

# Summary Findings from Interviews with Program Participants

## Wilder's Direct Housing Assistance

Wilder's Direct Housing Assistance (DHA) Program provides financial assistance to households through monthly rental or mortgage subsidies. The program offers help to households who fall outside the qualifications for public support, but still need help. Typically, funds are distributed to households through payments to their landlords or mortgage holders. Over the course of 12 months, Wilder provides up to \$3,000 for each participating household using a step-down or decreased level of support throughout the year. Households receive \$350 for the first six months of the program, \$200 for the subsequent three months, and \$100 for the remaining three months.

### Eligibility for participation in the DHA program

- Must be an enrolled participant and in good standing with one of the following Amherst H. Wilder Foundation services at the time of application: mental and chemical health services, healthy aging and caregiving services, childcare and preschool services, community leadership programs (in previous years, participants would have also been eligible via Twin Cities Mobile Market or Family Independence Initiative).
- Currently housed in a market-rate housing unit and not receiving another housing subsidy, or be a homeowner with their name listed on the mortgage deed.
- Meet income and household size requirements according to the 2019 HUD Income Guidelines (Adj. FY2019 Federal Poverty Guidelines at 80%).
- Not have participated in the Direct Housing Assistance Program within the past 12 months.

### DHA households served

Figure 1 provides a breakdown of households and children supported by DHA by fiscal year.

#### 1. DHA HOUSEHOLDS SERVED BY FISCAL YEAR

Fiscal year	# households served	# children served (under 18)
FY20 (July 2019-June 2020)	50	131
FY21 (July 2020-June 2021)	19	50
FY22 (July 2021-June 2022)	41	40
FY23 (July 2022-June 2023)	148	226
<b>Total</b>	<b>258</b>	<b>447</b>

# Overview

To learn more about participants’ experiences with the DHA program, Wilder Research conducted telephone interviews with participants once they had been enrolled in the program for at least nine months. Specifically, Wilder Research and Wilder Foundation staff sought to better understand the impact of the DHA program for participants and their families—especially their children—particularly with regard to their finances and overall health and social well-being. Additionally, Wilder Research and Wilder Foundation wanted to learn about participants’ perceptions and experiences with the DHA process.

This summary details feedback from participants on both DHA outcomes and the DHA process. The summary will be used to inform leadership and planning to maintain and improve the DHA process.

## Methods

### Sample

Figure two shows the number of DHA interview responses and response rates by fiscal year. Response rates were substantially lower during years one and two—presumably due to COVID and the challenges that it presented to research and evaluation. Years three and four of the program had both increased participation and response rate. Year four would likely have had a higher response rate but data was only collected for nine months instead of a full year.

### 2. SAMPLE & RESPONSE RATE

Fiscal year	# of households served	# of households interviewed	Average participant response rate
FY20 (July 2019-June 2020)	50	9	41%
FY21 (July 2020-June 2021)	19	4	22%
FY22 (July 2021-June 2022)	41	29	71%
FY23 (July 2022-June 2023)	148	63	43%
<b>Total</b>	<b>258</b>	<b>105</b>	<b>44%</b>

### Data collection

Wilder Research reached out to DHA participants on a rolling basis beginning around nine months after they started participating in the program. This means that participants would be three-quarters of the way through the program and have received approximately 75% of the full \$3,000 DHA stipend. This point in time for data collection allowed participants the time to reflect on how the intended support was impacting their lives, whether the process was simple or complicated, how interactions with staff had gone, and what could have improved their experience.

### Mixed-methods analysis

Wilder Research thematically coded the open-ended questions to allow for counts and frequencies. Themes were created for responses in which at least two or more respondents reported a similar response. In cases in which there were less than two respondents who provided a response comparable to other responses, the analysis team coded it as “other.” In cases where respondents did not answer the question, cases were reported as missing or refused.

