

HudsonUP Basic Income Pilot Final Report (2020-2025)

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Executive Summary

HudsonUP is a five-year guaranteed income pilot launched in 2020 to address economic instability and rising inequality in Hudson, New York. A total of 128 residents—about 2% of the city’s population and 5% of households—receive \$500 per month for 60 months with no strings attached. A mixed-methods evaluation (biannual surveys and interviews) shows that steady, unconditional cash reduces financial stress but cannot overcome systemic barriers such as rising housing costs and structural health inequities. Key findings include:

- **Basic income provided immediate, stabilizing relief.** Participants described the \$500 monthly payment as a buffer that prevented crises, supported recovery from shocks, and reduced day-to-day stress.
- **Housing instability remained a defining challenge.** Across cohorts, 8–24% of participants moved in any six-month period, with the highest mobility in 2024–2025. Most moves were driven by necessity: affordability pressures, unsafe housing, landlord actions, or work disruptions.
- **Most respondents continued to lack financial buffers.** A majority remained unable to cover a \$400 emergency throughout the program.
- **General health improved modestly but remained shaped by structural factors.** Cohort 1 saw the strongest improvements; Cohorts 2 and 3 fluctuated more due to chronic health conditions and long-standing unmet needs.
- **Psychological distress stabilized for many respondents.** Kessler-10 scores remained steady for Cohort 1 and declined for Cohort 2. Cohort 3 experienced mid-program strain before improving. Participants described greater peace of mind and reduced anxiety.
- **Participants viewed basic income as socially beneficial and scalable.** Many saw it as dignifying, stigma-free, and capable of reducing crises and strengthening community well-being.
- **Structural barriers constrained long-term gains.** Rising housing costs, limited affordable rentals, stagnant wages, and inadequate healthcare access limited participants’ ability to build savings or achieve sustained improvements.

Overall, HudsonUP suggests that unconditional cash provides immediate stability and dignity, helping participants weather shocks and pursue education or caregiving. But structural reforms in housing, healthcare, and labor markets are essential for long-term security. The pilot underscores the need to pair basic income with affordable housing, healthcare access, and labor protections.

1. Introduction and Purpose

Hudson, New York, is a small city of roughly 6,000 residents along the Hudson River. Its economic history illustrates the broader U.S. trajectory: from a late-eighteenth-century whaling port to nineteenth-century manufacturing center, mid-twentieth-century deindustrialization, and a twenty-first-century revival driven by arts, tourism, and an influx of affluent newcomers. These cycles produced both prosperity and profound inequality. Today, tourism and service work supply most jobs but pay low wages, and gentrification has made housing unaffordable for many long-term residents.

HudsonUP, a privately funded five-year basic income pilot, emerged amid the COVID-19 pandemic and increasing economic precarity. The program offers five years of unconditional cash assistance to residents earning less than the area median income. From the perspective of HudsonUP leadership, the aim of the pilot is twofold:

1. To empower participants to craft their own financial futures, without the interference of paternalistic policy and cumbersome bureaucracy.
2. To demonstrate the transformational potential of basic income programs in the long term.

2. Historical Economic Context of Hudson

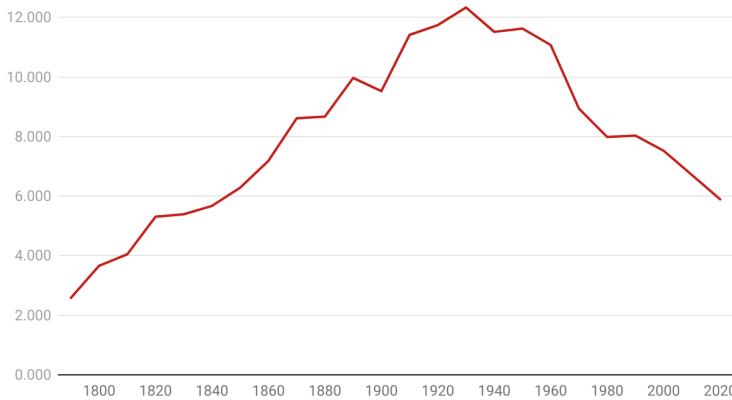
Hudson, New York, located on the eastern shore of the Hudson River approximately 120 miles north of New York City, presents a compelling case study in American economic history. The land on which the 2.3 square mile city now stands was first “purchased” from the Mohicans for “a few trifles” by early Dutch and English colonists (Ellis, 1878). In 1783, a group of Nantucket Quaker merchants and ship owners purchased land in what was then called “Claverack’s Landing” and established a whaling port deliberately located inland to protect vessels from British naval attacks that had devastated Nantucket during the Revolution (Dolin, 2011). The city was named after early explorer Henry Hudson and incorporated in 1785, making it the third-oldest city in New York State. By oft-cited local legend, “it came just one vote short of becoming the capital of New York State” (City of Hudson, 2025). By 1790, Hudson's fleet included 25 whaling vessels, making it one of the largest whaling ports in the country (Dolin, 2011). The industry brought significant capital accumulation, skilled maritime labor, and mercantile infrastructure to the young settlement. Whale oil production for lighting and industrial lubrication, along with whalebone for corsets and other consumer goods, connected Hudson directly to Atlantic and international markets (Dolin, 2011).

