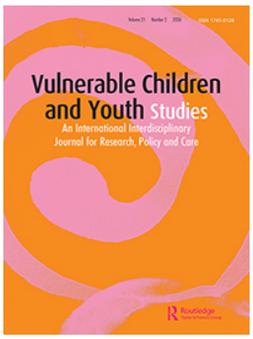

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Vulnerable Children and Youth Studies

An International Interdisciplinary Journal for Research, Policy and Care

ISSN: 1745-0128 (Print) 1745-0136 (Online) Journal homepage: www.tandfonline.com/journals/rvch20

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To cite this article: Johanna K. P. Greeson , John R. Gyourko , Sarah Wasch , Kristen Mallory , Lory Fehlig , Cesar Jácome , Nestor David Lara Yanes , Fátima Areli Ruiz Gutiérrez , Dennis Guamos & Adele R. Lehman (26 Aug 2026): Connecting families through cash transfers and an enabling environment in Colombia, Mexico, and the Philippines: a qualitative study, Vulnerable Children and Youth Studies, DOI: 10.1080/17450128.2026.2723841

To link to this article: https://doi.org/10.1080/17450128.2026.2723841

VULNERABLE CHILDREN AND YOUTH STUDIES
https://doi.org/10.1080/17450128.2026.2723841

Connecting families through cash transfers and an enabling environment in Colombia, Mexico, and the Philippines: a qualitative study

Johanna K. P. Greeson [a,b], John R. Gyourko [c], Sarah Wasch [b], Kristen Mallory [d], Lory Fehlig [d], Cesar Jácome [d], Nestor David Lara Yanes [d], Fátima Areli Ruiz Gutiérrez [d], Dennis Guamos [d] and Adele R. Lehman [b]

[a]School of Social Policy & Practice, University of Pennsylvania, Philadelphia, PA, USA; [b]The Field Center for Children's Policy, Practice & Research, Philadelphia, PA, USA; [c]Department of Social Work, James Madison University, Harrisonburg, VA, USA; [d]Children International, Kansas City, MO, USA

ABSTRACT

Nearly 700 million people worldwide live in extreme poverty, and almost half of the world's population lives below the poverty line. Cash transfer programs are increasingly used to address poverty's effects on family well-being, yet less is known about how families experience programs that combine cash transfers with peer-driven mutual aid. Children International's (CI) Community Independence Initiative (CII) provides conditional cash transfers and promotes family-led goal setting, mutual support, and shared learning. This qualitative study explored how families in Colombia, Mexico, and the Philippines experienced CII and made meaning of its material and relational components. We conducted focus groups with 51 adult and child participants from families who had completed CII. Thematic analysis revealed three themes that together reflected participants' experience of CII over time: (1) Entering CII amid persistent family and economic strain; (2) Experiencing CII as both material support and collective problem-solving; and (3) Carrying forward connection and resilience while economic hardship persisted. Participants described CII as meaningful not only because of the cash transfers, which helped families meet immediate needs and invest in priorities such as education, household needs, health, and small businesses, but also because of the peer-driven structure that supported shared learning, mutual aid, family communication, and social connection. Although some relational and resilience-related benefits endured after the program ended, families continued to experience substantial economic hardship. Findings suggest that anti-poverty initiatives may be strengthened by integrating flexible material support with opportunities for peer connection and collective problem-solving, while also recognizing the limits of time-limited interventions in the context of persistent structural poverty.

ARTICLE HISTORY
Received 13 June 2025
Accepted 17 August 2026

KEYWORDS
Cash transfer programs; peer-driven change; global poverty; qualitative study; focus groups

CONTACT Johanna K. P. Greeson jgreeson@upenn.edu School of Social Policy & Practice, University of Pennsylvania, 3701 Locust Walk, Philadelphia, PA 19104

Supplemental data for this article can be accessed online at https://doi.org/10.1080/17450128.2026.2723841.

Introduction

Nearly 700 million people worldwide live in extreme poverty, subsisting on less than the equivalent of $2.15 per day, the global extreme poverty line set by the World Bank, and almost half of the world's population lives under the poverty line defined by high income countries of $6.85 per day (The World Bank, 2023).[1] To address the myriad effects of poverty on family well-being, including health, education, employment, child development and more (Atkinson & Bourguignon, 2013; Grantham McGregor et al., 2007; Marmot et al., 2008; McDonough et al., 2005), many countries and organizations have started to implement cash transfer programs (CTPs) in the past few decades (Bastagli et al., 2018; Rawlings & Rubio, 2005).

Whereas many anti-poverty initiatives involve providing services to individuals to address their financial stressors, CTPs involve the direct provision of money to individuals and families who decide how the money is utilized (World Health Organization, 2013; Zheng et al., 2022). CTPs typically fall into two broad categories – conditional and unconditional (Gaarder, 2012). Conditional cash transfers (CCTs) provide money to economically disadvantaged people under the condition that they adhere to certain predetermined requirements, such as children's regular school attendance and staying up to date on vaccinations (Hartarto et al., 2021; Ranganathan & Lagarde, 2012). Unconditional cash transfers (UCTs) provide money to people without any requirements for receiving cash (Haushofer & Shapiro, 2013; Pega et al., 2022).

Complementary approaches to poverty reduction and community development involve the creation or support of community networks that work together to strengthen families. Often called peer-driven change efforts, or mutual aid networks, this method of allowing individuals to work together to solve their own problems shows promise in impacting families in poverty (Miller, 2017). Peer-driven change involves individuals and families leading change for themselves, providing mutual support to one another, and an investment of financial capital from external sources (Menezes et al., 2020).

One such organization that implements a combination of cash transfers and mutual aid is Children International (CI). CI piloted the Community Independence Initiative (CII) to invest in the talents, strengths, and ingenuity of people living in low-resource communities. The initiative offers no services or advice to families. Instead, it provides a structure within which families set their own goals and strengthen social networks that support their progress, in addition to the receipt of a regular conditional cash investment (Children International, 2024).

The CII represents a significant shift towards self-help and peer-driven change in community development. Understanding the initiative, the experiences of the participants, and exploring the rich context within which the intervention was delivered are vitally important to the expansion and replication of programs that hold the potential to empower communities to leverage their own resources and networks to create sustainable change. Here, we report findings from a qualitative focus group study to elucidate in-depth the experiences of the participants and the community context within which the CII was implemented. These findings offer important lessons learned for future initiatives aimed at fostering independence and resilience in low-income communities through conditional cash transfer programs.

Literature review

Impacts of cash transfer programs on families in low-income countries

Families in low- and middle-income countries (LMICs) often face limited access to food, healthcare, and education, contributing to poor health, low school enrollment, and other negative outcomes (Grantham McGregor et al., 2007; Hussain & Schech, 2021; McDonough et al., 2005). In response, many LMICs have implemented cash transfer programs (CTPs) to reduce poverty and strengthen family functioning. CTPs originated in Latin America in the 1990s, with Mexico's conditional cash transfer (CCT) program Oportunidades emerging during economic crisis and inequality (Fernald et al., 2009; Levy & Schady, 2013; Millán et al., 2019), and have since expanded globally, particularly across Africa and Asia. Programs may be unconditional (UCT), conditional (CCT), or mixed, with UCTs more common in sub-Saharan Africa and CCTs more prevalent in Latin America (Owusu-Addo et al., 2023; Schubert & Slater, 2006).

Research shows positive effects of CTPs on family well-being, including financial stability, education, nutrition, employment, and empowerment (Bastagli et al., 2018; Nnaeme et al., 2022; Rawlings & Rubio, 2005). Bastagli et al. (2018) documented gains across six domains in a review of 165 studies, while Baird et al. (2013, 2014) found stronger schooling effects for CCTs, though few robust studies directly compare conditional and unconditional models. Although CTPs aim to interrupt intergenerational poverty and build human capital (Rawlings & Rubio, 2005), long-term effects remain less understood because most evaluations occur during or shortly after implementation (Baird et al., 2014; Owusu-Addo et al., 2023). For example, Baird et al. (2019) found sustained educational gains among adolescent girls in Malawi two years post-intervention, but no gains in household income or consumption. Beyond economic outcomes, cash transfers may also increase bonding and social networks, contributing to social capital (Grisolia et al., 2024).

Experiences of families and recipients of poverty-intervention programming

Participants' lived experiences are essential for understanding CTPs' broader impact, yet fewer studies examine how recipients perceive, navigate, and make meaning of these programs (Adato et al., 2011; MacAuslan & Riemenschneider, 2011; Yoshino et al., 2023). Through ethnographies and focus groups with 500 households across four countries, Adato et al. (2011) found that cultural norms often mediate program outcomes; Banda et al. (2019) similarly found that equal access and community acceptance were critical to success in Zambia.

Qualitative research also highlights social interaction and training as pathways to self-esteem, decision-making, and empowerment. In Peru, a mixed-methods study with six focus groups and 48 interviews found that CCT participation bolstered women's agency (Alcázar et al., 2016). In Mexico, Breckin (2023) interviewed 47 long-term participants who credited CTPs, especially those coupled with education, with preventing intergenerational poverty. Yoshino et al. (2023) synthesis of 41 qualitative studies found that cash transfers helped meet immediate needs and enhanced autonomy and social cohesion, but participants often wanted additional support, larger sums, and fewer barriers related to stigma, unequal access, and logistics.