To ensure validity and reliability of the qualitative analysis, multiple researchers examined and discussed the thematic codes to ensure the accuracy of analysis several times. It is important to note several important factors when interpreting the data in the tables:

- Unless otherwise stated, frequencies for open-ended questions refer to the number of unique times or cases in which all respondents described that theme. This means that there is not a one-to-one ratio between the number of respondents and the number of cases or frequency of the themes.
- Qualitative themes that emerged were not necessarily mutually-exclusive or discrete meaning that just because a respondent did not provide a response does not indicate they would not endorse it.
- Consistent with thematic coding, frequencies are not necessarily mutually exclusive or discrete.

## Results

### Finances before and after DHA

Participants were asked questions about their financial situations—including biggest needs prior to receiving DHA, whether or not DHA helped them with their biggest financial need, and how they used any extra money that they did not have to use for rent or mortgage costs.

#### Financial needs that DHA helped with

The biggest area of financial need prior to getting DHA was rent and mortgage, followed by housing utilities, and then basic needs (Figure 3).

### 3. “BEFORE YOU GOT DIRECT HOUSING ASSISTANCE, WHAT WAS YOUR BIGGEST AREA OF FINANCIAL NEED?” (OPEN-ENDED)

Area of financial need, N=103	# of cases <sup>a</sup>	% of respondents <sup>b</sup>
Rent or mortgage	79	77%
Housing utilities	15	15%
Individual & family basic needs	12	12%
Car or transportation	9	9%
Other	4	4%
<b>Total</b>	<b>119 <sup>c</sup></b>	

<sup>a</sup> The # of cases refers to the number of times the particular “area of financial need” was described by all individual respondents. Some respondents provided responses that covered multiple thematic needs. Thus, the total (n=119) is greater than the total number of respondents (N=103).

<sup>b</sup> The % of respondents refers to the proportion of respondents who described the thematic “area of financial need” out of the total number of respondents who answered the question (N=103). Due to the open-ended structure of the question allowing respondents to describe all “areas of financial need”, the % of respondents’ column does not sum to 100%.

When asked if DHA helped with their area of biggest financial need, the majority of respondents (96%) said yes.

**4. DO YOU THINK DIRECT HOUSING ASSISTANCE HELPED YOU WITH THIS? (CLOSE-ENDED)**

<b>Helpful, N=103</b>	<b># of respondents</b>	<b>% of respondents</b>
Yes, it helped	99	96%
No, it did not help	1	1%
Missing/refused	3	3%
<b>Total</b>	<b>103</b>	<b>100%</b>

Consistent with responses about area of biggest financial need prior to DHA, respondents most frequently reported using any additional funds no longer dedicated to paying rent or mortgage payments for covering other housing related expenses such as utilities and/or other bills (40% of cases), followed by covering the cost of their individual and families’ basic needs (e.g., groceries, clothing, medical necessities, school supplies and/or extracurricular activities for children; 26% of cases). Still, nearly 20% of respondents reported that at some point, and possibly, up until the end of receipt of DHA support, they never had additional money to cover other expenses or savings after paying their rent and mortgage. Just over 10% of respondents reported being able to repair credit and/or pay down debt. Furthermore, five percent of respondents reported being able to create savings, including using money for down payments for homes or to start a small business.

**5. HOW DID YOU USE THE EXTRA MONEY THAT YOU WERE NOT PAYING TOWARDS RENT OR A MORTGAGE? (OPEN-ENDED)**

<b>Use of extra money, N=103</b>	<b># of cases <sup>a</sup></b>	<b>% of respondents <sup>b</sup></b>
Housing utilities and/or other bills	64	62%
Individual/family basic needs	41	40%
No extra money after rent/mortgage	28	27%
Credit repair/pay down	19	18%
Investment/savings	8	8%
<b>Total</b>	<b>160</b>	

<sup>a</sup> The # of cases refers to the number of times this particular “use of extra money” was described by all individual respondents. Some respondents provided responses that covered multiple thematic uses. Thus, the total (n=119) is greater than the total number of respondents (N=103).

