Direct Support Professional Workforce Shortage

Summary

Many Minnesotans with intellectual and developmental disabilities (IDD) access services and supports provided by paid professionals.

Because of how our service system is structured, there are many unfilled positions. Many people with disabilities and service providers struggle to find and keep workers.

The low value society places on direct support workers reflects stereotypes and discrimination against people with disabilities.

People in direct support positions must be valued for their important work. They must be given livable wages and robust benefits.

Beyond the formal service system, we must focus on solutions that promote equity, grow belonging, and end ableism. Minnesotans with disabilities have a right to an inclusive society and a rich, full life. This includes strong networks of natural support for every person.

Issue

Thousands of Minnesotans with IDD access long term services and supports. Many of these supports are provided by paid professionals. They have many roles and are known by different job titles, such as:

- Direct Support Professional (DSP)
- Personal Care Assistant (PCA)
- Job Coach
- Home care nurse

These workers include people who provide support in individuals’ own homes, as well as those who work in provider-controlled settings. For some, this is their full-time career. For others, this is part-time work, providing support for friends or family members. Direct care workers are one important part of a broad network of supports that help people with disabilities live, learn, and work in their communities.

Our current disability and older adult service system is structured to rely on a large, paid workforce. The 2021 “Direct Care Workers in the United States” report states, “from 2019 to 2029, this workforce will add an estimated 1.3 million new jobs to meet rising demand, more new jobs than any other single occupation. When including jobs that must be filled when existing workers transfer to other occupations or exit the labor force, there will be a total of 7.4 million job openings in direct care from 2019 to 2029.”

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Due to the high number of open, unfilled positions in this workforce, many people with disabilities and service providers struggle to find and keep workers. This challenge is greatest for those who live in rural communities, where other barriers like population density and transportation are already a problem.

One of the factors contributing to the workforce shortage is low wages and lack of benefits. Most direct support workers are not paid a wage that covers their living expenses, especially for those who have families. The “Direct Care Workers” report shows that median annual earnings are just 20,200 dollars. 44 percent of direct support workers live in low-income households, and 45 percent rely on some form of public assistance such as Medicaid, nutrition assistance, or cash assistance. Many people do this work without access to health insurance, worker’s compensation, paid family leave, and child care. These harmful practices both reflect and perpetuate the racial and gender inequalities faced by direct support workers, who are largely women, People of Color, and immigrants.

Low wages combined with unaffordable benefits, limited training, and lack of career advancement opportunities make this work undesirable for some potential workers and unsustainable for existing workers. The devaluation of direct support workers reflects the negative perceptions, stereotypes, and discrimination against people with disabilities themselves.

But the workforce shortage is not a problem of pay, job satisfaction, or other “typical” recruitment and retention issues alone. We do not have enough working age adults in the workforce to fill all of the existing jobs in Minnesota. A study by the Minnesota Demographic Center projects that demand for DSPs and other support services will grow ten times faster than the labor force needed to provide the services.

The lack of PCAs, DSPs, homecare nurses, etc. results in an overreliance on limited staff. This leads to burnout and lower quality care.

In the past, the main focus for addressing this worker shortage has been increasing provider reimbursement rates, increasing the size of provider-controlled settings, and increasing fees. These proposals do not fix the underlying structural challenges with the workforce shortage, and carry us in the wrong direction towards disabled people living in larger and more segregated settings.

**Position**

People in direct support positions deserve to be valued for their important work. They must be paid livable wages to sustain a life for themselves and their families. They should get benefits that help them stay healthy and well, and support work-life balance.

There are many ways to provide more career-building opportunities in direct support professions, such as credentialing, career ladders, paid career development, strong mentoring and employee recognition.
Service providers must foster an organizational culture that values their employees—especially those in direct support roles. Society must understand the deep importance and inherent value of the people who provide direct support. Investing in and valuing the workforce leads to quality care and respect for members of the disability community.

To address the deep systemic challenges and demographic disparities that contribute to the workforce shortage, we must focus on broader systems transformation. We must reduce reliance on congregate settings, and invest in self-directed, individualized supports. We need to make sure a wide range of flexible supports are available, which allow people with disabilities and their trusted supporters to:

- Control their funding
- Pay higher wages
- Give bonuses for new and long-term staff, and to honor their work
- Hire and train their own staff, including friends, family members, and other trusted supporters
- Have support they need and want based on their schedules, routines, and preferences

These strategies are proven to reduce turnover and help keep workers.

The use of new and innovative assistive technology, remote supports, and service animals should be explored and made available to more people as well.

Beyond the formal service system, we must focus on solutions that promote equity, foster belonging, and combat ableism. Minnesotans with disabilities have a right to an inclusive society and a rich, full life. This includes robust relationships that can help provide the right supports that each person needs and wants.

Systems cannot truly care for people—only people can care for each other. We can no longer rely so heavily on the formal workforce to support disabled people. In addition to paid professionals, we need all members of our communities to be part of the solution.

Children with disabilities must play and learn alongside their peers from a young age, to create and nurture long-term connections that foster interdependence into adulthood.

It is important for parents and trusted supporters of children with disabilities to have the time and opportunity to create and sustain these relationships as well. Neighbors, friends, coworkers, members of faith communities, intergenerational family members, and other natural connections are critically important in creating robust networks of natural support.

We must foster interdependence so all members of our disability community thrive, in and outside of the formal service system.

If we tap into the natural abundance in our communities, people can and will have the right supports to be connected, involved, and have belonging.
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Approved by The Arc Minnesota Board of Directors, August 13, 2016.
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ii Ibid.