The community independence initiative (CII)

To help families and communities thrive, Children International piloted the CII to complement its child and youth development model, with funding from the Aviv Foundation and CI's general sponsorship funds. CII was implemented with 373 families in Colombia, Mexico, and the Philippines from 2020 to 2022; 354 families remained at the program's conclusion. Organization directors nominated one to two family liaisons from within communities, and liaisons invited other families to information sessions. Participating families provided verbal agreement and written consent for data collection and sharing and were informed that aggregated data would be returned to them as part of the program.

Participants completed monthly surveys on income, employment, education, housing, health, aspirations, mutuality, and related domains, and convened monthly in peer-led small groups. Families received USD $10/month in compensation and a biannual investment of USD $150–$200 to use at their discretion. Staff analyzed and returned data through quarterly visual reports, allowing families to reflect on progress, engage with neighbors, and learn from others' strategies. Drawing on positive deviance (Sternin, 2002), CII emphasized peer and community support over direct intervention. Positive deviance recognizes that, among people with similar resources, uncommon behaviors may help some identify better solutions than their neighbors, revealing hidden resources and supporting sustainable, internally owned change. Accordingly, CII staff did not offer solutions but encouraged families to seek support within their networks, especially from peers who had developed effective responses to shared challenges. This structure fostered trust, agency, and interdependence among participants (Root Change, 2021).

The present study

The CII is a global, family-centered, community-based, peer-driven change model that incorporates cash transfers. In 2023, we conducted a qualitative follow-up study to explore participants' experiences with CII in Colombia, Mexico, and the Philippines. Focus groups offered rich insights into the lived realities of poverty and the role of CII in supporting resilience and well-being across diverse contexts. Because CII combined flexible cash investment with peer-led group participation, the qualitative analysis examined not only participants' individual experiences, but also how families made meaning of the program as a material, relational, and collective form of support. To gain an in-depth, nuanced understanding of participants' perspectives, emotions, beliefs, and motivations in relation to living in poverty and taking part in CII, the following research questions were addressed:

RQ1: What economic, family, and contextual challenges shaped participants' lives before, during, and after CII?

RQ2: How did participants experience CII's cash transfer component in relation to their family needs, priorities, and goals?

RQ_3: How did participants experience CII's peer-driven group process, including mutual support, shared learning, and collective problem-solving?

RQ_4: What benefits, challenges, and recommendations did participants identify regarding the continuation, improvement, or expansion of CII?

RQ_5: What aspects of CII, if any, did participants describe as continuing after the program ended?

Our intention with this study was to give voice to the lived experience of the CII participants, allowing us to examine the complex issue of ending global poverty by focusing intervention efforts on children and families. With CII's unique focus on self-help and peer-driven change, this study contributes new perspectives on community-led solutions to poverty and other family challenges.

Method

Study design

Collaborations between academic institutions and non-profit organizations have gained increasing recognition for addressing complex social issues, such as global poverty. This article presents findings from a research partnership between Children International and the University of Pennsylvania (Penn), focused on equipping families with the skills, mindset, and tools to achieve their goals, gain sustainable employment, and positively impact their communities.

The collaboration aimed to strengthen the evaluation and dissemination of the CII, first within CI and then with the broader scientific community. The primary goal was to understand participants' experiences through in-depth insights into CII. Penn researchers supported CI in developing the follow-up study protocol, advising on measures and data collection, and assisting with analysis and interpretation of de-identified data. This partnership also served to build CI's internal capacity for data use and future planning.

The study employed a qualitative focus group design to explore the experiences of families who participated in CII, examining barriers, facilitators, and opportunities for improvement. Focus groups were selected for their ability to elicit rich, contextually grounded data through group interaction. Focus groups were particularly appropriate for this study because CII itself was organized around peer-led small groups, mutual aid, and shared reflection. The purpose of the qualitative component was not only to document individual experiences with cash transfers, but also to understand how participants made meaning of CII's collective and relational components. Unlike individual interviews, focus groups allowed participants to respond to, affirm, extend, and sometimes contrast one another's accounts of participation. This group interaction was important because many of the study's central findings concerned interpersonal processes, including mutual support, the sharing of ideas and resources, strengthened relationships, and continued peer connections after the program ended. Thus, the focus group format mirrored key features of the intervention and generated data about collective meaning-making that

would have been less accessible through individual interviews alone. Basic demographic data were also collected to establish participant profiles.

Participants

All 354 families who completed CII were invited to participate in the follow-up survey; 337 (95%) responded. Twelve focus groups ($n = 25$parents, $n = 26$ children) were conducted across Colombia, Mexico, and the Philippines to contextualize participants' experiences. Families eligible for focus groups included those with a child aged 10–18 at the time of intervention. From this pool, 18–20 families per country were randomly selected and invited to participate. Ultimately, focus groups included seven families from Colombia, eight from Mexico, and ten from the Philippines.

The intervention lasted for 19 months, starting in March 2020; the follow-up study took place from November to December 2023. Only de-identified secondary data were analyzed for the purposes of this study. The University of Pennsylvania's Institutional Review Board reviewed the project and determined that it did not constitute human subjects research because the data were de-identified upon receipt for analysis, and the Penn part of the research team did not have access to information that could identify participants.

Procedure

CI and Penn co-developed a survey and focus group guide based on questions from CII's original implementation. In addition to qualitative focus group data, we analyzed quantitative data at both individual and household levels.

All data were collected by CI and shared with the Penn part of the team in de-identified form via Box, a secure cloud-based platform. Surveys were created in Alchemer (2006) and distributed through digital messaging platforms (e.g. WhatsApp, Facebook). All the original CII pilot program participants had the opportunity to complete the follow-up survey. Of the 354 original families, 337 completed the follow-up survey (95% response rate). To gather in-depth insights from parents and children who participated in the CII pilot, focus group participants were selected from the larger sample of follow-up survey respondents.

Focus group discussions (FGDs) included caregiver–child pairs selected at random. FGDs were held separately for adults and children, with four groups per country. In Colombia, caregiver groups included three and four participants, while child groups had three and five. In Mexico, caregiver and child groups each had four. In the Philippines, both types of groups had five participants. Caregivers were typically household heads, and children were selected based on their ability to articulate opinions effectively. A designated contact person in each country was responsible for reaching out to the families and organizing the focus groups. FGDs in Mexico and Colombia were conducted in Spanish; in the Philippines, FGDs were conducted in Tagalog or Bicol, a local dialect. The focus groups were transcribed in the original language and then translated into English for analysis. A total of 51 individuals participated in the FGDs. Approximately half of focus group participants were caregivers, and the other half were children/youth from caregivers' family households.

During the FGDs, facilitators encouraged participants to reflect on their own experiences while also responding to others' comments. These interactions often prompted participants to elaborate on shared challenges, compare strategies for using the cash transfers, and identify common benefits of the program. For example, participants built on one another's comments about group meetings, mutual support, learning from peers, and continued relationships formed through CII. This interaction helped reveal not only what individual families experienced, but also how families understood CII as a social and collective process.

Measures

Participation status

Of the 337 survey respondents, 25 families (7.4%) also participated in focus groups. A binary variable ('focus group' / 'survey only') was created to reflect participation status.

Household demographics

Variables included country (Colombia, Mexico, or Philippines), household size, and number of members in three age categories: infants and toddlers (0–4), children and youth (5–18), and young adults (19–24).

Individual-level demographics

Focus group participants reported sex (female/male) and age (in years).

Household finances

Participants reported household income, savings, spending from savings, and debt service for October 2023. Financial data were converted to U.S. dollars using country-specific exchange rates.

Ratings

Likert-type items (0–10 scale) assessed satisfaction with income, savings, debt, and housing.[2] Additional items rated overall family health and perceived impact of CII.

Data analysis

Quantitative data analysis

Quantitative survey response data were analyzed in R (v4.3.1). We computed descriptive statistics (frequencies, percentages, medians, IQRs) and assessed normality, variance, skewness, and kurtosis. Levene's and Shapiro-Wilk tests checked distribution assumptions. We used box plots and the 3*IQR method to identify outliers.

We conducted chi-squared tests to examine associations between participation status and country of residence (effect sizes: Cramer's V). Welch's ANOVA tested for differences in household demographics, satisfaction, and health ratings (effect sizes: partial eta-squared, η^2p), as it is robust to heteroskedasticity and unequal sample sizes.