<sup>b</sup> The % of respondents refers to the proportion of respondents who described the thematic “use of extra money” out of the total number of respondents who answered the question (N=103). Due to the open-ended structure of the question allowing respondents to describe all “uses of extra money”, the % of respondents’ column does not sum to 100%.

## How DHA helped participants

### Financial and social impacts

Figure 6 and the quotes below provide more detail regarding the impact of DHA assistance.

#### 6. WHY DO YOU SAY THAT- YES, IT HELPED OR NO, IT DID NOT HELP? (OPEN-ENDED)

Ways that DHA helped, N=102	# of cases <sup>a</sup>	% of respondents <sup>b</sup>
Relieved burden/pressure/stress	38	37%
Rent/mortgage was not affordable without DHA	37	36%
DHA made other financial responsibilities possible (e.g., paying down debt)	35	34%
Ability to use income to meet other basic needs because of DHA	17	17%
DHA made it easier to provide for and/or emotionally support children	17	17%
DHA made savings/investment possible (e.g., step down and stabilization)	10	10%
DHA provided some help but not enough help	7	7%
<b>Total</b>	<b>161</b>	

<sup>a</sup> The # of cases refers to the number of times this particular “ways that DHA helped” was described by all individual respondents. Some respondents provided responses that covered multiple thematic “ways that DHA helped”. Thus, the total (n=161) is greater than the total number of respondents (N=102).

<sup>b</sup> The % of respondents refers to the proportion of respondents who described the thematic “ways that DHA helped” out of the total number of respondents who answered the question (N=102). Due to the open-ended structure of the question allowing respondents to describe all “ways that DHA helped”, the % of respondents’ column does not sum to 100%.

The quotes below illustrate the themes in Figure 6 above and demonstrate the extent of help in participant’s own words. Of particular importance to note is that of the seven instances in which responses were coded as “DHA provided some help but not enough,” respondents indicated their circumstances were less dire, but still relatively financially unstable at the time of the interview and/or the foreseeable future.

#### Relieved burden/pressure/stress

*For one, I'm not evicted. It was a guaranteed commitment that we would have a roof over our head. This helped me with stress and alleviated my mental health concerns.*

*Having to reach outside of myself. You want to be able to secure your family on your own. The reality of me not being able to do that; I was disappointed in myself and fearful that my kids might be disappointed. All the hard work I do does not pay enough to take care of them. I do what I do to secure and take care of my kids. So, it lessened the stress. I wasn't doing my third job. I got to spend more time with my kids. It helped with my quality of life.*

## **Rent/mortgage was not affordable without DHA**

*For one, how I look at programs, I've never been in one before. We would just stay in a hotel, being homeless on my own.*

*It helped me when I didn't have help from anywhere else. In a situation where I mean a person needs a roof over their head. It costs a lot of money to move. And you can't go to another rental housing place and say hey I'm 60+ years old and I've got a good rental reference but I don't have any money. I just have this little small social security check. Do you think they are going to rent to you? I don't think so. So, it's huge, it's very helpful. It kept me where I was at. And I wasn't paying late fees [anymore] because I could come up with my part.*

## **Ability to use income to meet other basic needs because of DHA**

*When I applied for the program I was working three jobs. I wanted to quit the third job before but couldn't because that was my grocery money and gas money. With the assistance, I could make a list and not have to grocery hunt at food shelves. I would go to a grocery store and buy without having to spend money on Uber to go to several food shelves.*

*It gave me money to buy extra food I needed and the supplies, housing things, my medicine that I was skipping to pay the rent.*

## **DHA made other financial responsibilities possible (e.g., paying down debt)**

*It helped me work on my credit and maintain stability.*

*It gave me hope. I was drowning financially. It helped me gain financial stability. It made me more aware of my financial responsibilities. I have always played catch up where my bills were concerned so it helped pay off some debts.*

