



A Hand for Their Hands

Developmental
Disabilities
Institute

WAYNE STATE
UNIVERSITY

Detroit, Michigan
2004

A report on the

Empowerment Education Training Initiative for Direct Support Professionals

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Foreword

The Developmental Disabilities Institute (DDI) was established at Wayne State University in 1983 by the U.S. Administration on Developmental Disabilities, U.S. Department on Health and Human Services (ADD/HHS). DDI is one of 63 University Centers for Excellence in Developmental Disabilities (UCEDDs) nationwide. The Institute is mandated to provide education, community support, research, and information dissemination. As part of its education and community service mandates, the Institute began a training initiative for direct support professionals in 1996. Direct support professionals provide personal care, support, and training for people with disabilities throughout their lives.

A Hand for Their Hands is a report on the Empowerment Education training initiative for direct support professionals and their supervisors. The report provides the context for the design of the training, describes the training model and its three components, the characteristics of training participants, our research findings on their perceptions of systemic issues in direct support, and a discussion of emerging issues.

Over the past eight years, our trainers have trained more than 10,000 direct support professionals in more than 600 events, statewide. We hope this report will encourage direct support professionals, supervisors, and consumers to learn more about our training initiative and to become involved in the critical issues that challenge the delivery of high-quality, sensitive, and timely services for people with disabilities.

To learn more about how you can become involved with this initiative, either as a direct support professional or trainer, please contact us as follows:

DDI website: www.wayne.edu/ddi

DDI toll-free telephone: 1 (888) WSU-4DDI [1 (888) 978-4334]

Elizabeth Janks: [Initiative Director] (313) 577-6368

email: E.Janks@wayne.edu

— *Barbara LeRoy, Ph.D.*

Director

Developmental Disabilities Institute

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Empowerment
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Setting the context

The direct support professional workforce is a vital link for quality services and outcomes for people with disabilities. In order to live as independently as possible in communities of their own choosing, people with disabilities need direct support professionals.

The Supreme Court of the United States, in its landmark decision “Olmstead vs. L.C.” (1999), recognized that people with developmental disabilities have the right to live in the least restrictive environment. The Court held that the state of Georgia had violated the Americans with Disabilities Act by requiring two women to remain in a state mental hospital after their doctors had determined that they were ready to live in the community.

The Court concluded that people with disabilities must have opportunity to participate in everyday activities such as family and social activities, work and education. While this ruling established community living as a right, the direct support workforce is the lynchpin that will make it a reality.

In his New Freedom Initiative (NFI), President Bush said, “Community-based care is critically important to promoting maximum independence and to integrating individuals with disabilities into community life. The Administration will help remove barriers to participation in community life.” A goal of NFI is promoting full integration of individuals with disabilities into their communities.

An Executive Order on Community Based Alternatives recognizes a com-

mitment to community and its vital role.¹ Unfortunately, this federal policy and recognition by the government of the value of community life for people with disabilities has not necessarily translated into positive outcomes for Direct Support Professionals.

At the same time that the courts and policy initiatives have established community living as a right for people with disabilities, the reality of our aging population threatens these options. America is an aging society, and a recent Health and Human Services report indicates that by 2050 the nation will need three times as many long-term care workers as are now employed to meet the needs of people who are aging and/or have disabilities.

About 5.7 million to 6.5 million long-term care workers—comprising nurses, nurses’ aides and home health and personal care workers (direct support professionals) will be needed to meet the nation’s needs². This increased demand for direct support professionals is met with a dearth in our population of people who traditionally are recruited to be direct support professionals: women in their late 20s to late 40s. As Secretary of HHS Tommy Thompson said, “the shortage of long-term care workers, if left unaddressed, will affect all Americans in very personal ways.”

While the nation as a whole is struggling to address emerging needs, the crisis in direct care workforce is even more acute in Michigan. Forecasters predict that the crisis in care will hit as soon as 2010 in Michigan, with a need for 40,000 direct care workers.

“Community-based care is critically important to promoting maximum independence and to integrating individuals with disabilities into community life.”

***President
George W. Bush,
New Freedom
Initiative
February 2001***

¹ Bush, G.W. Executive Order 13217:

Community-Based Alternatives of Individuals with Disabilities, June 18, 2001.