By the 1820s, Hudson's whaling industry had begun a gradual decline. Several factors contributed: depletion of Atlantic whale populations, the discovery of new energy sources, competition from other ports, and the opening of alternative economic opportunities, such as the Erie Canal (1825) and railroad development, which transformed regional transportation networks (Dolin, 2011). The last whaling voyage from Hudson departed in 1844, marking the end of the industry that had defined the city's founding era and a transition towards manufacturing. Meanwhile, a booming redlight district emerged with

more than 50 bars and brothels in its two square miles at its peak in the late 1800s and early 1900s (Hall, 2005).

By the mid-twentieth century, Hudson faced mounting economic pressures. The decline of river commerce as trucking and highway transport superseded water and rail freight further reduced the city's transportation advantages. Manufacturing establishments faced competition from southern and western locations with lower costs (City of Hudson, 2025). These challenges foreshadowed the more severe deindustrialization that would characterize the 1950-1990 period across the American Northeast, with Hudson experiencing this transformation acutely. Manufacturing employment declined as firms closed, relocated, or automated production. The city lost anchor industries and experienced population decline as workers left to seek opportunities elsewhere (Bliss, 2020).

Population of Hudson, 1790-2020

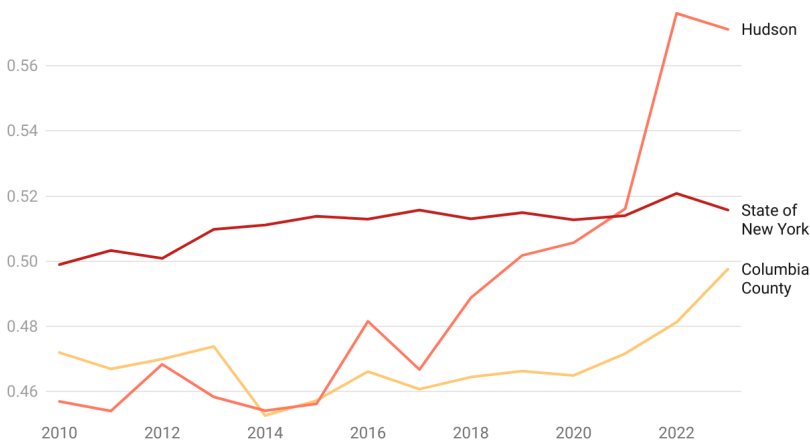


Source: U.S. Decennial Census • Created with Datawrapper

In the 1990s, artists, antique dealers, and second-home buyers rediscovered Hudson. The city's walkable downtown and nineteenth-century architecture attracted investors who transformed abandoned warehouses into galleries, boutiques, and restaurants. This period of reinvestment reshaped the city's social and economic landscape, creating new opportunities for some while deepening challenges for others. Today, the fastest-growing local industries are construction, retail, accommodation, and food services, which expanded by 58%, 47%, and 35% respectively, from 2017 to 2023, but pay the lowest wages (Center for Housing Solutions, 2025). By early 2025, the average weekly wage in Columbia County was \$1,121, or roughly \$58,000 annually, far below what is required for economic security for most families (Bureau of Labor Statistics, 2025). According to the MIT Living Wage Calculator, a single adult with two children in Columbia County needs \$56.67 per hour (more than \$2,000 weekly and \$117,000 annually) to cover basic needs, while even a dual-earner household with two children requires \$30.87 per hour each (Glasmeier, 2025).

One clear indicator of these growing disparities is the Gini index, a measure of income inequality ranging from 0 (perfect equality) to 1 (perfect inequality). According to the American Community Survey 5-year estimates (US Census Bureau, 2023), income inequality has grown substantially in the City of Hudson over the past decade. In Hudson, the Gini index rose from 0.457 in 2010 to 0.571 in 2023, with a sharp increase beginning around 2016, evidence of widening income polarization as high-income households moved into the area. By comparison, the greater Columbia County followed a similar but more moderate trend, increasing from 0.472 to 0.497 over the same period. Together, these data indicate that Hudson’s income distribution has become markedly more unequal, consistent with rising housing costs and a growing gap between high- and low-income residents.

Gini Index of Income Inequality



Source: US Census ACS 5 year Estimates • Created with Datawrapper

The most acute manifestation of inequality has been in housing affordability. A 2025 housing report details severe affordability challenges (Center for Housing Solutions, 2025). Half of Hudson’s renter households (779) are cost-burdened, spending more than 30% of their income on housing, and 610 households (about 40% of renters) spend over 50% of their income on rent. The number of severely cost-burdened renters tripled between 2011 and 2021 (from 195 to 610 households) while moderately cost-burdened renters decreased, indicating that many families moved from moderate to severe strain.

Supply constraints exacerbate the crisis. From 2013 to 2023, Hudson added a net 33 housing units, yet the number of owner-occupied homes declined by 208, signalling that many homes serve as second residences or short-term rentals. Crucially, the city lost 333 duplexes/triplexes—naturally occurring affordable housing—while gaining 383 single-family homes. Overall, renter households fell by 21% over the decade (Center for Housing Solutions, 2025). These shifts reflect conversions of rental properties to more expensive single-family or vacation units, reducing options for local workers.