Given the skewness of financial data, we used medians and IQRs rather than means. Mann-Whitney U tests assessed between-group differences in financial measures, with Freeman's theta (θ) as the effect size. To adjust for multiple

comparisons, Holm's sequential Bonferroni method was applied. Tables present both raw and Holm-adjusted *p*-values. Although the present study is primarily qualitative in nature, the quantitative analyses serve a complementary role by contextualizing and strengthening our interpretation of focus group findings. We leveraged post-intervention survey data to assess whether focus group participants differed systematically from the broader survey sample. Our quantitative analyses, then, were undertaken to assess the representativeness and transferability of insights derived from focus groups. Focus groups generated detailed accounts of how participants understood and experienced CII within diverse family and community contexts, while the quantitative component of our study provided an empirical basis for assessing whether those accounts emerged from a subgroup that was broadly comparable to the larger sample.

Qualitative data analysis

Focus group data were managed and analyzed in Excel using thematic analysis (Braun & Clarke, 2012). A preliminary codebook was developed and refined through review of a subset of transcripts to promote consistency in code definitions and application across coders. Each transcript was independently coded by two evaluators, one from the transcript's country of origin to support culturally grounded interpretation. Coders first familiarized themselves with the data, generated initial codes, then defined and named themes and codes to create the codebook (Braun & Clarke, 2012). Coding discrepancies were resolved through discussion, which helped clarify code definitions, refine the codebook, and promote consistent application of codes across transcripts. Additional and refined subcodes were added as needed.

Analytic rigor was upheld through inter-rater agreement and discrepancy resolution, triangulation across informant groups, searches for disconfirming evidence, memoing, audit trails, and peer review by CI staff, whose contextual insights informed interpretation. The research team also engaged in reflexive discussion to consider how members' disciplinary training, organizational roles, and prior knowledge of CII shaped analysis. Academic researchers contributed expertise in qualitative methods, poverty, child and family well-being, and program evaluation, while organizational partners contributed knowledge of CII implementation and local program realities. This combination strengthened the analysis while requiring attention to how familiarity with CII could shape assumptions about the program's benefits, limitations, and mechanisms of influence. Reflexive discussion and attention to disconfirming evidence helped ensure that interpretations were examined, refined, and linked back to the data.

In analyzing focus group data, we attended to both individual statements and patterns that emerged through group interaction, including points of agreement, elaboration, and shared emphasis. These interactional dynamics informed findings related to mutuality, social support, and peer-driven change. Final themes were examined alongside quantitative findings to deepen understanding where findings aligned, generate higher-order insights where findings diverged, and identify new research directions suggested by qualitative data, such as unmeasured mechanisms of influence.

Results

Quantitative results

Sample characteristics: post-CII survey respondents

Table 1 summarizes the household demographics of 337 families who participated in CI's pilot CII, and who completed a post-intervention survey approximately 1 year after the pilot program concluded. Nearly half of survey respondents resided in Colombia when the CII intervention was delivered. The total number of family members residing in a single household ranged from 2 to 10 persons, with the median household comprised of 5 persons. Approximately one third of participating families had at least one infant or

Table 1. Household characteristics of survey respondents ($N = 337$)

Measure	n	%
Country of residence		
Colombia	164	48.7
Mexico	73	21.7
Philippines	100	29.7
Household size[a] ($M = 5.2 \pm 2.3$ persons; Mdn [IQR] = 5 [4–6 persons])		
Two persons	8	2.4
Three persons	40	11.9
Four persons	98	29.1
Five persons	77	22.8
Six persons	50	14.8
Seven persons or more	61	18.1
Missing data	3	0.9
Infants and toddlers[b] ($M = 0.4 \pm 0.6$ persons; Mdn [IQR] = 0 [0–1 persons])		
None	219	65.0
One	84	24.9
Two or more	21	6.2
Missing data	13	3.9
Children and youth[c] ($M = 2.0 \pm 1.2$ persons; Mdn [IQR] = 2 [1–3 persons])		
None	23	6.8
One	105	31.2
Two or more	199	59.1
Missing data	10	3.0
Young adults[d] ($M = 0.7 \pm 1.0$ persons; Mdn [IQR] = 0 [0–1 persons])		
None	177	52.5
One	88	26.1
Two or more	56	16.6
Missing data	16	4.7
Family income[e] ($M = \$211 \pm \$198$; Mdn [IQR] = \$147 [\$73–\$281])		
\$0 to \$99	123	36.5
\$100 to \$199	86	25.5
\$200 to \$299	53	15.7
\$300 to \$399	26	7.7
\$400 to \$499	18	5.3
\$500+	31	9.2

Note: M = mean ± standard deviation. *Mdn* [*IQR*] = median [interquartile range]. Table summarizes the household demographics of 337 families who participated in Children International's pilot Community Independence Initiative (CII), and who completed a post-intervention survey approximately 18 months after the pilot ended. The numeric variables *household size*, *infants and toddlers*, *children and youth*, *young adults*, and *family income* were converted to the ordinal level of measurement for table display. Percentages are rounded to the nearest tenth. U.S. dollar amounts are rounded to the nearest dollar.

[a]Number of persons (i.e. family members) living in a given household for at least 3 months out of the past year. [b]Number of persons age 0 to 4 years in the family household. [c]Number of persons age 5 to 18 years in the family household. [d]Number of persons age 19 to 24 years in the family household. [e]Total income (in U.S. dollars) earned by all family members living in a given household during October 2023, one month prior to the administration of the post-CII survey.

toddler (i.e. 0- to 4-year-old) living in the household. Nearly all families had at least one child or youth (age 5 to 18 years), and slightly fewer than half of families had one or more young adults (age 19 to 24 years) in the household. Among all respondents, the median household brought in $147 in total income during the one-month period preceding the survey. More than one third of participating families reported $0 to $99 in total household income earned during this period. Fewer than one in ten families reported $500 or more in past-month household income. The minimum and maximum past-month household income amounts were $0 and $1,012, respectively.

Sample characteristics: focus group participants

Table 2 presents focus group participants' self-reported household characteristics. The 51 focus group attendees (including 25 adult caregivers and 26 children/youth) collectively represented 25 different households. Among these focus group participants, the median family had 6 persons residing in their household. Most families (19/25, 76.0%) had between four and six household residents. In terms of household income, roughly half of families (12/25, 48.0%) reported $0 to $199 of total earnings in the past month. One in six families reported their household income as $400 or more, and the maximum observed income for any single household was $731.

Table 3 summarizes the demographic characteristics of 25 adult heads of household who participated in focus groups. Nearly all the adult participants identified their biological sex as female, and a slight plurality resided in the Philippines. The average adult was approximately 44 years of age at the time of their focus group participation.

Table 4 summarizes demographic information for 26 children and youth who participated in focus groups, accompanied by their adult heads of household. Roughly 85% of

Table 2. Household characteristics of focus group participants

Measure	n	%
Country of residence		
Colombia	7	28.0
Mexico	8	32.0
Philippines	10	40.0
Household size[a] (*M* = 5.8 ± 1.5 persons; Mdn [IQR] = 6 [5–6 persons])		
Four persons	5	20.0
Five persons	6	24.0
Six persons	8	32.0
Seven persons	4	16.0
Nine persons	1	4.0
Ten persons	1	4.0
Family income[b] (*M* = $213 ± $191; Mdn [IQR] = $225 [$53–$283])		
$0 to $99	10	40.0
$100 to $199	2	8.0
$200 to $299	7	28.0
$300 to $399	2	8.0
$400+	4	16.0

Note: *M* = mean ± standard deviation; *Mdn* [*IQR*] = median [interquartile range]. Table displays focus group participants' self-reported household characteristics. Focus group participants (25 adult heads of household, plus 26 children/youth) collectively represented 25 different households. The numeric variable *family income* (measured in U.S. dollars) was converted to the ordinal level of measurement for table display. Percentages are rounded to the nearest tenth. U.S. dollar amounts are rounded to the nearest dollar.

[a]Total number of persons living in a given household for at least 3 months out of the past year. [b]Total income earned by all family members in a given household during October 2023, one month prior to the administration of the post-intervention survey.

Table 3. Demographic characteristics of adult focus group participants ($n = 25$)

Measure	n	%
Country of residence		
Colombia	7	28.0
Mexico	8	32.0
Philippines	10	40.0
Sex		
Female	23	92.0
Male	2	8.0
Age ($M = 44.2 \pm 5.9$ years; Mdn [IQR] = 43.0 [41.0–47.0 years])		
35 to 39 years	5	20.0
40 to 44 years	10	40.0
45 to 49 years	7	28.0
50+ years	3	12.0

Note: M = mean ± standard deviation. *Mdn* [*IQR*] = median [interquartile range]. Table presents the demographic characteristics of adults only, excluding 26 children/youth who also participated in focus groups for this study. *Age*, a numeric variable representing the age (in years) of focus group participants, was converted to the ordinal level of measurement for table display. Percentages are rounded to the nearest tenth.

Table 4. Demographic characteristics of child/youth focus group participants ($n = 26$)

Measure	n	%
Country of residence		
Colombia	8	30.8
Mexico	8	30.8
Philippines	10	38.5
Sex		
Female	22	84.6
Male	4	15.4
Age ($M = 16.2 \pm 3.1$ years; Mdn [IQR] = 16.5 [14.0–18.0 years])		
11 to 13 years	5	19.2
14 to 16 years	8	30.8
17 to 19 years	11	42.3
20+ years	2	7.7

Note: M = mean ± standard deviation. *Mdn* [*IQR*] = median [interquartile range]. Table presents the demographic characteristics of children/youth only, excluding 25 adult heads of household who also participated in focus groups for this study. *Age*, a numeric variable representing the age (in years) of focus group participants, was converted to the ordinal level of measurement for table display. Percentages are rounded to the nearest tenth.

the children and youth identified their biological sex as female, and the average child/youth was approximately 16 years of age when they attended a focus group.