² HHS report, May 2003



DDI's Empowerment Education Training Initiative

The Seven Steps to Development of the Initiative's Model

- **Needs Assessment**
- **Curriculum Design Board**
- **Curriculum Development**
- **Train-the-Trainer Program**
- **Statewide Training**
- **Initiative Evaluation and Continuous Improvement**
- **Dissemination**

Model Development

The DDI Training Initiative was systematically developed to address the needs in the field from the perspective of consumers, direct support

professionals, service providers, and administrators. The Initiative was developed through the steps detailed below:

Needs Assessment

A needs assessment with agency administrators and service providers who employ direct support professionals addressed training needs, training accessibility, and strategies for assuring participation by direct support professionals. To further explore the findings

from the needs assessment, a series of focus groups were conducted with direct support professionals. Participants were asked what training topics would be most beneficial for their jobs. Suggestions provided a reference for the initial curriculum.

Curriculum Design Board

A Curriculum Design Board comprised of consumers, family members, and direct support professionals prioritized training topics for the project, based on the findings from the needs assessment and focus groups. The

design board met regularly and reviewed the project's training curriculum as it developed, offering insights to improve it and to ensure that the curriculum was appropriate for its intended audience.

Curriculum Development

The Training Initiative comprises three distinct training components: Empowerment Education, Pathways to Leadership, and Direct Support

Professional Supervisor Training. The completed curricula were reviewed by experienced professionals working in the field.

Train-the-Trainer Program

Statewide Recruitment and Quality Assurance

With the project infrastructure established, it was time to hire trainers. A train-the-trainer model makes it possible to provide the training statewide. More than 300 trainer applications were distributed, and six train-the-trainer workshops at various locations throughout the state prepared 40 trainers to implement the training initiative.

Trainers receive a toolbox containing all the training materials needed to conduct the workshops. Evaluation of each session and on-site monitoring of the training events assure that the training remains fresh and supports participants' needs. Trainers are also given on-going technical assistance to support their training efforts.

Who Are the Trainers?

Trainers were recruited from among both providers and consumers. Commitment to a philosophy of empowerment for consumers, experience, and direct knowledge of the issues are core qualifications for the job. The ability to work collaboratively as a trainer, present the established curriculum and interact positively and respectfully with training participants are also among the keys to success. After would-be trainers complete their own training, they are hired and expected to travel to training sites throughout the state, collect and submit evaluation information from participants, maintain communication with initiative staff, and submit documentation in a timely manner.

Statewide Training

Since the beginning of the project, training events have been conducted throughout the state. Significant efforts have been made to ensure that training sessions are as accessible as possible for all who need and want to avail themselves of these opportunities. Since training began during the project's second year, there have been an average of more than 86 events per

Initiative Evaluation and Continuous Improvement

Each of the three training tracks is evaluated using a variety of tools, including pre and post-tests, evaluation of the trainer's performance, telephone surveys, and questionnaires. Post-test scores are generally in the 85 percent

Trainers for the Direct Support Professional component include two primary consumers, two people who have family members with disabilities, and nine direct support professionals (two of whom also have family members with disabilities). Trainers reside in eight different counties and thus ensure the initiative's capacity to provide training to Direct Support Professionals working anywhere in Michigan.

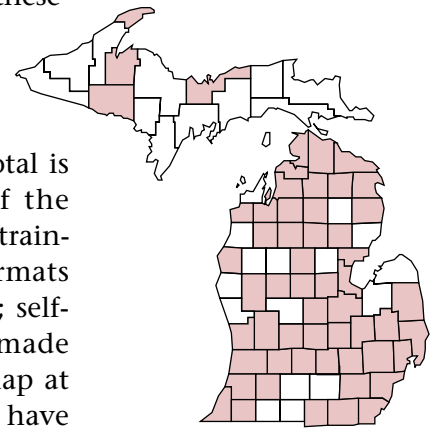
Pathways to Leadership employs eight trainers, half of whom have disabilities or have family members with disabilities. Many of these trainers were already employed by the Michigan Centers for Independent Living, and they conduct training sessions at these organizations' sites.

year (about 75 per year if the total is averaged over the duration of the project). To make it accessible, training is available in alternate formats including large print and audio; self-instruction modules are also made available to participants. The map at right shows that training events have been conducted in 56 of Michigan's 82 counties (68 percent).



"I found the session very informative and very well done! Great job!"

– Training participant



Counties where training events occurred

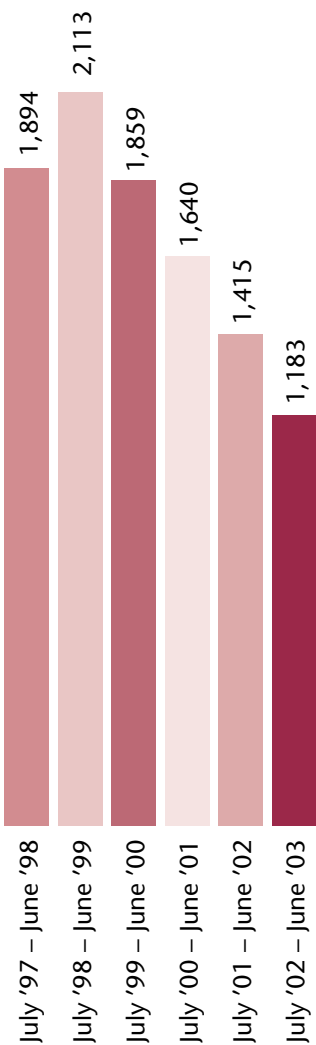
range. Eighty percent are satisfied with the trainer's performance and curriculum content. An extensive summative evaluation is currently being conducted; a report will be available when the evaluation process is completed.