4. HudsonUP Program Overview

Amid rising rents, widening inequality, and increasing precarity for many Hudson residents, HudsonUP launched in Fall 2020. Recruitment was conducted by the Greater Hudson Promise Neighborhood and included in-person sign-ups for a randomized lottery at community events, through word of mouth, and at local community services. The first randomly selected cohort included 25 adults (receiving payments 2020-2025), followed by 50 more in 2021 (Cohort 2: 2021-2026) and 53 in 2022 (Cohort 3: 2022-2027), bringing the pilot to 128 participants whose experiences reflect a wide range of Hudson's working families and households. Eligibility focused on adults living in Hudson with incomes at or below the area median. Funded by Eutopia Foundation and Spark of Hudson and administered by the Greater Hudson Promise Neighborhood, the program offers \$500 per month for five years, no strings attached. The Jain Family Institute led an independent, mixed-methods evaluation including biannual surveys and interviews to understand how basic income shapes participants' work, finances, health, and overall well-being over time. See Appendix C for survey and interview response rates, which averaged 25% and 22%, respectively. The following sections include survey trends over the first five years of the pilot and emergent qualitative themes in the final year.

5. Program Outcomes

5.1 Community Changes

Five years into the HudsonUP pilot, participants described Hudson's shift from a close-knit haven to a pricier, visitor-oriented town. Early arrivals recalled *"finding this little piece of paradise... I could raise my child here...people were amazing."* Over time, however, *"It's turned into a tourist town,"* where *"the summers are crazy, but then winter is like. There's nobody here,"* and *"you don't have as much of that kind of local community as you maybe had 10 years ago."* In line with local trends, housing marks the sharpest edge of this change. Residents tied in-migration, second homes, and short-term rentals to displacement: *"people started to buy buildings just to Airbnb."* Longer-term residents reported *"people coming up to my house asking if it was for sale."*

Relatedly, participants consistently noted that the cost of living has increased significantly, both nationally and locally. In Hudson, broader economic pressures are exacerbated by the town's rapid growth and gentrification. Many emphasized that *"cost of living has increased"* dramatically across essentials—*"the cost of food is crazy,"* one participant noted—while wages and job opportunities have failed to keep pace. Residents described feeling that *"everything is just crazy expensive"* and *"outside all of our control,"* particularly when jobs are *"not paying you enough"* to meet rent or basic needs. The impact was especially acute among artists and creative workers, who historically contributed to Hudson's identity but now find it *"not affordable for... a person like me, an artist."* One former small business owner recounted that *"the same store that I paid \$900 for is now almost \$3000."* Others echoed similar struggles, describing the need to *"prioritize what's more important"* to cover food, gas, and health care, with one participant remarking, *"A lot of people don't have health insurance. People may be afraid*

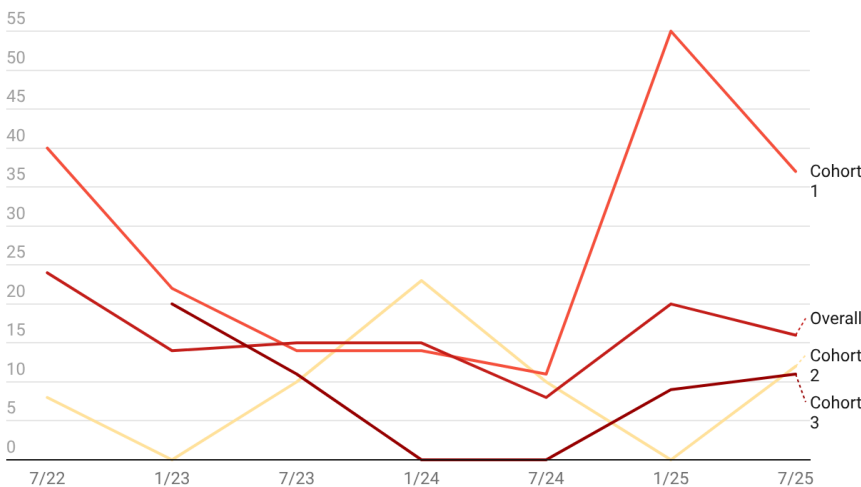
to go to the doctors... they may not have enough money to pay out of the pocket because... they have to have food on the table.”

Participants report that these economic shifts have altered the very character of Hudson’s community and creative scene. Participants linked rising property values and the influx of wealthier newcomers to displacement, noting that *“a lot of residents are leaving from the city... as outsiders acquire and improve the space... the cost goes [up].”* Several expressed getting a sense that stores *“don’t care about who lives here. ‘We’re here for the people that have too much money and will spend silly money on pasta.’”* Once-thriving local spaces have become inaccessible, with *“half of the people... don’t go there because they can’t afford it.”* While some acknowledged *“great initiatives... trying to address affordable housing,”* the prevailing sentiment reflected fatigue and uncertainty about Hudson’s future: *“I would love to see Hudson be the place of equality for everybody.”*

5.2 Housing Stability

Across waves, a substantial share of HudsonUP participants reported moving within the past six months, though rates varied considerably by cohort and over time. Cohort 1 consistently showed the highest mobility, with large spikes in summer 2022 (40%) and in January (55%) and July of 2025 (37%), suggesting ongoing housing instability long after program entry. Cohort 2 showed lower movement, ranging from 0% in early 2023 and 2025, with a peak of 23% in early 2024. Cohort 3 generally had the lowest mobility, with most waves showing very little movement, aside from small increases in 2023 (20%-6%) and 2025 (11%).