Bivariate associations

We carried out several statistical tests to assess differences in the distributions of selected measures for focus group participants versus participants who completed the post-CII survey only. Chi-squared test results revealed no significant variation in country of residence by participation status, χ^2 (2, $N = 337$) = 4.67, $p = 0.097$). In terms of their household composition, focus group participants were like the larger sample of post-CII survey participants. Welch's one-way ANOVA tests revealed no significant between-group differences in total household size or in the numbers of infants and toddlers, children and youth, or young adults in the household (see Supplementary Material Table S1). Focus group participants and survey respondents reported similar levels of satisfaction across several domains (i.e. income, savings,

debt, housing), had similar ratings of their families' overall health, and had similar ratings of the CII pilot program's overall impact on their families (see Supplementary Material Table S2). There were likewise no significant differences in past-month family income, savings, spending from savings, or debt payments (see Supplementary Material Table S3). Taken together, these findings suggest that focus group participants were reasonably representative of the full sample of 337 families who received the CII intervention and who completed the post-CII survey.

Focus groups/qualitative results

We conducted focus groups with 25 adults and 26 children whose families participated in the Community Independence Initiative in Colombia, Mexico, and the Philippines. One caregiver and one child attended focus groups for each family, except for one family in which a parent brought two children. Participants were asked to reflect on their experiences with CII, including what worked well, what challenges remained, and how the program could better support families.

Rather than presenting themes as discrete categories, we organized the qualitative findings around the story participants told about their experience with CII. Across adult and child focus groups, participants described entering the program amid persistent economic and family strain, experiencing CII as both material support and a collective process of learning and mutual aid, and carrying forward some relational and personal benefits after the program ended while continuing to face significant financial hardship. Table 5 presents illustrative quotations from adult and child participants for each theme, and Figure 1 summarizes the conceptual arc reflected in the qualitative findings.

Theme 1: entering CII amid persistent family and economic strain

Participants situated CII within the broader realities of poverty, family stress, and limited access to resources. Adults and children described unemployment, illness and medical needs, housing problems, educational expenses, debt, difficulty meeting basic household needs, and stress, often intensified by COVID-19 and natural disasters. Thus, CII was not experienced as an isolated program activity, but as one source of support within families' ongoing efforts to navigate economic insecurity and protect children's well-being.

Economic insecurity and employment instability shaped family life

Across adult and child focus groups, financial strain was central to family life before, during, and after CII. Adults linked economic hardship to family conflict, unmet material needs, and difficulty supporting children. One adult explained, 'Before the initiative my family was always arguing because we had economic problems; we did not have enough money to buy shoes, clothes, things for school' (Mexico). Children also described unstable income and limited household resources, as one child shared: 'Sometimes my mother cannot buy something to sell because my father's salary is delayed' (Philippines).

Employment instability further constrained families' ability to meet household needs. Participants described job loss, underemployment, and lack of steady work as persistent pressures. One adult stated, 'My husband lost his job; I didn't go to work every day. We needed food and groceries' (Mexico), while a child noted, 'My father was not able to

Table 5. Illustrative quotations by Theme

Theme	Illustrative Quotation	Respondent
Theme 1: Entering CII amid persistent family and economic strain	*'Before the initiative my family was always arguing because we had economic problems; we did not have enough money to buy shoes, clothes, things for school'.*	Adult (Mexico)
	'Sometimes my mother cannot buy something to sell because my father's salary is delayed'.	Child (Philippines)
	'My husband lost his job; I didn't go to work every day. We needed food and groceries'.	Adult (Mexico)
	'I didn't have money to buy a cell phone and put credit on it so my children could take online classes; I lacked resources to meet the requirements of my children's school'.	Adult (Mexico)
	'We couldn't afford the food and the things we needed, for transportation, and sometimes my mother couldn't afford the notebooks and the books I needed'.	Child (Colombia)
	'We are struggling for our living because my husband is also suffering from a lung disease'.	Adult (Philippines)
	'In our house, our main problem is the leaking roof when it rains'.	Adult (Philippines)
	'[The volcano] erupts, my father's farm was left unattended because it is not allowed to enter the danger zone'.	Child (Philippines)
	'I had emotional problems before the initiative. I was diagnosed with depression, so I am medicated all the time, but with the initiative I felt calmer, I forgot about my problems. The depression was because we had no money and my husband sold my stove and the gas tank. I had loans that really affected me'.	Adult (Mexico)
	'Sometimes my mother doesn't have enough money to buy food, and sometimes with the little she has, she buys food for us to eat'.	Child (Colombia)
Theme 2: Experiencing CII as both material support and collective problem-solving	*'We were able to buy groceries when we received the investment from CII'.*	Adult (Philippines)
	'[CII] helped me a lot because I learned to save more. I started using a piggy bank for my daughters' school needs'.	Adult (Colombia)
	'With the initiative I had money to take [my daughter] to a private doctor and they were able to see her faster. I was able to buy her medicines and get all her tests done'.	Adult (Colombia)
	'It helped me improve my business, I have a second-hand clothing business at the flea market, I started this business with a sheet on the floor, and now with the initiative I have a stall'.	Adult (Mexico)
	'The virtual meetings were very enriching, providing an opportunity to learn a lot from the experiences of other participants'.	Adult (Colombia)
	'We had a lot of companionship in my team; we even reached the point where we saw each other almost like sisters and we supported each other a lot'.	Adult (Mexico)
	'It seems that, in a way, this is a social support network. It not only focuses on the program, but also considers support and communication, listening to each other'.	Child (Colombia)
	'The initiative taught me and encouraged me to make my own decisions. This was a result of the confidence that they gave to us'.	Adult (Mexico)
	'I spend more quality time with my children; we cook, we play, we sing, we watch movies, we talk, we share more time'.	Adult (Mexico)
	'I wasn't very sociable, and when I started joining my mom during the meetings at home, my behavior began to change. I became more sociable, which helped me psychologically, no longer feeling so isolated'.	Child (Colombia)

(*Continued*)

Table 5. (Continued).

Theme	Illustrative Quotation	Respondent
Theme 3: Carrying forward connection and resilience while economic hardship persisted	*'We no longer have noise or quarrels in the house. We are now bonding and I think there is less stress'.*	Child (Philippines)
	'We learned that if we work as a team, we can achieve little things, move forward and always take each other into account, talk and motivate each other. In my family we gained confidence, motivation, not losing hope'.	Adult (Mexico)
	'Now we continue to share with my friends and every 15 days, we continue to get together to talk. For me, that was a blessing and lots of knowledge'.	Adult (Colombia)
	'I learned a lot about starting and maintaining a business, and to this day, my business is still operational'.	Adult (Colombia)
	'My mom's business is doing well, and my sister and I contribute. My dad also found a job'.	Child (Colombia)
	'I still have financial problems, and I am worried about my children's studies, who are in middle and high school. We need financial help because there are many expenses'.	Adult (Mexico)
	'My father needs a steady job, where he really is stable and can help us all'.	Child (Colombia)
	'The problem of my spouse being unemployed was not resolved by the CII'.	Adult (Philippines)
	'Our roof is still leaking'.	Adult (Philippines)
	'When CII was gone, mom is stressed again'.	Child (Philippines)

Note: CII = Community Independence Initiative. Country in parentheses reflects site of data collection (Colombia, Mexico, or Philippines).

work' (Philippines). Participants therefore understood CII within a context of unstable income, limited employment opportunities, and recurring difficulty meeting basic needs.

Children's education, technology, and transportation created ongoing pressure

Children's education was both a major family priority and a persistent financial pressure. Adults struggled to afford school expenses, technology, and internet connectivity, particularly during pandemic-related shifts to online or modular schooling. One adult explained, 'I didn't have money to buy a cell phone and put credit on it so my children could take online classes; I lacked resources to meet the requirements of my children's school' (Mexico). Children similarly described school contributions, books, notebooks, and transportation as difficult to cover: 'We don't have enough budget to pay for the school contributions' (Philippines), and 'We couldn't afford the food and the things we needed, for transportation, and sometimes my mother couldn't afford the notebooks and the books I needed' (Colombia). These accounts show that participants did not view education as separate from poverty. Educational participation depended on families' ability to manage transportation, technology, school supplies, food, and other competing household expenses.