“I will do outreach to other agencies in the community to help empower people with disabilities.”

– Trainee

**Number of Trainees
(by year)**



Dissemination

Training programs, training events, and outcomes are disseminated through direct mailings, newsletters, and our website (www.wayne.edu/ddi). Additionally, some dissemination of project activities and results has been facilitated through the national “Innovations” training catalog, a product of the American Association of University Centers of Excellence for Developmental Disabilities.

The project has also used new and web-based technologies. It developed a website for the Michigan Alliance of Direct Support Professionals (MADSP) with members of that organization, as well as the web pages presenting its own activities. The MADSP also has utilized a ListServ to communicate among its members, and also publishes proceedings of its regular statewide Forums.

Curricular Components and Procedures

The Three Curricula

Empowerment Education Direct Support Professional Training

This curriculum targets direct support professionals, comprising 10 modules:

- Supporting Growth Through Opportunity and Choices
- Ten Successful and Assertive Steps for Working with Professionals
- Person-Centered Planning: Valuing the Contributions of Direct Support Professionals
- Supporting People in Establishing Friendships and Making Community Connections
- Conflict Resolution
- Teaching Made Easy
- Stress Management: It’s All About Awareness, Attitude and Action at Work
- Self-Advocates and Direct Support Professionals Working in Partnership to Achieve Life’s Dreams
- Making the Transition A.S.A.P. – As Smooth As Possible
- Self-Determination: Our Right to Meaningful and Fulfilling Lives

Each module of the Empowerment Education curriculum takes approximately two hours to train and is

accredited for 2.0 continuing education credits.

Pathways to Leadership Training

This curriculum was developed for employers (persons with disabilities and family members) and their personal assistants. The focus of the curriculum is the employment relationship between consumers and direct support professionals. Specific topics addressed include:

- the roles of employers and employees
- communication
- strategies for conflict resolution
- strategies for effective, respectful working relationships.

The ultimate outcome of the Pathways to Leadership training is an employment contract between the consumer and the direct support professional, specifying responsibilities and the

terms of employment. Pathways to Leadership has been approved for 3.0 Adult Foster Care Licensee and Administrator training credits.

Direct Support Professional Supervisor Training

This intensive six-day training curriculum builds the following discrete work competencies essential for supervisors of direct support professionals:

- Personal growth
- Communication
- Team building
- Multi-tasking and stress reduction
- Creativity
- Extending the vision

The training, designed to be implemented in a retreat-style setting, focuses on supporting team leadership at work. It offers agencies an opportunity to create work environments that support team building and increase staff expertise, as well as providing potential to enhance quality of services to consumers. Direct support

professional supervisors participate in a dynamic interactive learning process that improves their supervisory skills and offers a new perspective on their workplace roles. This training, intended for newly-promoted supervisors who may lack formal training and have limited supervisory experience, helps them become successful leaders.

Planning and Preparing for a Successful Training Session

Training sessions are conducted by arrangement between an agency that provides DSPs and initiative staff. It takes about two to four weeks to plan a successful training event. Once a session has been scheduled, the only

other things the agency must provide are an audience of 10 or more people, a room in which the session can be held, and an overhead projector. The trainer brings all other needed training materials.

Trainer Profile: Abe Lindner

Direct Support Professionals come to the job for a variety of reasons. Abe became a job coach for Judson Center after being a purchasing agent for a major corporation. "I immediately found the work interesting, and the people were the reason," he says. In his new position Abe found an unexpected reward, meeting the woman who would become his wife. Lisa, who is also a direct support professional, helped Abe out on occasion when his staff couldn't pick up consumers from a job site. The pair began dating and later married, merging their two families to create a family of nine.



Abe Lindner teaches independent living skills and options at work, at home, and in the community.