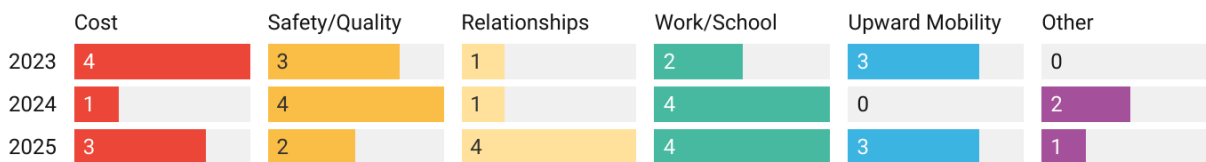
% Moved in Previous 6 Months



Data reflect completed surveys and vary by wave and cohort (Cohort 1: n = 7–11; Cohort 2: n = 7–15; Cohort 3: n = 6–11). Created with Datawrapper

In 2023, we began asking participants why they had moved. In the past 3 years, the reasons participants cited point to rising housing instability rather than upward mobility. While a handful of moves represented positive steps (such as pursuing homeownership or securing better units), most were driven by affordability pressures, unsafe or deteriorating housing, landlord actions, or by moving closer to work or school. These pressures intensified over time: 2023 moves centered on finding cheaper or safer housing, 2024 showed an uptick in forced or quality-related moves (including lease terminations and building sales), and 2025 suggests continued affordability strain combined with work-related moves and family shifts. Taken together, the pattern reflects a housing landscape where participants moved largely out of necessity, not choice, consistent with the city’s rising rents, shrinking supply of affordable units, and limited work and educational opportunities.

Reasons for Moving in Past 6 Months



Values represent counts of respondents.

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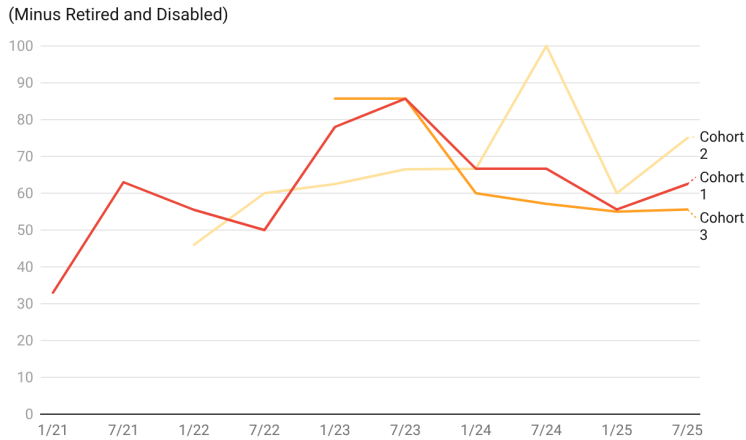
In qualitative interviews, several participants mentioned having moved out of Hudson since joining HudsonUP, reflecting a range of motivations and experiences. For some, relocation stemmed from personal or practical circumstances (such as changes in immigration status or family needs) rather than dissatisfaction with Hudson itself. For others, leaving Hudson was a deliberate choice shaped by the city’s rising costs and shifting character. A few found that moving away brought new opportunities and stability. One participant described life outside Hudson as “*very stable and great,*” while another felt “*very at peace, which I was not in Hudson.*”

5.3 Employment and Education

Across the study period, employment levels (excluding participants who were retired or disabled) fluctuated across all three cohorts. Cohort 1 showed a steady upward trend after the start of the program: full- or part-time employment rose from 33% in January 2021 to a peak of 85.7% in summer 2023, before stabilizing in the mid-60% range in later waves. This pattern suggests that as early-cohort participants recovered from the pandemic’s economic shock, many were able to return to or sustain work over time. Cohort 2 joined the evaluation in early 2022 with 46% employed and experienced consistent increases through early 2024, where employment temporarily reached 100%. Employment then settled between 60–75% through the final wave of data collection (summer 2025), indicating improvement relative to baseline but also ongoing variability potentially driven

by household, health, or caregiving demands. Cohort 3, which entered the study in fall 2022, initially posted the highest employment levels (85.7% throughout 2023) but experienced a gradual decline over subsequent waves, ending in the mid-50% range by summer 2025.

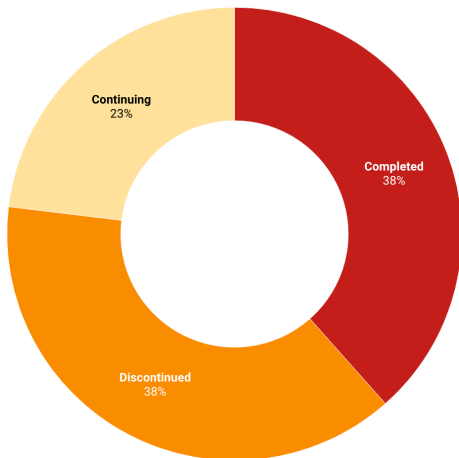
Full and Part Time Employment



Data reflect completed surveys and vary by wave and cohort (Cohort 1: n = 7-11; Cohort 2: n = 7-15; Cohort 3: n = 6-11). Created with Datawrapper

Over the five years of this evaluation, 13 participants (roughly 10% of the sample) reported pursuing higher or continuing education at some point during the program. Five participants successfully completed a credential, most commonly a bachelor’s or postgraduate degree. Three others remained actively enrolled at the end of the study. Another five participants paused or discontinued their studies, typically following partial progress toward a degree. These pauses were most often linked to caregiving responsibilities, health challenges, or other life-course disruptions.