## **DHA made it easier to provide for and/or emotionally support children**

*It allowed me to get my feet on solid ground. I took a step back to reevaluate habits for my financial and mental health. I have more time, energy, and space to dedicate to my kids' interests. I was able to afford the needs of my children.*

*Because it covered the extra money I needed to pay my rent. Even if I was working I would have to pick up extra shifts just to have enough to pay my rent so this really helped me spend time with my kids instead of working extra hours.*

## **DHA made savings/investment possible (e.g., step down and stabilization)**

*It kept me and my family in my home until I could get other income. It helped me to start a side business to make our lives better. Money is usually my biggest stressor. I get really stressed out when I can't pay my bills.*

*It taught me how to save and budget. Even though they were helping, they weren't paying all my rent. It taught me how to budget. I knew eventually every couple of months that I would have to pay more—actually budget money. I got to do this, I got to grocery shop. First time in my life that I didn't receive food stamps, I was paying cash out of pocket, I was a single parent. It taught me how to manage money better. I've always had a problem with that.*

## **DHA provided some help but not enough help**

*It made it so I could pay the rent to the landlord. I'm now alone. I live poorly. I don't have money. It's going as good as it can go.*

*It didn't help all the way because rent went up and my paycheck went down due to illness in the family and not being able to make it to work.*

## Whole family social and emotional well-being related to DHA

### Impact on parent/caregiver well-being

Figures 7-9 further illustrate the helpfulness and impact of the DHA program. Respondents were given a list of situations and asked if they got better, stayed the same, or got worse after receiving DHA. The highest percentage of respondents said hopefulness for the future and their financial situation got better (Figure 7). Fewer respondents said participation in community events and physical health got better after receiving DHA.

#### 7. HELPFULNESS OF DHA ON SOCIAL, EMOTIONAL, AND PHYSICAL WELL-BEING (CLOSE-ENDED)

Please think about the following situations the month before you got DHA. Then think about the last month that you were receiving DHA. Did it get better, stay about the same, or get worse?

Situation	Got better	Stayed about the same	Got worse
Hopefulness for the future, N=97	65%	29%	5%
Financial situation, N =100	55%	35%	10%
Housing situation, N =99	51%	40%	8%
Mental health, N =100	51%	34%	15%
Relationship with family, N =96	45%	49%	7%
Participation in community events, N =97	32%	57%	11%
Physical health, N =100	29%	52%	19%

Note: Totals may not sum to 100% due to rounding.

### Impact on children according to parents/caregivers

Some parents/caregivers believed that their children's mental and academic well-being improved while receiving DHA, more respondents however felt that their children remained the same (Figure 8).

#### 8. HELPFULNESS OF DHA ON CHILDREN'S MENTAL & ACADEMIC WELL-BEING (CLOSE-ENDED)

Please think about the following situations, while focusing on the children in your household. Think about the month before you got DHA and then think about the last month that you were receiving DHA. Did it get better, stay about the same, or get worse?

Situation	Got better	Stayed about the same	Got worse
School attendance, N =55	16%	73%	11%
Children's grades, N =54	19%	78%	4%
Children's mental health, N =58	34%	62%	3%

Note: Totals may not sum to 100% due to rounding.

Direct quotes from parents suggest that while some parents felt that DHA did not impact or seem to be associated with their children's social, mental, or academic wellbeing, others convey that they believed their children might have been indirectly impacted despite the children themselves often—though not always—being unaware of the assistance. Furthermore, while there were no respondents who described feeling that DHA negatively impacted their children, there were some cases in which respondents acknowledged their children doing worse mentally and academically while their family received DHA.

## DHA impact on children: parents' & caregivers' own words

The quotes below suggest that children may not always be aware of their family's financial circumstances.