Abe has been an Empowerment Education Trainer for four years. He has a special way of relating to his training participants. His effectiveness and popularity as a trainer are a result

of his personal experience, and his interactive training style has been enhanced by years of substitute teaching in schools. He enjoys it most when a direct support professional shows interest

**“Excellent!
Excellent!
So much information that we have been trying to compile, without the time to do so. Such a big help.”
– Trainee**



Training Participants



Six-Year Review

During the sixth year of training, the Developmental Disabilities Institute completed a review of both the project, and the general statewide situation confronting direct support

professionals and those who employ them. Training participant characteristics, their employment situations, and their perceptions of their training experiences are presented here.

Figure 1. Demographic Characteristics of Trainees (by percentage)

YEAR	1998	1999	2000	2001	2002	2003	mean value
Gender							
• Female	84	88	91	76	65	76	80
Race/Ethnicity							
• African American	41	29	41	47	72	23	42.17
• Caucasian	49	62	51	44	17	70	48.83
• Hispanic/Latino	1.5	2.4	2.3	1.5	1.1	.9	1.67
• Native American	3.7	4.8	2.9	1.3	.9	1.3	2.48
• Other	4.8	1.8	2.8	6.2	9.0	4.8	4.9
Education							
• Did not finish High School	3	2	2	3	9	4	3.8
• High School diploma or equiv.	41	55	61	66	63	67	58.8
• Associate's degree	13	17	13	22	14	12	15.2
• Bachelor's degree	11	20	19	8	12	14	14
• Bachelor's degree +	1	7	5	2	3	3	3.5
Disability							
• Primary	13	11	10	16	24	19	15.5
• Secondary	37	38	35	36	35	40	36.8

More than 10,000 direct support professionals have participated in training since 1998. As Figure 1 shows, the vast majority of those participants were female, with a high school education. They were nearly evenly split as to race between African American and Caucasian. While 15% of the participants reported that they had a disability, more than one-third were in a secondary category (had a family member with a disability).

“I think this project is exemplary: excellent, well thought out materials and concepts.”
 – Trainee

Trainer Profile: Debbie Morgan

Debbie Morgan attended the first Empowerment Education Train the Trainer class in 1998, and has been a direct support professional since 1974. At that time, Debbie was interested in a job with a flexible work schedule because she was a young mother with two boys to support.

She stayed in direct support work with exception of a two-year stint managing a small country-music radio station in Marine City. She missed direct support work, however, and decided to return to the field. This time, she became a supervisor. Debbie received several promotions and eventually was named a group home manager for

Lutheran Social Services. Recently, she began a new job managing several homes for Alternative Living Services.

“Longevity—in this challenging work—requires that you rejoice in the small changes you make peoples’ lives,” she says. “There are times that you can’t always see the big picture. Being pleased with small victories

gives me the strength to continue, especially in these times of reduced staff and increased demands for services.”

Debbie says Empowerment Education has given her the opportunity to get variety within her chosen field. The training gives her a chance to work with direct support professionals outside her organization. She’ll stay

Direct support professionals who have come to training sessions sponsored by the initiative have been working in the field for varied lengths of time. Some are seasoned professionals with more

than 10 years' experience, while others are new to the field (<1 year). The training provides an opportunity for experienced workers to share their knowledge with new workers.



Figure 2. Employment Experience

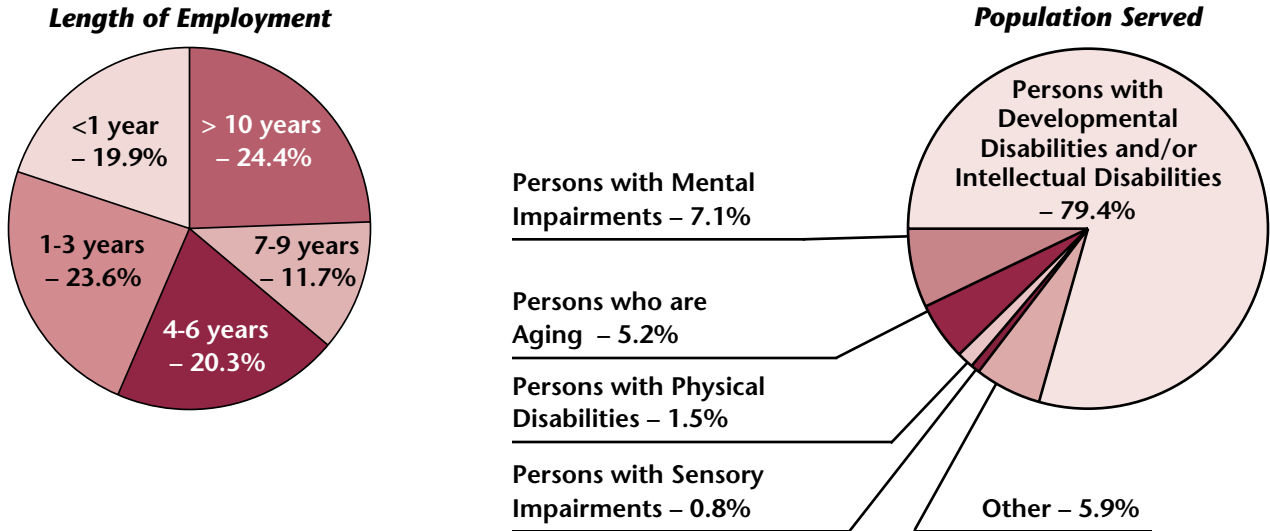
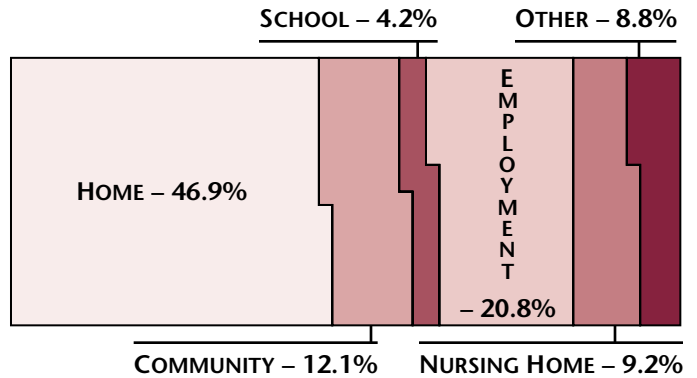