Health, housing, and environmental stressors compounded hardship

Financial hardship also intersected with health needs, housing conditions, and environmental disruptions. Adults and children described medical problems as difficult to

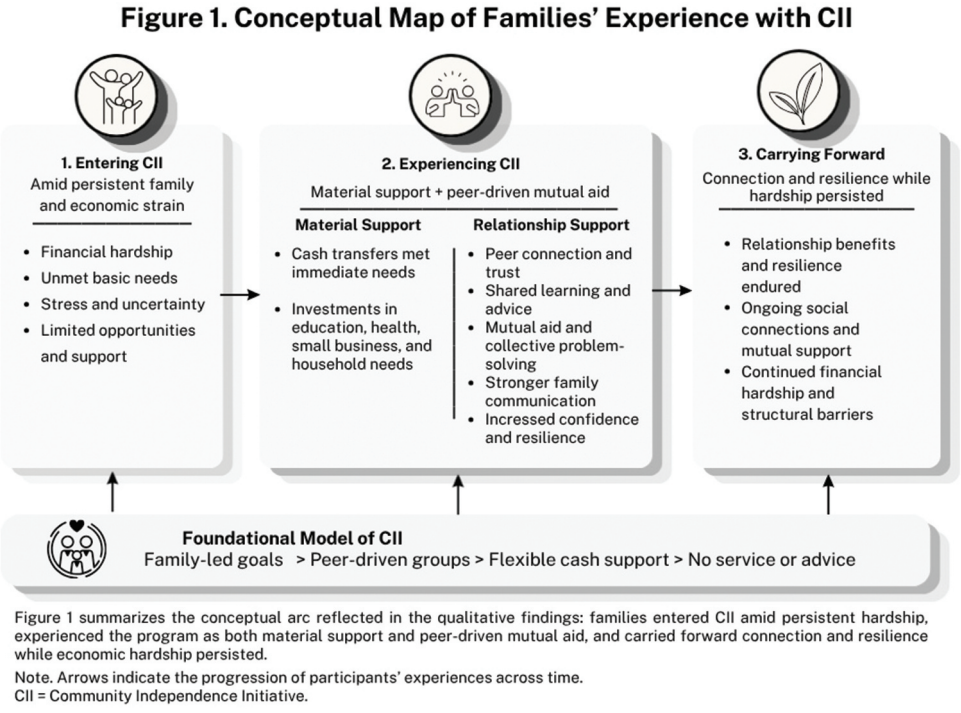

Figure 1. Conceptual Map of families' experience with CII.

manage with limited income. One adult stated, 'We are struggling for our living because my husband is also suffering from a lung disease' (Philippines), while a child noted, 'In my house we have health problems, my dad has an ear infection, and medical support would help us a lot' (Mexico).

Housing needs and external shocks further compounded hardship. One adult explained, 'In our house, our main problem is the leaking roof when it rains' (Philippines), and a child described delayed repairs: 'There were times when we did not have the money to buy all the groceries we needed, or that some projects were delayed fixing the house' (Mexico). Natural disasters also disrupted livelihoods. One adult recalled, 'I remember our bitter gourd plants were washed out from the typhoon with no return of investment' (Philippines), while a child explained, 'When [the volcano] erupts, my father's farm was left unattended because it is not allowed to enter the danger zone' (Philippines).

Stress persisted even when families valued the program

Participants' descriptions of stress illustrated the emotional consequences of economic hardship. Some adults linked distress directly to debt, family conflict, and lack of money. One adult stated, 'I had emotional problems before the initiative. I was diagnosed with depression, so I am medicated all the time, but with the initiative I felt calmer, I forgot about my problems. The depression was because we had no money and my husband sold my stove and the gas tank. I had loans that really affected me' (Mexico). Children also

observed stress within the household, including after CII ended: 'When CII was gone, mom is stressed again' (Philippines).

Participants valued CII while emphasizing that family challenges were not fully resolved. One adult explained, 'I still have financial problems, and I am worried about my children's studies, who are in middle and high school. We need financial help because there are many expenses' (Mexico). Children echoed this concern: 'Sometimes my mother doesn't have enough money to buy food, and sometimes with the little she has, she buys food for us to eat' (Colombia), and 'My father needs a steady job, where he really is stable and can help us all' (Colombia).

Taken together, Theme 1 establishes the context in which participants experienced CII. Families entered the program while managing persistent economic strain, educational expenses, health needs, housing problems, environmental disruptions, employment instability, and stress. Their appreciation for cash transfers, group meetings, mutual support, and program continuation was shaped by this context of need. At the same time, persistent hardship after CII ended highlights the limits of a time-limited intervention in addressing ongoing poverty-related stressors.

Theme 2: experiencing CII as both material support and collective problem-solving

Participants described CII as valuable because it combined flexible material support with a peer-driven structure for shared learning, mutual aid, and collective problem-solving. Cash transfers helped families meet immediate needs and invest in priorities, while group participation created opportunities to exchange ideas, learn from other families, and feel supported by peers facing similar challenges. Participants therefore experienced CII not simply as a cash transfer program, but as a social and economic intervention in which material resources and group connection reinforced one another.

Flexible cash helped families meet immediate needs and invest in goals

Adults and children described the cash investment as meaningful because it could be used according to family needs and priorities, including food, household items, children's education, transportation, medical expenses, technology, home repairs, debt repayment, savings, and small businesses. For some families, the investment helped cover basic needs. One adult explained, 'We were able to buy groceries when we received the investment from CII' (Philippines), while a child similarly stated, 'With the initiative's help, the food was enough for the whole month' (Mexico).

Participants also emphasized education, health, and transportation. One adult noted, '[CII] helped me a lot because I learned to save more. I started using a piggy bank for my daughters' school needs' (Colombia), while a child stated, 'CII helped in buying our school supplies' (Philippines). Another adult described using funds for medical care: 'With the initiative I had money to take [my daughter] to a private doctor and they were able to see her faster. I was able to buy her medicines and get all her tests done' (Colombia).

Some families used the investment to build assets or reduce longer-term financial pressure through savings, debt repayment, home repairs, or small businesses. One adult

shared, 'It helped me improve my business, I have a second-hand clothing business at the flea market, I started this business with a sheet on the floor, and now with the initiative I have a stall' (Mexico). A child similarly observed that a parent's investment 'was useful for her because she was already doing better' (Colombia). These accounts suggest that cash helped families survive scarcity and, for some, pursue future-oriented goals.

Peer-driven groups transformed support into shared learning and mutual aid

Participants repeatedly emphasized that CII's value extended beyond the financial investment. Group meetings created opportunities to share experiences, exchange advice, and identify practical strategies. One adult reflected, 'The virtual meetings were very enriching, providing an opportunity to learn a lot from the experiences of other participants' (Colombia). Another described the relationships formed through the groups: 'It was useful to me because I met new families. We got close to a lot of people we didn't know. I really take very good experiences with me because I consider the groupmates friends' (Mexico).

The group process also fostered mutual support and reciprocity. One adult explained, 'We had a lot of companionship in my team, we even reached the point where we saw each other almost like sisters and we supported each other a lot' (Mexico). Children also recognized CII as a source of social support: 'It seems that, in a way, this is a social support network. It not only focuses on the program, but also considers support and communication, listening to each other' (Colombia). Another child stated, 'I feel that it was not only the economic contribution but also the socialization. I liked that it was mutual support among them. It served to connect with new people, make friends' (Colombia).

These accounts suggest that participants did not describe CII simply as money received by individual households. Rather, families learned from one another, shared ideas and resources, and developed trust through a broader social context of encouragement, accountability, and collective problem-solving.

CII supported personal growth, family relationships, and children's well-being

Participants described personal and family-level benefits emerging from cash support, survey reflection, and group participation. Adults described learning, independence, resilience, and confidence. One adult stated, 'The initiative taught me and encouraged me to make my own decisions. This was a result of the confidence that they gave to us' (Mexico). Another described the program's emotional importance during the pandemic: 'The meetings helped me a lot because I was in terrible despair seeing the situation we were in during the pandemic. It was a tough challenge, but the initiative truly helped me push through and overcome these economic and emotional problems' (Colombia).

These benefits extended into family relationships. Adults and children described improved communication, stronger parent-child relationships, and more time together. One adult shared, 'I spend more quality time with my children; we cook, we play, we sing, we watch movies, we talk, we share more time' (Mexico). Another explained that surveys

encouraged family reflection: 'Through the surveys, we gathered as a family, shared opinions, and this helped improve our relationship' (Colombia). One child stated, 'Before, I wouldn't share things with my mom, but afterward, I started sharing more if anything happened to me. I felt more support from her' (Colombia).

Participants also linked CII to children's education, confidence, and social development. One adult noted, 'My child became more active in attending classes and participates in school activities' (Philippines). A child reflected, 'I wasn't very sociable, and when I started joining my mom during the meetings at home, my behavior began to change. I became more sociable, which helped me psychologically, no longer feeling so isolated' (Colombia).

Participants valued the model while identifying ways to strengthen it

Participants' positive accounts were often paired with recommendations for improvement. Adults and children described CII as helpful to families and communities. One adult stated, 'CII is a big help for the community not just because of the money' (Philippines), while another described the program as 'a light, an encouragement that we can continue moving forward' (Colombia).