Status of Participants Who Engaged in Education



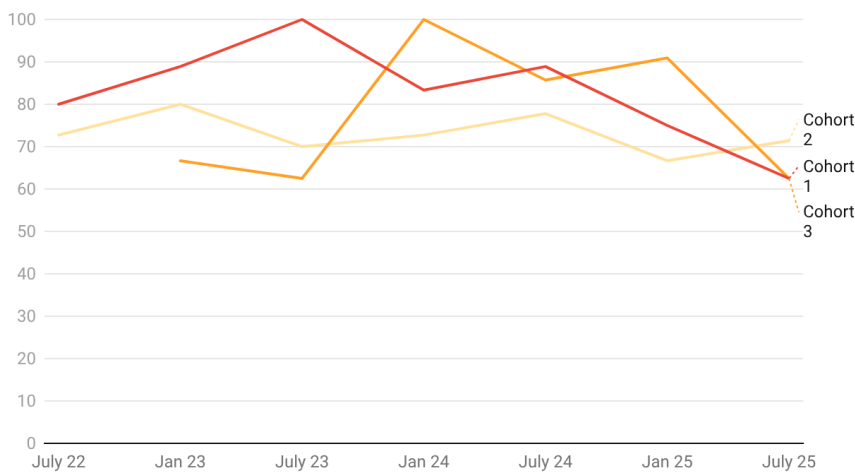
2025 status of 13 participants who reported pursuing higher education during the evaluation period. Created with Datawrapper

5.4 Financial Stability

Participants reported using the basic income to address both short-term needs and their longer-term financial goals. Many directed the funds toward essential expenses such as bills, car payments, insurance, and food, emphasizing the relief of financial consistency: *“Every month I can pay my car. And that’s a blessing.”* Others used the payments to address unmet household needs, noting, *“If I wouldn’t have had this money, I wouldn’t have had this [mattress],”* and *“I got a new air conditioner.”* The income also supported education, employment transitions, and caregiving. One participant shared how they utilized the funds to *“supplement [my] income while... going to school.”*

Regardless of their economic trajectories, participants described basic income as a form of prevention in their lives. They described life as *“really, really happening now,”* with *“things that happen at a rapid pace.”* In that flux, regular cash functions as a cushion and a breather: *“you want to have something when life happens so that it doesn’t knock you down.”* Participants repeatedly situated the cash at moments when life swerved (job loss, a pandemic-induced income collapse, and postpartum recovery), describing it as support that arrived just as trajectories could have tipped the other way. One person recalled, *“When the hotel that I’d worked at laid everyone off...with the \$500 a month... I was able to take my time... I found what was right.”* For caregivers without benefits, the timing was similarly pivotal: *“As a self-employed person, I don’t have maternity leave... having had that also has given me the opportunity... to [take] six months to focus on my baby and my recovery.”* In this frame, participants summarized the counterfactual stakes: *“I can’t even imagine how my life would be if I hadn’t been lucky enough to be in the program.”* One participant vividly explained that in times of uncertainty, *“You get to land on a cotton bed. Instead of a bed of nails.”*

% Unable to Afford a \$400 Emergency with Cash/Liquidity



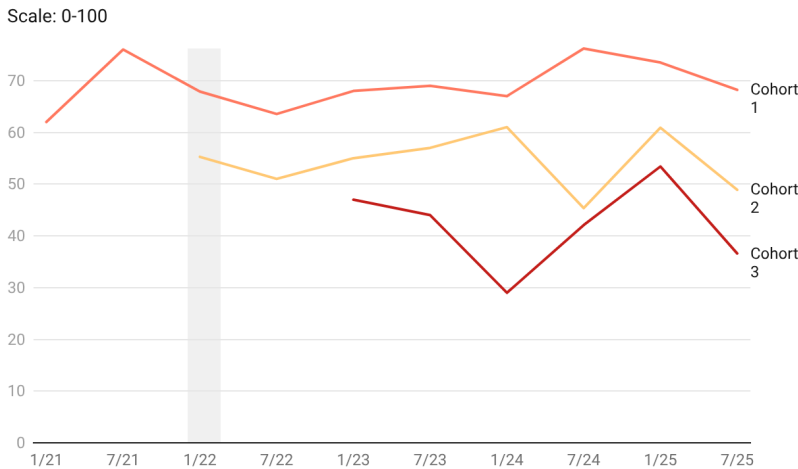
Data reflect completed surveys and vary by wave and cohort (Cohort 1: n = 7–11; Cohort 2: n = 7–15; Cohort 3: n = 6–11).

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Consistent with these accounts, surveys indicate that the ability to cover a \$400 emergency remained limited across cohorts. Cohort 1 began with very high levels of hardship (80% to 100% unable to cover a \$400 emergency through 2022-2024) and showed gradual improvement in the later waves, declining to 62.5% by summer 2025, though still affecting a majority of participants. Cohort 2 displayed more stability but remained consistently strained, with figures generally ranging from 66% to 80% and ending at 71.4% in 2025. Cohort 3 showed the greatest volatility: while two-thirds were unable to cover a \$400 expense in early waves, this spiked to 100% in early 2024 and over 85% in summer 2024 to early 2025, before improving to 62.5% in summer 2025.

