) laws, found that higher state EITCs were associated with lower rates of violence and suicide.

- In CT, 2013-22, the rate of **gun suicide increased 40%** and **gun homicide increased 73%**.
- In the US, violent injuries are the **leading cause of disability and death among those ages 15-34**.
- Victims of violence face physical injuries as well as psychological and emotional disturbances (i.e., PTSD, depression, substance use disorder).
- In urban settings, researchers estimate that **up to 41% of patients treated for violent injury are reinjured within 5 years**.
- Everytown for Gun Safety reports that **gun deaths and injuries cost CT \$2.6B each year, of which \$57.1M is paid by taxpayers**.



# Critical Economic Supports

**Direct cash is critically important.**

**Our experience shows that outreach programs are limited in the immediate resources that can be provided to victims, many of which aren't available for weeks or months or are severely restricted in terms of how they can be used.**

**Individuals often need immediate, flexible resources to meet their basic needs, get them to a safe place, or address larger issues.**

**Those resources provide immediate assistance and also increase engagement with the community based organizations distributing funds.**

## Hospital-Based Violence Intervention Pilot

(Hartford & New Haven)

CCMC, Trinity Health, Compass  
Youth Collaborative, HCTC,  
MUAV, Roca, YNHH HVIP,  
The HAVI

up to ~\$1,000

Victims of violence, including  
but not limited to gun violence,  
human trafficking, intimate partner violence,  
physical assault and sexual assault

## Bridgeport New Haven Health Equity Pilot

(Bridgeport & New Haven)

The SEICHE Center for Health &  
Justice

Feasibility study: \$500/month for 6 months

RCT Treatment Arm: \$500/month for 12 months

RCT Control Arm: \$50/month for 12 months

30 formerly incarcerated individuals  
with chronic disease

Fundraising for a statewide, 300-person  
randomized control trial

## Elm City Reentry Pilot

(New Haven)

Project MORE, City of New  
Haven

\$500/month for 12 months

40 formerly incarcerated individuals

3rd cohort of 20 to launch in Fall 2024

# Cash Assistance Programs

## **Violence Reduction**

(New Haven)

City of New Haven

Three City grants totaling ~\$600K to disburse funding in an effort to reduce violence through 2026

## **Community Violence Intervention**

(Hartford, New Haven)

DPH & CCMC  
Clifford Beers  
Hope Family  
Justice Center

\$155K in cash assistance to individuals at risk of violence

## **HAVEN Food As Medicine**

(New Haven)

HAVEN Free Clinic

Recurring disbursements for ~\$400 over 6 months to 50 clients of HAVEN Free Clinic for food-related expenses

## **Power Building Cash Assistance**

(Bridgeport, Hartford, New Haven)

CUOC

\$10K in cash assistance to changemakers in CUOC's guaranteed income pilot for participation in public awareness and advocacy efforts

## **Blue Ribbon Commission on Education**

(Hartford)

City of Hartford

Monthly disbursements of \$150/month for 6 months for parent participants

# Preliminary Reentry Pilot Findings

Yale Internal Review Board  
Approval Pending

**77.8%** of survey respondents reported being able to improve their employment situation during the year of the pilot

**55.6%** of survey respondents reported an increase in their monthly income, the avg. increase was \$1,057

**94.4%** of survey respondents reported being able to improve or maintain their housing situation, with 88.9% reporting a decrease in housing-related stress

**100%** of survey respondents believed the pilot was very (83.3%) or partially effective at staying out of trouble/avoiding re-arrest

**100%** of survey respondents believed the pilot was more effective than other available forms of assistance

**100%** of survey respondents would recommend the program to others, with only 22.2% wanting to restrict access to a subset of returning citizens

**61%** of survey respondents reported being interested in participating in advocacy efforts to expand the program to others

**100%** of survey respondents would like to continue talking to and sharing their experiences with 4-CT



4-CT



[The money from the pilot] gives me an opportunity to relax, instead of being so stressed out about financial things..It gave me an opportunity to think of another plan on how to take care of my bills after this is over with...search out different opportunities....I got a HAZWOPER certification. I was also able to get a forklift certification. I was able to keep my days free to do these types of things and also to engage agencies to help me try and finance my CDL training.

Sometimes people resort to what they know already. Sometimes people don't want to do that. Sometimes people want to go another way. I feel like this money right here was another way. I stayed patient and I waited because I didn't immediately say, 'Oh let me go sell drugs to get this to get that.' I didn't do that this time. I really sat and thought about what I really want to do with myself.

My daughter do two different [dance classes]...Her costumes are [expensive], man. I'm like, 'What the...what's going on?'

It's worth it, though. Once you go to the show and see them laughing and dancing....

I'm becoming the dad I want to be.

[This pilot has] helped a lot. I've been still looking for a job....[The money] does come in complete clutch....I can help put food in the house now. Stuff that's needed...I needed a phone to help keep in contact with the world....[A license] is next month....

If I'm not spending it on what I need, I'm spending it on my kid. He lives with me. Diapers. Wipes.

# Audience Questions and Guest Panel



**Laura Clancy**  
The Bridge Project  
she/her/hers



**Sarah Blanton**  
4-CT  
she/her/hers



**Sarah Spunt**  
Lift, Chicago  
she/her/hers



prevent  
connect

## **PreventConnect.org**

[info@PreventConnect.org](mailto:info@PreventConnect.org)

[PreventConnect.org/email](https://PreventConnect.org/email) – **email group**

[Learn.PreventConnect.org](https://Learn.PreventConnect.org) – **eLearning**

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