At the same time, participants recommended that CII last longer, include more families, provide larger payments, and offer additional programming such as workshops or training. One adult said, 'I hope we can continue CII or bring it back' (Philippines), while a child stated, 'The program should be continued with more families' (Mexico). Another adult suggested adding skill-building opportunities, such as 'entrepreneurship, bakery, [or] handicrafts' training to help families start businesses (Colombia). Participants also identified several implementation improvements that would make CII easier to navigate. Adults recommended improving the process for receiving cash transfers, simplifying the survey process, and providing clearer communication about program expectations, contracts, and payment amounts. Although adults did not describe the meetings as too time-consuming, some children perceived CII participation as time-consuming for their parents. These recommendations suggest that families valued CII's material and relational components, while also wanting the program to be clearer, easier to access, and less burdensome to complete.

Taken together, Theme 2 shows that participants experienced CII as a combined material and relational intervention. Cash transfers helped families meet needs, reduce pressure, and pursue goals, while peer-driven group processes created shared learning, mutual support, and connection. Participants valued CII not only because of what families received, but also because of how they were invited to reflect, connect, and solve problems with others.

Theme 3: carrying forward connection and resilience while economic hardship persisted

Participants' accounts of life after CII were mixed. Adults and children described benefits that appeared to carry forward, including stronger family relationships, improved communication, resilience, continued peer connection, and, for some families, sustained business activity. At the same time, many emphasized that these gains existed alongside

unresolved economic hardship. The post-program story was therefore not one of complete transformation or unchanged hardship, but of families carrying forward relational and personal resources while still facing structural and financial pressures.

Relational and personal benefits carried forward after CII

Participants described CII as contributing to changes in family relationships, communication, confidence, and emotional well-being that extended beyond the receipt of cash. One adult explained, 'I spend more quality time with my children; we cook, we play, we sing, we watch movies, we talk, we share more time' (Mexico). Another described how surveys became a point of family reflection: 'Through the surveys, we gathered as a family, shared opinions, and this helped improve our relationship' (Colombia).

Children similarly described changes in the emotional climate of the household. One child stated, 'Before, I wouldn't share things with my mom, but afterward, I started sharing more if anything happened to me. I felt more support from her' (Colombia). Another connected improved communication with reduced conflict: 'We no longer have noise or quarrels in the house. We are now bonding and I think there is less stress' (Philippines).

Participants also described personal growth and resilience. One adult reflected, 'We learned that if we work as a team, we can achieve little things, move forward and always take each other into account, talk and motivate each other. In my family we gained confidence, motivation, not losing hope' (Mexico). Another linked CII to independence, stating, 'The initiative taught me and encouraged me to make my own decisions' (Mexico).

Some peer connections and economic strategies continued

For some participants, CII led to sustained peer relationships and ongoing economic activity. One adult explained, 'Now we continue to share with my friends and every 15 days, we continue to get together to talk. For me, that was a blessing and lots of knowledge' (Colombia). This suggests that, for some families, peer-driven groups generated continuing companionship, advice, and social support beyond formal program activities.

Participants also described continued business or livelihood activity as one durable economic benefit. One adult stated, 'I learned a lot about starting and maintaining a business, and to this day, my business is still operational' (Colombia). A child similarly observed, 'My mom's business is doing well, and my sister and I contribute. My dad also found a job' Colombia). Although these examples were not universal, they suggest that some families carried forward strategies developed during CII, particularly when cash support was paired with learning, planning, and encouragement from others. Still, relatively few participants described sustained businesses or continued group meetings. Durable economic change therefore appeared uneven, while relational and personal benefits were more consistently described.

Persistent financial and family strain limited what could change

Despite enduring benefits, participants were clear that many family problems remained unresolved after CII ended. Adults and children continued to describe financial strain,

unstable employment, housing problems, educational costs, health needs, and stress. One adult stated, 'I still have financial problems, and I am worried about my children's studies, who are in middle and high school. We need financial help because there are many expenses' (Mexico). A child similarly described ongoing scarcity: 'Sometimes my mother doesn't have enough money to buy food, and sometimes with the little she has, she buys food for us to eat' (Colombia).

Participants also described unresolved employment and housing concerns. One adult explained, 'The problem of my spouse being unemployed was not resolved by the CII' (Philippines), while a child stated, 'My father needs a steady job, where he really is stable and can help us all' (Colombia). Housing needs also persisted. One adult noted, 'Our roof is still leaking' (Philippines). Similarly, a child noted, 'At home, the retaining wall is falling down' (Colombia).

Stress also persisted, especially in children's accounts. One child summarized the return of economic pressure after the program ended: 'When CII was gone, mom is stressed again' (Philippines). This captures a central tension: although CII reduced pressure and supported family coping, many families remained exposed to the same economic constraints that shaped their lives before participation. The post-program story was one of partial durability, not full resolution.

Taken together, Theme 3 shows that participants carried forward important benefits from CII, especially family communication, confidence, resilience, and peer connection. These benefits helped families cope, plan, and feel less isolated. At the same time, persistent poverty, employment instability, housing needs, and educational expenses continued to constrain what families could sustain after the program ended.

This mixed pattern deepens the interpretation of CII's impact. Participants described CII neither as a complete solution to poverty nor as inconsequential. Rather, they described it as a meaningful source of material relief and relational support that helped families build confidence, connection, and strategies for navigating hardship. Continued peer relationships and businesses suggest the model's potential durability, while ongoing financial strain highlights the limits of a time-limited intervention in the face of structural economic need.

Discussion

Our study examined 337 families who completed a post-participation survey following Children International's pilot Community Independence Initiative (CII), including a subgroup of 25 families ($n = 51$individuals) who participated in focus groups. In this primarily qualitative study, the quantitative component serves to complement and strengthen our focus group analysis in two ways. First, quantitative survey data provided descriptive context regarding participants' post-intervention circumstances across various life domains such as financial well-being, health, and family functioning. Second, quantitative comparisons between survey-only versus focus group participants allowed us to assess whether the subgroup of families represented in focus groups differed systematically from the broader pool of CII participants who completed the post-intervention survey. This analytic strategy helped us evaluate the extent to which the lived experiences and themes identified in focus groups were likely to reflect broader patterns within the pilot sample rather than the perspectives of highly distinct

subgroup(s). Using this approach, we found that the household composition and characteristics of focus group families were representative of the broader sample in terms of satisfaction across life domains, family functioning, and financial indicators.

Focus groups with 25 adults and 26 children in Colombia, Mexico, and the Philippines explored participants' experiences with CII. Three themes emerged that together tell an experiential story of the program: families entered CII amid persistent family and economic strain; experienced CII as both material support and collective problem-solving; and carried forward connection and resilience while economic hardship persisted. These themes suggest that participants did not experience CII solely as a cash transfer program, but as a combined economic and social intervention that provided flexible resources while also fostering mutual support, shared learning, and strengthened relationships.

The findings show that CII entered families' lives in the context of persistent hardship, including financial strain, employment instability, educational expenses, health needs, housing problems, environmental disruptions, and stress. Within this context, participants valued CII because it combined flexible material support with peer-driven opportunities for connection, advice sharing, and mutual aid. Although families described meaningful benefits – including improved family communication, resilience, social support, and, for some, sustained peer relationships or business activity – many continued to face economic hardship after the program ended.

The use of focus groups strengthened our ability to interpret these findings because the group format generated discussion about the collective aspects of CII. Participants did not describe CII solely as an individual cash transfer program; rather, they repeatedly discussed the value of meeting with others, exchanging advice, listening to peers, and developing a sense of community. The interaction among participants during focus groups helped surface these relational dimensions and clarified why mutuality and social support emerged as central benefits of the program. In this way, the method was aligned with the intervention's peer-driven model and contributed directly to the identification of interpersonal and collective themes.

Consistent with prior research, families described poverty's toll on food security, healthcare, education (Hussain & Schech, 2021; McDonough et al., 2005), as well as housing and stress. Participants' accounts suggested that CII was experienced as beneficial across interpersonal, personal development, and financial domains, reinforcing earlier findings on the positive impacts of cash transfers across poverty, education, health, savings, employment, and empowerment (Bastagli et al., 2018).

This study contributes to limited literature on the sustainability of change post-cash transfer. While financial strain persisted, participants continued to value CII's mutuality and support structure. As Baird et al. (2014) observed, follow-up studies remain rare; our findings highlight both lasting interpersonal benefits and ongoing material challenges.

Limitations

Several limitations should be considered when interpreting these findings. The quantitative analyses were exploratory and descriptive; we did not assess causality between demographic or household characteristics and post-CII outcomes (e.g. finances or satisfaction), nor did we seek to explain between-group differences. Rather, the goal

was to evaluate statistical significance across participation status groups ('focus group' vs. 'survey only').

Response bias may have influenced the findings in several ways. Because data were collected through focus groups, some participants may have felt social pressure to align their comments with others in the group, emphasize widely shared experiences, or avoid expressing criticism of CII in front of peers. As a result, the findings may overrepresent points of consensus, such as appreciation for the program, mutual support, and perceived community benefits, while underrepresenting dissenting views, negative experiences, or more individualized concerns. This possibility is especially relevant given that several major findings centered on interpersonal connection, group participation, and mutuality. Therefore, these themes should be interpreted as participants' collectively expressed accounts of CII rather than as exhaustive representations of every family's private experience. To mitigate this concern, facilitators invited both positive and critical feedback, and the analysis included attention to disconfirming evidence and variation across adult and child participant accounts.