*It did not change anything at all for my three children.*

*I don't think it really did because he didn't really know the situation I was in. I don't let him know those things. So, he was clueless about things that were going on as far as I know.*

*They were oblivious to what was going on. It was me having more energy to give them time.*

*Well whether they know it or not, we were able to secure a roof over their head.*

## Satisfaction with the assistance program

In addition to questions about receiving DHA funds, participants were asked about their experiences with the DHA process, including interactions with staff, thoughts about the step-down model, and how to improve the program overall. The figures and quotes below suggest that the majority of participants were satisfied with the program.

### 9. THINKING BACK TO WHEN YOU MET WITH WILDER STAFF (BEFORE YOU GOT THE HOUSING ASSISTANCE), PLEASE TELL ME HOW WELL THEY EXPLAINED THE STEP-DOWN DATES/AMOUNTS (CLOSE-ENDED)

Quality of explanation, N=89	# of respondents	% of respondents
Very well	72	81%
Not very well	8	9%
Don't remember	9	10%
<b>Total</b>	<b>89</b>	<b>100%</b>

### 10. THINKING BACK TO WHEN YOU MET WITH WILDER STAFF (BEFORE YOU GOT THE HOUSING ASSISTANCE), PLEASE TELL ME HOW WELL THEY EXPLAINED THAT THE MONEY GOES DIRECTLY TO THE LANDLORD/MORTGAGE COMPANY (CLOSE-ENDED)

Quality of explanation, N=89	# of respondents	% of respondents
Very well	83	93%
Not very well	4	5%
Don't remember	2	2%
<b>Total</b>	<b>89</b>	<b>100%</b>

### 11. THINKING BACK TO WHEN YOU MET WITH WILDER STAFF (BEFORE YOU GOT THE HOUSING ASSISTANCE), PLEASE TELL ME HOW WELL THEY EXPLAINED PROGRAM REQUIREMENTS (CLOSE-ENDED)

Quality of explanation, N=89	# of respondents	% of respondents
Very well	76	85%
Not very well	4	5%
Don't remember	9	10%
<b>Total</b>	<b>89</b>	<b>100%</b>



## Comments about working with staff

Additional feedback from respondents about their experiences working with staff suggest very positive interactions with staff for the most part. Respondents reported feeling that their questions were answered, that they were provided with useful information, and that they appreciated being able to work directly with one staff member.

*I had the same person who helped me. The initial man who did the application was the same person throughout-- I really liked that. It felt more personal. He wasn't just trying to do a job. He understood what I was going through and put that personal effect on it. Anytime I reached out to him after I was approved, he was there and really helped out.*

*They were available and gave me the resources right away. I like giving one person all my personal information because if you start giving this information to multiple staff then someone starts to drop the ball and it gets so confusing and tangled up.*

*I've never had any direct contact with anyone other than e-mails. Have not spoken to anyone either but I have nothing negative to say; all is positive.*

*Well everything was educational. They were straight to the point, it was an easy process. They made everything easy even when my landlord wasn't in communication. They made the process really easy, and they were extremely helpful.*

## Suggestions for program improvement

When asked how the DHA process and program might be improved, respondents provided mixed feedback. Forty-four percent stated that the DHA model process is good as is (Figure 12). However, 31% suggested improving program coordination via more effective communication, more assistance with paperwork, and/or more communication about how the program works. In addition, 16% noted wanting the program to either provide an even distribution of funds throughout the duration of the program and/or extend the amount of time that support is offered. Finally, 8% mentioned interest in additional financial literacy education.

### 12. WHAT COULD WILDER DO TO IMPROVE THE ASSISTANCE PROCESS FOR FAMILIES (OPEN-ENDED)

<b>Suggestions for improvement N=99</b>	<b># of respondents</b>	<b>% of respondents</b>
Model/program is good as is	44	44%
Improving program coordination and providing more information	31	31%
Didn't feel prepared for step-down process	16	16%
Increase financial literacy	8	8%
<b>Total</b>	<b>99</b>	<b>99%</b>

## How to improve the DHA program & process in their own words

*Improve by reaching out to the client to make sure they are financially stable enough to do the step-down amount.*