In a context where inequality and high living costs made even minor emergencies destabilizing, participants interpreted the steady monthly cash as proof of what a basic income could accomplish at scale. They imagined it as a way to reduce crises before they happen, *“because when you’re going through something, knowing you have that financial cushion, that’s one less worry.”* Several framed it as a straightforward matter of public well-being: *“It’s kind of inarguable. The world would be a better place... there’d be less crime.”* Others described it as support that ripples outward: *“when someone’s life is better, then everyone is better. You know, it has a snowball effect.”*

SF-36 General Health



Grey bar indicates a county level peak in Covid cases, according to the NY State Health Department. Data reflect completed surveys and vary by wave and cohort (Cohort 1: n = 7-11; Cohort 2: n = 7-15; Cohort 3: n = 6-11). Created with Datawrapper

5.5 Health and Well-Being

Across the five years of the pilot, participants’ SF-36 General Health (RAND, 2025) scores (with a range of 0-100) reveal a pattern of early improvement followed by fluctuations that closely mirror the structural pressures participants continued to face. Cohort 1, which entered the program in 2020, showed the strongest and most sustained gains, rising from a baseline of 62 to a peak of 76 in summer 2021 and stabilizing in the high 60s and low 70s through summer 2025. Cohort 2 began with lower health scores and exhibited greater

volatility. Cohort 3 displayed the lowest and most variable scores, including a sharp decline mid-program, followed by partial recovery.

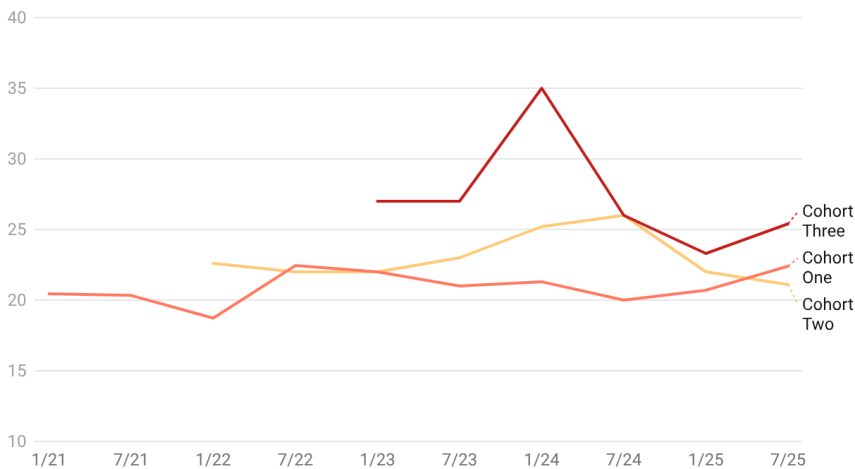
In interviews, participants were clear that while the program improves day-to-day life, it cannot undo long histories of deprivation or illness: *“It’s not gonna change what has already been done,”* and *“we might be living a better standard of life being a part of the program, but the way we were living before...our health condition...has deteriorated. It’s improved a little, but it’s not going to fix the whole.”* They described decades without care, *“They haven’t gone to the doctor from their 20s, 30s... people just didn’t go to the doctor [due to the cost],”* and chronic, complex conditions that cash cannot resolve: *“I have a lot of GI issues... some that are lifetime,”* and persistent injuries linked to physical labor: *“it’s more repetition. It’s...the type of job that I do.”*

Participants repeatedly emphasized that robust services, navigation assistance, and structural reforms should complement cash. They pointed to the need for complementary supports: *“Help them fill out an application,”* *“Educate people,”* and *“Really advocate for health in its true sense.”* Health coverage was a consistent concern: *“The United States is not a good place to be if you are financially insecure... nothing’s free here like health care.”*

Regarding their mental well-being, participants’ Kessler-10 (Kessler et al., 2002) psychological distress scores (with a range of 10-50, where higher scores indicate greater distress) show a pattern of early stabilization followed by cohort-specific fluctuations that reflect the uneven pressures in participants’ lives. Cohort 1 maintained relatively low and stable distress throughout the study, beginning around 20.4 in January 2021, dipping slightly in early waves, and ending at 22.4 in summer 2025. Cohort 2 entered the study

Kessler 10: Psychological Distress

Range: 10-50; Higher scores = greater distress



Data reflect completed surveys and vary by wave and cohort (Cohort 1: n = 7-11; Cohort 2: n = 7-15; Cohort 3: n = 6-11).

Created with Datawrapper

with moderately higher distress (22.6 at first measurement) and experienced small rises through mid-program, peaking at 26 in summer 2024 before dropping to 21.1 by summer 2025. Cohort 3 consistently registered the highest K10 scores. Distress climbed sharply to 35 in early 2024, before partially recovering to the mid-20s.

Qualitatively, however, participants highlighted the emotional benefits of the cash transfers. Some individuals allocated modest sums for self-care or leisure activities. One noted, “I do like to treat myself to a cappuccino sometimes, which is like five bucks,” while others mentioned using funds for short trips that provided a sense of freedom. As one expressed, “If I need a break... I can go to a hotel for a weekend,” and they found that it allowed them to “breathe.”