Focus group discussions were conducted in participants' native languages Spanish, Tagalog, or Bicol, and translated into English for analysis. Although this approach allowed participants to speak in the language most comfortable to them, some nuances of original phrasing, meaning, or cultural context may have been altered or lost during translation. In addition, group dynamics, including the presence of more dominant voices, may have shaped which experiences were emphasized during discussions.

Although the findings are not intended to be statistically generalizable, they may be transferable to other family-centered, peer-driven, or cash transfer initiatives that operate in low-resource communities and seek to strengthen both economic stability and social support. To support readers' assessment of transferability, we described the intervention context, participant characteristics, countries of implementation, data collection procedures, and major themes in detail.

Recommendations

Drawing on the finding that families experienced CII as both material support and peer-driven collective problem-solving, we offer the following recommendations for programs integrating cash transfers with mutual aid:

(1) **Foster Peer-Driven Change**. Group formation is central to this model. Programs should create platforms for participants to exchange ideas and experiences. Peer support and mutual aid can drive sustainable change when families collectively address shared challenges (Miller, 2017).
(2) **Strengthen Family Agency, Resilience, and Relational Supports**. Beyond fostering community bonds, programs should support family problem-solving, communication, resilience, and confidence. As cash transfers are time-limited by design, long-term impact depends on families' ability to manage future challenges independently.
(3) **Expand Program Scope and Duration**. Where feasible, programs should extend both the length and amount of investment. Participants often call for added support, such as financial literacy, empowerment tools, and community

resources – critical components for lasting change (Alcázar et al., 2016; Yoshino et al., 2023).

(4) **Enhance Clarity and Delivery**. Clear communication about program goals and expectations is vital for participant engagement. Cash transfers should be delivered through discreet, user-friendly mechanisms, with sensitivity to local context (Adato et al., 2011; Banda et al., 2019). Data collection tools, such as digital surveys, should be simple and accessible to avoid burdening families.

Recommendations for future research

This study points to several important directions for future research. First, studies should broaden sample size and diversity by exploring varied demographics, geographies, and subgroups relevant to family-centered, peer-driven change. Second, longitudinal research is needed to capture long-term outcomes and trends related to CII. Future studies should also examine how material and relational components of peer-driven cash transfer models interact over time, including whether group-based mutual aid strengthens the durability of benefits after cash transfers end. Third, cross-contextual comparisons could illuminate both unique influences and shared patterns across different settings. Fourth, subgroup analyses, such as by age, gender, or socioeconomic status, may reveal deeper insights into participant experiences. Fifth, while this study was descriptive, future work could apply experimental designs or advanced statistical methods to examine potential causal relationships. Finally, replication studies in new contexts are essential to validate findings and assess broader applicability. Together, these avenues would enhance the evidence base for family-centered peer-driven models and support the refinement and scaling of interventions like CII.

Conclusion

Children International is a child and family development organization that works across 10 countries in the Americas, Asia, and Africa to fight global poverty by equipping individuals with the mindset, skills, and tools necessary to achieve their goals, secure sustainable employment, and positively impact their communities (2024). The CII uses a family-centered, peer-driven change model for improving child and family well-being (Miller, 2017). CII offers no services or advice to families. Instead, it provides a structure within which families set their own goals, strengthen social networks that support their progress, and receive flexible cash investments. Families are treated as paid consultants, sharing monthly data about income, employment, education, quality of living, and more in the form of a monthly journal.

From this collaboration, we learned that families experienced CII as meaningful because it combined flexible material support with a structure for peer connection, reflection, and mutual aid. Participants' accounts suggest that CII helped families meet immediate needs, strengthen family communication, build confidence and resilience, and develop social connections with other families. At the same time, continued financial hardship after the program ended underscores the limits of time-limited cash transfer interventions in the context of persistent structural poverty.

Following an initial two-year pilot in Colombia, Mexico, and the Philippines (Root Change, 2021), CI sought to better understand the context within which CII operated and how families experienced the program. We used focus groups to understand how families made meaning of CII before, during, and after participation, and to identify how cash transfers and peer-driven mutual aid operated together in participants' lives. We recommend that anti-poverty initiatives consider the lessons learned from this research-practice collaboration, particularly the value of integrating flexible material support with opportunities for peer connection, shared learning, and collective problem-solving. Increased recognition of the collective and social aspects of cash transfer programs may strengthen efforts to reduce poverty and support the growth of human capital.

Notes

1. Throughout the paper, income and spending amounts are reported in U.S. dollars.
2. To rate their level of satisfaction within specific family life or household domains, heads of participating households responded to the following questions: 'How satisfied are you with your family's income?' (*satisfaction with income*); 'How satisfied are you with your family's (monetary) savings?' (*satisfaction with savings*); 'How satisfied are you with your family's (monetary) debt levels?' (*satisfaction with debt*); 'How satisfied are you with your family's housing situation?' (*satisfaction with housing*); 'How would you rate the general health of your family?' (*family health*); 'How would you rate the CII program's impact on your family?' (*CII program impact*). All of these Likert-type items were rated on a scale of 1 to 10.

Acknowledgments

The authors thank the families of Children International, Inc. who took their valuable time to report data and share their experiences following participation in the Community Independence Initiative and without whom none of this work would have been possible. We are very grateful to the three parent participants who served as study consultants and team members: Ana Dolores Noguera Pertúz (Colombia), Irma Patricia Cruz Guevara (Mexico), Rosby Nuñez (Philippines). We also thank Katherine Paulikonis and Maggie Zhu who assisted with transcript coding and background research, and Natalie Foxworthy and Mauricio Miller for their advisory support and review of the manuscript.

Author contributions

CRediT: **Johanna K. P. Greeson:** Conceptualization, Funding acquisition, Investigation, Methodology, Supervision, Writing – original draft, Writing – review & editing; **John R. Gyourko:** Conceptualization, Formal analysis, Investigation, Methodology, Software, Writing – original draft, Writing – review & editing; **Sarah Wasch:** Formal analysis, Methodology, Project administration, Software, Supervision, Writing – original draft, Writing – review & editing; **Kristen Mallory:** Conceptualization, Methodology, Project administration, Writing – original draft; **Lory Fehlig:** Conceptualization, Data curation, Formal analysis, Investigation, Methodology, Project administration, Software, Writing – original draft, Writing – review & editing; **Cesar Jácome:** Data curation, Investigation, Writing – original draft; **Nestor David Lara Yanes:** Data curation, Investigation, Methodology, Writing – original draft; **Fátima Areli Ruiz Gutiérrez:** Data curation, Investigation; **Dennis Guamos:** Data curation, Investigation, Writing – original draft; **Adele R. Lehman:** Formal analysis, Writing – original draft.

Disclosure statement

No potential conflict of interest was reported by the author(s).

Funding

This work was funded through a contract with Children International, Inc.

ORCID

Johanna K. P. Greeson http://orcid.org/0000-0002-5859-9517
John R. Gyourko http://orcid.org/0000-0001-7025-5998
Sarah Wasch http://orcid.org/0000-0003-2487-6392
Kristen Mallory http://orcid.org/0000-0003-1783-1874
Lory Fehlig http://orcid.org/0009-0000-6594-5222
Cesar Jácome http://orcid.org/0009-0008-9989-971X
Nestor David Lara Yanes http://orcid.org/0009-0006-9327-4925
Fátima Areli Ruiz Gutiérrez http://orcid.org/0009-0001-4252-0982
Dennis Guamos http://orcid.org/0009-0009-2648-6276
Adele R. Lehman http://orcid.org/0009-0009-7601-9537

Data availability statement

The data that support the findings of this study are available upon request from the corresponding author.

Ethics approval statement

This study was conducted in accordance with the ethical standards of the University of Pennsylvania Institutional Review Board (IRB) and with the principles of the 1964 Declaration of Helsinki and its later amendments. The University of Pennsylvania IRB reviewed the project and determined that it did not constitute human subjects research, as the data were de-identified prior to receipt for analysis and the research team did not have access to information that could identify individual participants.

References

Adato, M., Roopnaraine, T., & Becker, E. (2011). Understanding use of health services in conditional cash transfer programs: Insights from qualitative research in Latin America and Turkey. *Social Science and Medicine*, *72*(12), 1921–1929. https://doi.org/10.1016/j.socscimed.2010.09.032

Alcázar, L., Balarin, M., & Espinoza Iglesias, K. H. (2016). Impacts of the Peruvian conditional cash transfer program on women's empowerment: A quantitative and qualitative approach. *PEP working paper series 2016–25*, Available at SSRN: https://doi.org/10.2139/ssrn.3164370

Alchemer. (2006). *Alchemer (6.5)* [Computer software]. https://www.alchemer.com

Atkinson, A., & Bourguignon, F. (editors(s)). (2013). *Handbook of income distribution* (Vol. 2). Elsevier.