*Have families [reevaluated] towards the end of the program to see if they are financially fit to keep paying the rent, if not then extend the assistance.*

*Make families aware that it's [DHA] available to them. I had never heard of this program and I have lived in St. Paul my whole life. They should connect with other organizations and promote this program.*

*Probably make the application more accessible... If you make a mistake you have to start all over and also you can't fill it out on a phone you need a laptop. It takes a long time to complete and it asks about so much personal information. There were so many technical issues. It was too technology savvy. So, maybe a better option would be offering a hard copy application and a drop box or something like that—not everybody has a computer or has the time to fill out an application this way. And, I don't know how to upload an I.D. and other verifications and requirements.*

*I really don't use e-mails that much and would prefer a phone call but she said she never called me. So, they should try all sorts of [communication] methods to get a hold of the participants.*

*It would be really helpful to have classes, especially if it is in-house. The classes would motivate people more. I am doing some of this. This would help people not just get out but stay out of financial difficulty.*

## Conclusion

The survey results suggest that the DHA program provided helpful support to individuals and families in need. The majority of participants reported experiencing financial strain paying their rent/mortgage and housing utilities prior to DHA. Almost all (96%) of the participants who responded, said that the DHA program helped to improve their financial situations. Participant responses also broadly suggest that the program and process are simple, and that opportunities to directly interact with DHA staff are beneficial. Additionally, participants described the overall impact of the program as largely helping to alleviate social and emotional stress and anxiety about finances, and even making it possible to support their families and children more broadly.

Along with the benefits of the program, respondents also suggested that there might be possibilities for improving the DHA program and process. These suggestions included: providing greater flexibility and accommodations for families with more complex situations, offering additional coaching around the step-down process, and providing more financial literacy options. Based on feedback from respondents, future iterations of the DHA program might include considerations for providing participants with an option to participate in the step-down model or receive funds distributed evenly across the duration of the program. When possible and where resources allow, the program might also offer greater amounts of funding and/or provide a longer period of assistance.

Although the growing number of pilots testing guaranteed basic income have been growing at the fastest rates in the 21<sup>st</sup> century, there have long been reputable arguments in favor of these options by politicians such as Thomas Paine, economists such as Milton Friedman, and even Civil Rights leader Reverend, Dr., Martin Luther King Jr. (Greenwell, 2022; Parker, 2018). Data from the PEW Research Center also suggests that age, racial identity, ethnicity, politics, and socioeconomic status all seem to play a role in shaping Americans attitudes about guaranteed and universal supports similar to DHA (Gilberstadt, 2020). Historians like Jennifer Burns and Milton Friedman of the Hoover Institution at Stanford University have noted that some of the strongest arguments against such programs may be infeasibility and cost, however providing basic income for all—save those at the higher ends of the economic earnings spectrum—helps to thwart the possibility of families ever hitting economic bottom (Parker 2018).

While pilot programs like DHA appear to be gaining greater traction, especially within the past decade, the relationship between receiving housing/income supports and improved outcomes is not yet fully understood. Limited by sample size, the results from this evaluation suggest that there may be a positive relationship between receipt of support for both adults and children—including social, emotional, and academic outcomes. However, more research is needed to better understand the significance and strength of such supports. Future research and evaluation are warranted that investigate how such programs contribute to individual's and whole family's sense of well-being, hopefulness, independence, stability, and growth. Unlike other guaranteed income programs, DHA provides monetary assistance

directly to landlords and mortgage institutions. In the future, it might be apt to conduct randomized controls to investigate the impact of housing assistance in comparison to options such as direct cash assistance to individuals and families. Other avenues for consideration might include: the significance or extent of impact for adults and youth based on amounts of assistance provided; impact based on the length of time that assistance is provided to individuals and families; social, emotional, and academic outcomes for youth based on whether or not they are aware of their family's receipt of such assistance.

## Citations

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### For more information

This summary presents highlights of the *DIRECT HOUSING ASSISTANCE program*.

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