Figure 2 also indicates that the majority of direct support professionals are supporting people with developmental disabilities in a wide variety of settings. The majority of them are working in individuals' homes, followed by employment sites and community venues. Based on the diversity of settings, direct support professionals need to be able to provide personal care, as well as

housekeeping tasks, job training and community living supports. While the DDI training initiative does not address these varied and specific skill sets, it does provide workers with the values, communication skills, and problem-solving strategies that they need to work across settings and with the unique characteristics of the consumers they support.

Work Environment



with this work because she knows it makes a difference in people's lives.

Debbie enjoys being an advocate and fighting for consumers to improve access to services—and the services themselves. “When I advocate for a service that a consumer wants and they receive it,” she says, “I get a sense of satisfaction knowing I helped in the

process.” She finds training enjoyable because it gives her an opportunity to teach other direct support professionals how to become advocates. Then they, in turn, can assist consumers in becoming self advocates. Debbie knows that burn-out is a threat to anyone who embarks on a career in direct support. She makes a strong case for

career ladders and mentorship programs. “I drew my strength from support I received from other direct support professionals I worked with, and their advice,” she says. “I also tried to mix up the routine of the work schedule, to stay positive.”



Debbie Morgan mixes experience and enthusiasm in her role as a trainer.

Program and Participant Feedback



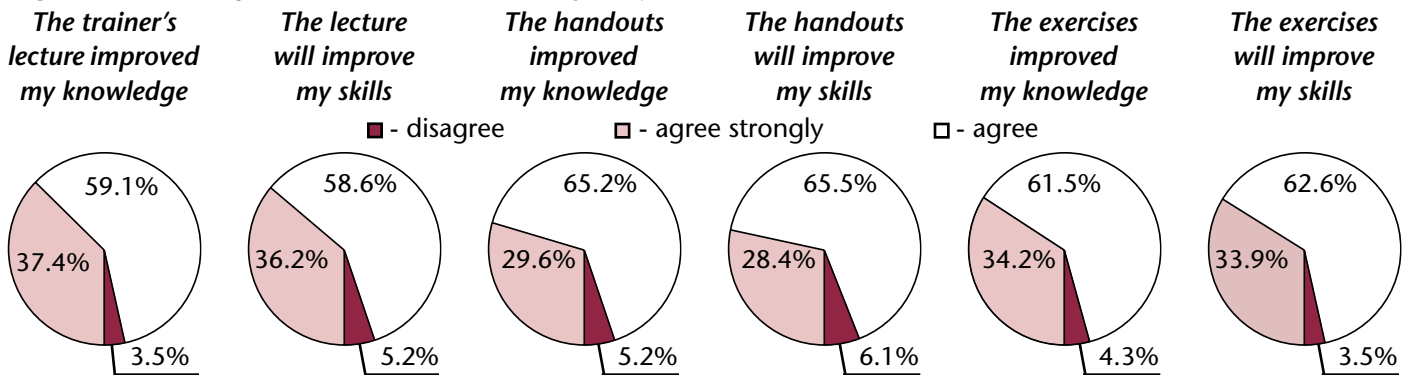
“Keep up the great work!”