Baird, S., Ferreira, F. H., Özler, B., & Woolcock, M. (2013). Relative effectiveness of conditional and unconditional cash transfers for schooling outcomes in developing countries: A systematic review. *Campbell Systematic Reviews*, *9*(1), 1–124. https://doi.org/10.4073/csr.2013.8

Baird, S., Ferreira, F. H., Özler, B., & Woolcock, M. (2014). Conditional, unconditional and everything in between: A systematic review of the effects of cash transfer programmes on schooling outcomes. *Journal of Development Effectiveness*, *6*(1), 1–43. https://doi.org/10.1080/19439342.2014.890362

Baird, S., McIntosh, C., & Özler, B. (2019). When the money runs out: Do cash transfers have sustained effects on human capital accumulation? *Journal of Development Economics*, *140*, 169–185. https://doi.org/10.1016/j.jdeveco.2019.04.004

Banda, E., Svanemyr, J., Sandøy, I. F., Goicolea, I., & Zulu, J. M. (2019). Acceptability of an economic support component to reduce early pregnancy and school dropout in Zambia: A qualitative case study. *Global Health Action*, *12*(1), 1685808. https://doi.org/10.1080/16549716.2019.1685808

Bastagli, F., Hagen-Zanker, J., Harman, L., Barca, V., Sturge, G., & Schmidt, T. (2018). The impact of cash transfers: A review of the evidence from low-and middle-income countries. *Journal of Social Policy*, *48*(3), 569–594. https://doi.org/10.1017/S0047279418000715

Braun, V., & Clarke, V. (2012). Thematic analysis. In H. Cooper, P. M. Camic, D. L. Long, A. T. Panter, D. Rindskopf, & K. J. Sher (Eds.), *APA Handbook of research methods in psychology, vol. 2. Research designs: Quantitative, qualitative, neuropsychological, and biological* (pp. 57–71). American Psychological Association. https://doi.org/10.1037/13620-004

Breckin, E. (2023). A qualitative evaluation of a conditional cash transfer programme in Mexico: Recipients' perspectives of long-term results. *Sapienza: International Journal of Interdisciplinary Studies*, *4*(4), e23050. https://doi.org/10.51798/sijis.v4i4.622

Children International. (2024). https://www.children.org/

Fernald, L. C., Gertler, P. J., & Neufeld, L. M. (2009). 10-year effect of Oportunidades, Mexico's conditional cash transfer programme, on child growth, cognition, language, and behaviour: A longitudinal follow-up study. *Lancet*, *374*(9706), 1997–2005. https://www.thelancet.com/journals/lancet/article/PIIS0140-6736(09)61676-7/fulltext

Gaarder, M. (2012). Conditional versus unconditional cash: A commentary. *Journal of Development Effectiveness*, *4*(1), 130–133. https://doi.org/10.1080/19439342.2012.658635

Grantham McGregor, S., Cheung, Y. B., Cueto, S., Glewwe, P., Richter, L., & Strupp, B. (2007). Developmental potential in the first 5 years for children in developing countries. *Lancet*, *369*(9555), 60–70. https://www.thelancet.com/journals/lancet/article/PIIS0140-6736(07)60032-4/fulltext?cc=y%3D

Grisolia, F., Dewachter, S., & Holvoet, N. (2024). Shifting the focus? From individual to collective-level effects of cash transfers: A systematic review of the impacts on social capital. *Journal of International Development*, *36*(7), 2725–2768. https://doi.org/10.1002/jid.3933

Hartarto, R. B., Wardani, D. T. K., & Azizurrohman, M. (2021). A qualitative study of conditional cash transfer and education aspirations: Evidence from Yogyakarta. *Journal of Social Service Research*, *47*(6), 776–785. https://doi.org/10.1080/01488376.2021.1918314

Haushofer, J., & Shapiro, J. (2013). Household response to income changes: Evidence from an unconditional cash transfer program in Kenya. *Massachusetts Institute of Technology*, *24*(5), 1–57. https://www.aeaweb.org/conference/2015/retrieve.php?pdfid=2415&tk=43hN5YBh

Hussain, A., & Schech, S. (2021). Cash transfer programmes in Pakistan through a child well-being lens. *Social Sciences*, *10*(9), 330. https://doi.org/10.3390/socsci10090330

Levy, S., & Schady, N. (2013). Latin America's social policy challenge: Education, social insurance, redistribution. *Journal of Economic Perspectives*, *27*(2), 193–218. https://doi.org/10.1257/jep.27.2.193

MacAuslan, I., & Riemenschneider, N. (2011). Richer but resented: What do cash transfers do to social relations? *IDS Bulletin*, *42*(6), 60–66. https://doi.org/10.1111/j.1759-5436.2011.00274.x

Marmot, M., Friel, S., Bell, R., Houweling, T. A., & Taylor, S. (2008). Closing the gap in a generation: Health equity through action on the social determinants of health. *Lancet*, *372*(9650), 1661–1669. https://doi.org/10.1016/S0140-6736(08)61690-6

McDonough, P., Sacker, A., & Wiggins, R. D. (2005). Time on my side? Life course trajectories of poverty and health. *Social Science and Medicine*, *61*(8), 1795–1808. https://doi.org/10.1016/j.socscimed.2005.03.021

Menezes, R., Morfit, S., Seldon, W., & Breen, B. (2020). When peers work together to drive social change. *Stanford Social Innovation Review*. https://ssir.org/articles/entry/when_peers_work_together_to_drive_social_change

Millán, T. M., Barham, T., Macours, K., Maluccio, J. A., & Stampini, M. (2019). Long-term impacts of conditional cash transfers: Review of the evidence. *The World Bank Research Observer*, *34*(1), 119–159. https://doi.org/10.1093/wbro/lky005

Miller, M. L. (2017). *The alternative: Most of what you believe about poverty is wrong*. Lulu.

Nnaeme, C. C., Patel, L., & Plagerson, S. (2022). Livelihood activities and well-being outcomes of cash transfer beneficiaries in Soweto, South Africa. *Development in Practice*, *32*(1), 29–38. https://doi.org/10.1080/09614524.2021.1911950

Owusu-Addo, E., Renzaho, A. M., Sarfo-Mensah, P., Sarpong, Y. A., Niyuni, W., & Smith, B. J. (2023). Sustainability of cash transfer programs: A realist case study. *Poverty & Public Policy*, *15* (2), 173–198. https://doi.org/10.1002/pop4.367

Pega, F., Pabayo, R., Benny, C., Lee, E. Y., Lhachimi, S. K., & Liu, S. Y. (2022). Unconditional cash transfers for reducing poverty and vulnerabilities: Effect on use of health services and health outcomes in low-and middle-income countries. *Cochrane Database of Systematic Reviews*, *2022* (3), 3. https://doi.org/10.1002/14651858.CD011135.pub3

Ranganathan, M., & Lagarde, M. (2012). Promoting healthy behaviours and improving health outcomes in low- and middle-income countries: A review of the impact of conditional cash transfer programmes. *Preventive Medicine*, *55*, S95–S105. https://doi.org/10.1016/j.ypmed.2011.11.015

Rawlings, L. B., & Rubio, G. M. (2005). Evaluating the impact of conditional cash transfer programs. *The World Bank Research Observer*, *20*(1), 29–55. https://doi.org/10.1093/wbro/lki001

Root Change. (2021). *Community Independence Initiative (CII) pilot report from July 2020-Aug 2021*. https://www.rootchange.org/wp-content/uploads/2022/02/CI_CII-Final-Report_CI-Logo.pdf

Schubert, B., & Slater, R. (2006). Social cash transfers in low-income African countries: Conditional or unconditional? *Development Policy Review*, *24*(5), 571–578. https://doi.org/10.1111/j.1467-7679.2006.00348.x

Sternin, J. (2002). Positive deviance: A new paradigm for addressing today's problems today. *Journal of Corporate Citizenship*, *5*, 57–62. https://www.jstor.org/stable/jcorpciti.5.57

The World Bank. (2023). *Poverty overview*. https://www.worldbank.org/en/topic/poverty/overview#1

World Health Organization. (2013). *Essential nutrition actions: Improving maternal, newborn, infant and Young Child health and nutrition*. Cash Transfer Programmes. https://www.ncbi.nlm.nih.gov/books/NBK258719/

Yoshino, C. A., Sidney-Annerstedt, K., Wingfield, T., Kirubi, B., Viney, K., Boccia, D., & Atkins, S. (2023). Experiences of conditional and unconditional cash transfers intended for improving health outcomes and health service use: A qualitative evidence synthesis. *Cochrane Database of Systematic Reviews*, *2023*(6), CD013635. https://doi.org/10.1002/14651858.CD013635.pub2

Zheng, H., Lyu, G., Ke, J., & Teo, C. P. (2022). From targeting to transfer: Design of allocation rules in cash transfer programs. *Manufacturing & Service Operations Management*, *24*(6), 2901–2924. https://doi.org/10.1287/msom.2022.1101