5.6 Reflections on HudsonUP, Program Design, and the End of Payments

When reflecting on their time in the pilot, participants consistently framed HudsonUP as timely, steadying, and life-changing. *“HudsonUP has been the best,”* one said; another called it *“a complete blessing. It gave me the ability to have a vehicle.”* Several summarized: *“[HudsonUP] has been like a cushion for me all these years.”* Participants contrasted HudsonUP’s approach, *“done without any form of prejudice,”* with the *“red tape”* in other programs. Being treated without suspicion mattered: *“We have to come to a place in this country where we are not judging people, but helping them where they are. We wouldn’t have as many problems.”* One person rejected deficit narratives at the end of her five years with HudsonUP: *“That’s not the stigmatization that we want...what should be spoken about is what the money did for them in that five-year period...Whatever you have left is nobody’s business.”*

Many described the cash as fostering reciprocity and purpose: *“It does help you feel like a bit more altruistic...You do feel like a certain sense of responsibility with it...makes you want to...give back and to do right by it.”* People reflected on concrete acts such as *“I said, okay, I’ll buy you a sandwich and a drink,”* and *“I’ve been giving money to St. Jude, \$20 a month.”* They linked generosity to stability: *“When people have money, they pay it forward... the money helps lift others up.”* Several tied this to personal growth: *“I think it’s been instrumental in kind of transitioning from, like, a scarcity mindset just to one of abundance... shaping my... relationship with money in general.”*

Suggestions for program improvement clustered around targeting and continuity. On targeting: *“I just wish there was a better way of allocating the funds to those who need it more,”* *“I would lower it to those that are below that poverty line,”* and *“based on household size and income.”* On continuity and public support: *“I would like to see this continue...Not out of somebody’s pocket...but from our government.”* Taken together, participants framed HudsonUP as a dignifying, stigma-reducing safety net that encouraged reciprocity. They want it to endure, ideally scaled and potentially better targeted, while preserving the low-barrier, *“no questions”* design that made it feel different from other benefits.

Participants expressed a wide range of emotions as the program nears its end, reflecting both gratitude and apprehension. Many described “*mixed feelings*,” grateful for the support they received, yet anxious about what comes next. For some, the payments had provided a vital “*cushion*” and a sense of stability during uncertain times, particularly through major life events like family transitions or the pandemic. One participant shared, “*Now it’s like...no safety net.*” Others echoed similar sentiments, with one saying, “*I’m gonna miss it when it’s gone,*” and another admitting they would have to “*tighten down a little bit more.*”

Despite the sadness, participants also reflected on growth and resilience. Several described feeling proud of their progress, such as meeting savings goals or gaining financial confidence. One participant noted the experience allowed them to “*adventure*” with work and finances in ways they couldn’t before. For some, the timing of the program’s end aligned well with new stability: “*The wrapping up...couldn’t have been a more perfect timing now that I do have a job now...HudsonUP has really helped me.*” Others sought ways to stay connected, expressing interest in “*any more programs that I could take advantage of.*”

6. Interpretation: HudsonUP in the Broader Context

The findings presented here should be interpreted with appropriate caution. HudsonUP is a relatively small pilot, with modest sample sizes in each cohort and no comparison group, limiting statistical power and making it difficult to attribute outcomes solely to the program. As with many basic and guaranteed income pilots, the study relies heavily on self-reported survey and interview data, raising the possibility of selection bias and inconsistent response patterns over time. Hudson’s unique housing market and economic dynamics also shape participants’ experiences in ways that may not generalize directly to all communities. At the same time, Hudson represents an intensified version of challenges seen across the United States: rising inequality, escalating housing costs, wage stagnation, and widening financial precarity. Importantly, the trends observed here are consistent with the broader evidence base summarized in national meta-analyses and literature reviews, which find that unconditional cash transfers reliably improve financial stability, reduce hardship, and support household decision-making across diverse settings (Inclusive Economy Lab, 2025; Nishimura et al., 2025; Rizvi et al., 2024). In this context, the HudsonUP results contribute nuanced, place-based evidence to a growing body of research on the role of basic income in mitigating economic volatility.

The experiences of HudsonUP participants in the past five years suggest that basic income can prevent crises and support stability. Still, it does not fully overcome structural inequities rooted in housing markets, low wages, and inadequate healthcare. The program’s effectiveness lies in buffering individuals against shocks; it buys time to find jobs, care for family, and address urgent needs. Participants also did not significantly reduce their work effort, debunking concerns that unconditional cash transfers discourage labor.

Yet, housing costs have outpaced wages dramatically. The city's loss of affordable rental stock and influx of high-earning residents created a rent gap that \$500 per month cannot bridge. Many participants remained severely rent-burdened and could not accumulate significant savings. Similarly, chronic health conditions and systemic healthcare gaps limited gains in well-being.

Consequently, HudsonUP's outcomes underscore the need for complementary structural reforms. Basic and guaranteed income proposals should be paired with policies that expand affordable housing, raise wages in service sectors, and ensure universal healthcare. Without addressing these systemic drivers, cash alone offers temporary relief, not long-term security.