– Trainee

Project staff recently completed initial analysis of trainee attitudes and responses to their training experience during the most recent biennial reporting period (July-December 2003). While final analysis of the data is ongoing, some trends are clear. All of those responding agreed or strongly agreed that training objectives were clear, presentations were appropriate to accomplish those objectives, and that trainers had excellent knowledge about

content and presented information in an interesting and effective manner. Agreement to the question of whether trainers left sufficient time for discussion and questions, and were able to adequately answer all questions or suggest resources to contact for additional information was, similarly, 100 percent. As shown below, responses to other evaluative questions showed a remarkably high opinion as to the value of the training regimen.

Figure 5. Participant evaluation of training (July-December 2003) (n = 117)



– In Memoriam –

Rozellia “Cookie” Gant

Cookie once told me most people couldn't pronounce Rozellia correctly, so she preferred her nickname, “Cookie.” Which, she said, more people could pronounce and certainly would remember after meeting her.

How could you forget Cookie? She was a woman with an endearing smile who dominated a room with her presence. Cookie was an Empowerment Education Trainer for several years and traveled across the state to facilitate training sessions. She was well liked as a trainer because she personalized the training material, injecting it with her own stories and examples of how the curriculum worked in real-life situations.

I, for one, will miss her visits to my office. She would drop by to chat about training but, invariably, the subject would get around to the current state of some policy regarding disability. She almost always had an idea of how to right injustices, and she wasn't afraid

to travel alone to advocate publicly for her beliefs. Cookie was a fearless advocate for people with disabilities and her activism brought her to Washington, D.C. and many other places.

When she had an idea that could help people, she quickly went about finding resources to move from concept to product. She received grants to produce a resource guide

of Michigan's hotels, restaurants, and entertainment venues that were fully accessible. Cookie was well known in advocacy circles. She served on several committees and boards, including those for ADAPT and Michigan Protection & Advocacy Services. She truly was inspirational to the many that knew her.

Sadly, Cookie passed away last fall. In her honor, the Cookie Gant Memorial Fund was established. If you (or your organization) wish to make a donation to this fund, which provides scholarships to disability advocates, please call 1(800) 760-4600 or contact Norm DeLisle via e-mail at <ndelisle@voyager.net>.



Rozellia “Cookie” Gant

Direct Support Professionals and Consumers Speak Out on the System



In 2002 DDI had the opportunity to conduct a survey with direct support professionals and consumers who receive personal assistance services to examine system reform issues from both provider and recipient perspectives. This survey was conducted in affiliation with the Personal Assistance and Support Services project (funded by the Centers for Medicare & Medicaid Services, or CMS). A discussion of results from this review follows.

Consumer Voices
While consumers were quite satisfied with the services they received (Figure 6), they identified several factors that interfered with them having maximum control over their personal assistance (Figure 7).

Figure 6.
Consumer satisfaction with personal assistance services received (n = 202)

	mean	Very Satisfied (4)	Satisfied (3)	Somewhat Satisfied (2)	Dissatisfied (1)
Reliability of services	3.1	34% (69)	34% (69)	14% (28)	4% (28)
Choice of who I hire	3.0	33% (67)	24% (48)	13% (27)	8% (28)
Consistency of services	3.0	31% (62)	30% (60)	15% (31)	10% (28)
Amount of services	3.0	30% (60)	33% (67)	13% (27)	10% (28)
Timeliness of services	3.0	29% (58)	32% (64)	18% (36)	7% (28)
Type of services	3.0	27% (55)	32% (65)	17% (35)	6% (28)
Training of PAs	3.0	25% (51)	31% (62)	14% (29)	7% (28)
Supervision of PAs	2.9	25% (51)	30% (60)	16% (33)	6% (28)

“This is a very demanding field, physically and mentally. Wages are not so great so it has to be a job you care about and stick with. The respect you get from consumers is more than you get from the employer.”

– direct support professional, responding to survey of attitudes

Figure 7.
Factors interfering with consumers having maximum control over PASS (n = 202)

Low wages to personal assistants	54% (108)
Shortage of personal assistants	44% (88)
Not enough benefits to personal assistants	41.5% (82)
Lack of choice regarding the types of services used	36% (72)
Lack of choice regarding the amount of services used	36% (72)
Not enough hours (or too many) to offer	34% (69)
Inadequate information on consumer directed options	27% (55)
Lack of choice on who I can hire	19% (39)
Lack of choice on firing personal assistants	10% (20)



Maintaining good relationships and open communication is always important.

Direct Support Professional Voices



“The material was excellent and well-explained.”

– Trainee

Direct Support Professionals funded through one of five CMS programs in Michigan³ were surveyed. Those workers who completed the survey were predominantly female, between the ages of 25-54, had completed high school or had some college and worked full-time in the area of personal assistance. Most reported that they had provided personal assistance for at least three years. When asked how long they planned to continue to work in direct care, more than half of the respondents indicated that they weren’t sure, while 30 percent stated that this was their permanent career. Most chose this work in order to help people

(Figure 8), and stay in it because of the rewards of caring for others (Figure 9). However, a majority identified wages, health insurance, job stability and respect as the most important working conditions (Figure 10), and continuing problems in these areas may lead to further difficulties in recruitment and retention among these vital workers. Moreover, respondents indicated limited or low job satisfaction with promotion opportunities, wages, and (especially) benefits (Figure 11). Comments reflect the fact that DSPs are doing a hard job for little money because of the close relationships developed with consumers.

Figure 8.
Main reasons for choosing to be a personal assistant (n = 154)

To help others	76% (117)
To care for a family member	34% (53)
Flexible work hours	32% (50)
To work close to home	25% (39)
To work toward a nursing or other health care degree	18% (28)
To get a needed job	17% (27)

Figure 9.
Reasons for remaining a personal assistant (n = 154)

Rewards of caring for people	81% (125)
I need the job/money	44% (68)
Flexible work hours	36% (56)
Respect I get from consumers	33% (51)
Recognition and respect from supervisors	16% (27)

Figure 10.
Most important working conditions (n = 154)

Wages	67% (104)
Health insurance	59% (91)
Job stability	54% (84)
Respect	52% (80)
Paid sick leave	38% (59)
Paid vacations	38% (59)
Training opportunities	34% (53)
Workload	29% (44)
Tuition reimbursement	17% (26)
Transportation assistance	10% (16)
Child care assistance	10% (15)

Figure 11.
Personal assistants’ level of job satisfaction (n = 154)

	mean	Very Satisfied (4)	Satisfied (3)	Somewhat Satisfied (2)	Dissatisfied (1)
Being valued	3.6	26% (40)	36% (56)	16% (24)	10% (16)
Training	2.9	23% (36)	36% (56)	16% (24)	9% (14)
Job stability	2.8	20% (31)	41% (63)	19% (29)	8% (13)
Workload	2.8	19% (29)	43% (67)	20% (31)	7% (11)
Supervision	2.4	21% (12)	36% (55)	16% (25)	11% (17)
Promotion opportunities	2.1	10% (16)	19% (29)	25% (38)	29% (45)
Wages	2.1	8% (12)	23% (35)	29% (45)	30% (47)
Benefits	1.9	6% (10)	19% (29)	18% (28)	42% (64)

³ The five CMS programs were: Home Help, MI Choice Waiver for Elderly and Disabled, the Children’s Waiver, the Michigan Habilitation Supports Waiver, and Michigan CMHS – Freedom of Choice Waiver.

PASS Project Research Recommendations

1. Recruitment of direct support professionals is, and will continue to be, a major issue. Communities may want to pool resources in order to centralize the recruitment process.
2. There is a need to educate DSPs regarding the “Earned Income Tax Credit” program. One possibility is to send out a notice when the state mails out W-2 forms.
3. DSPs should be educated on how to keep Medicaid and work, how to enroll children into MI Child, how to access the childcare subsidy, and how to get into group health plans.



The session was very informative. I wouldn't change anything.
— *Trainee*

Trainer Profile: Laurie Thomas, Advocate

Laurie Thomas has enjoyed a long affiliation with the Developmental Disabilities Institute. It began with a project that involved a collaborative partnership with the Grand Rapids Center for Independent Living, where Laurie was employed at the time. When she learned about the Empowerment Education Project, Laurie was immediately interested in becoming a trainer.

Though she was already employed as an advocate, specializing in community organizing and finding employment opportunities for people with disabilities, she was convinced that her personal experience with disability would enhance the training project. “I had a personal awakening about my own disability and how it impacts my life,” she says. “I looked around and realized other people like me were sharing the same plight.”

Laurie values Empowerment Education because it connects her with people

on the front line, those who work directly with consumers. “The training is absolutely necessary for direct support professionals and personal assistants,” she says. “It works by helping them be more effective in their daily jobs.”

As a person with a disability, Laurie brings credibility to the learning experience. “Trainees tend to really listen to me because I am a living example of how people with disabilities can

lead active, productive lives,” she says.

Laurie herself is, indeed, active. She is currently seeking the Unitarian Universalist minister credential, to add to her already completed coursework in this subject. She is also the author of *Proud Voices*, a history of the disabilities rights movement in Michigan.