7. Conclusion

HudsonUP illustrates the promise and limitations of basic income. In a small city grappling with deindustrialization, gentrification, and skyrocketing housing costs, unconditional cash provided immediate stability, dignity, and opportunity. Participants reduced stress, cared for family members, and engaged in their community. The program fostered a sense of reciprocity and shifted attitudes toward social welfare. Yet the broader structural issues—housing shortages, wage stagnation, and inadequate healthcare—constrained long-term gains. As the pilot concludes over the next two years, the insights gleaned from HudsonUP should inform broader debates about social policy. Cash transfers must be part of a comprehensive strategy that also tackles housing, healthcare, and labor reform. Only then can communities like Hudson achieve lasting economic security and equity.

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Appendix A: Selection Procedures

Recruitment

For each of the three cohorts, an online survey to apply for the HudsonUP program was launched and remained open for several weeks. The HudsonUP advisory board and Greater Hudson Promise Neighborhood staff ensured that the application was widely circulated in the community. The online survey collected basic demographic data, including name, email address, physical address, phone number, racial and ethnic identity, gender, last month's income, and a preferred contact method.

Weighted Randomization

The randomization was weighted on income, race/ethnicity, and gender identity, given the location-based propensity to achieve median income as calculated by the [Opportunity Atlas](#). The likelihood of reaching median income was proxied on publicly available data from the Opportunity Atlas. The income variable was dichotomized into low (less than or equal to \$25,540) or moderate (greater than \$25,540 and less than the threshold of \$35,153). The gender variable was collapsed from male, female, non-binary/non-conforming, and transgender to only two attributes: male or female. Non-binary/non-conforming and transgender respondents were categorized as "female," due to the lack of available data on the economic outcomes of these gender identities in the Opportunity Atlas data. The race and ethnicity variable included the following attributes: White, Black, or Hispanic. The census tract variable included either tract 1200 or 1300.

Appendix B: Research Design

This mixed-methods longitudinal inquiry follows the lives of 128 individuals receiving an unconditional monthly income of \$500 for five years, starting with a cohort of 25 recipients and expanding to 50 additional recipients in late 2021 and 53 in late 2022. After being selected, participants were invited to join the research component, with assurances that declining the invitation would not impact their payments. Ultimately, 15 participants from the first cohort, 23 from the second, and 17 from the third opted to participate in the research process. Participants were compensated \$20 per survey and interview they completed, increasing to \$40 in the final years of the evaluation.

This type of research is an excellent fit for a constructivist phenomenological approach, which “describes the common meaning for several individuals of the lived experiences of a concept or phenomenon” (Creswell & Poth, 2017). While phenomenological research design is best implemented with 10 or fewer participants (Dukes, 1984), including more participants allows for the likelihood of attrition over the course of five years. To ensure data quality, qualitative data triangulation was achieved through peer review and “member checking.” Member checking, described as “the most critical technique for establishing credibility,” is the process of allowing participants to give feedback on summative themes.

Our research questions explore the effects of basic income on recipients’ health, income, assets, family relationships, well-being, employment, and future orientation. Data collection includes biannual, semi-structured, in-depth interviews capturing changes to participants’ lives and their perceptions of the role of basic income in this trajectory. In addition to qualitative interviews, participants are asked to complete two validated and reliable scales on a biannual basis: 1) the Short Form 36 measures physical and emotional well-being, and 2) the Kessler 10 measures psychological distress. Because the sample size is relatively small, quantitative outcomes are analyzed via descriptive statistics only.

Due to the ongoing COVID-19 pandemic, the research design has necessarily adapted to safety considerations, travel restrictions, and participant comfort. Participants are offered the option of either face-to-face or phone interviews. In the winters of 2021 and 2022, interview collection was conducted over the phone only due to the peaking of COVID variants. Because the study involves deeply personal discussions with potentially vulnerable populations, the research is designed to prioritize ethical procedures. University Institutional Review Board (IRB) approval was received in November 2020. All potential participants were then informed of the research process, including their absolute right not to participate or to discontinue participation at any moment. Recipients were informed that their participation in the research project has no bearing on their payments through the pilot project. Additionally, participants were informed that all data is anonymized and scrubbed of identifying data before publication.

Appendix C. Tables

Survey Response Rates

Wave	Cohort 1	Cohort 2	Cohort 3	Sum	Overall Response Rate
Wave 1 (1/21)	11	—	—	11	0.44
Wave 2 (7/21)	7	—	—	7	0.28
Wave 3 (1/22)	11	15	—	26	0.35
Wave 4 (7/22)	9	11	—	20	0.27
Wave 5 (1/23)	9	10	10	29	0.23
Wave 6 (7/23)	7	10	9	26	0.20
Wave 7 (1/24)	7	10	6	23	0.18
Wave 8 (7/24)	9	10	7	26	0.20
Wave 9 (1/25)	9	9	11	29	0.23
Wave 10 (7/25)	7	7	8	22	0.17

Interview Response Rates

Wave	Cohort 1	Cohort 2	Cohort 3	Sum	Overall Response Rate
Wave 1 (1/21)	15	—	—	15	0.60
Wave 2 (7/21)	10	—	—	10	0.40
Wave 3 (1/22)	12	12	—	24	0.32
Wave 4 (7/22)	12	7	—	19	0.25
Wave 5 (1/23)	7	3	3	13	0.10
Wave 6 (7/23)	4	3	3	10	0.08
Wave 7 (1/24)	5	7	3	15	0.12
Wave 8 (7/24)	5	4	4	13	0.10
Wave 9 (1/25)	6	6	4	16	0.13
Wave 10 (7/25)	7	5	2	14	0.11