The book is based on a collection of interviews with leaders of the Michigan disability rights/advocacy

movement. It chronicles the disability rights movement of people with physical disabilities. “People in Michigan didn’t necessarily know about Ed Roberts’ activities in the California disability rights community, because communication in those days made it more difficult for people to know what was going on in other parts of the country,” says Laurie. Ultimately, she added, the disability rights movement “led the way for people with disabilities to find employment and housing.”

Laurie’s advocacy means working to continue the struggles made by the pioneers she chronicles, and to add to the gains already achieved. “We have to continue to advocate for our rights, and make sure we don’t lose opportunities because we have disabilities,” Laurie explains.

Anyone interested in obtaining a copy of Proud Voices can contact Elizabeth Janks at the Developmental Disabilities Institute.



Laurie Thomas is an active trainer, advocate, and activist for disability rights.

Supporting Direct Support Professionals

A Brief History of The Michigan Alliance of Direct Support Professionals

One late fall day in Flint, in a room on the lower level of the Prah! College Center at Mott Community College, 37 direct support professionals convened the first meeting of the Michigan Alliance of Direct Support Professionals. The National Alliance, which was already established, lent infrastructure to the Michigan chapter and

staff from the Empowerment Education Training initiative at DDI facilitated that first meeting, on October 24, 1998.

The purpose of the first meeting was to learn about the National Alliance of Direct Support Professionals, discuss then-current activities in Michigan that reflected Alliance goals and determine the type of relationship Michigan Direct Support Professionals might want to have with the Alliance's national mission.



The Prah! College Center at Mott Community College has hosted monthly meetings of the Michigan Alliance of Direct Support Professionals since the group's inception.

The presentation to the group of interested members included:

- History, mission, overview and goals, as well as the fact that the alliance is not a member organization.
- That the alliance seeks to join other organizations to promote the inclusion of Direct Support Professionals.
- That the Developmental Disabilities Institute is committed to offering assistance (time, money, etc.) to the group and to working as a supportive group partner.

Attendees were asked: "What are Michigan Direct Support Professionals currently doing to support or reflect the five goals of the national Alliance?"

1. Enhancing the status of direct support professionals.
2. Providing better access for all direct support professionals to high quality educational experiences
3. Strengthening the working relationship and partnerships between Direct Support professional's, self-advocates, other consumer groups and families
4. Promoting systems reform (policy, legislation, funding practices) that improves access to education and career paths, as well as improving compensation.
5. Supporting the development and implementation of a national, voluntary credentialing process for direct support professionals

After much debate, participants concluded that they would continue to meet and focus on NADSP Goal #1

and work on increasing respect for Direct Support Professionals.



Six years later the Michigan Alliance of Direct Support Professionals continues to meet monthly at Mott Community College. This dedicated group of direct support professionals has accomplished several goals, including:

- Four Direct Support Professional Forum Conferences have been held and were attended by 350 direct support professionals working at agencies statewide
- Sponsored a workshop on state and federal tax credits that benefit low wage workers by Hollis Turnham, Michigan Policy Director, Paraprofessional Healthcare Institute.
- Sponsor scholarships for Direct Support Professionals who want to attend state conferences.
- Worked to develop a website hosted at <http://www.wayne.edu/DDI//commsup/MADSP_splash.htm>.
- Established an electronic ListServ at <<http://www.Michigan-DSP@yahoogroups.com>>
- Wrote letters to all Michigan State Representatives and Senators highlighting issues of relevance to direct support professionals and the people they work for in the field.
- The Michigan Alliance of Direct Support Professionals is currently working toward adopting by-laws and working on incorporating as a not for profit organization.

If you would like to join us please contact Elizabeth Janks at (313) 577-6368 for details. The group generally meets

Annual Forums

Among the most visible activities of the alliance is holding an annual forum for direct support professionals. The events provide an opportunity for DSPs and their allies around the state to gather and share ideas and perspectives about where the field is headed and how it

Recognition awards

An important occurrence at each year's Forum is the public recognition given to individuals who have made outstanding contributions to the field within our state. Exceptional direct support professionals are presented a certificate by State Representative Paula Zelenko of Michigan's 50th District. Recognition awards honor colleagues who selflessly promote the work of Direct Support Professionals and exemplify an ideal of the service DSPs should provide.

the third Thursday of each month at Mott Community College, Prah College Center in the Genesee Room.

can be promoted and enhanced. Members who seldom—if ever—are able to attend monthly meetings, and communicate via mail and the ListServ are able to meet their colleagues and contribute to vital discussions and decisions.



Meetings of the Michigan Alliance of Direct Support Professionals are invariably active.



State Representative Paula Zelenko congratulates a recognition award recipient during the Michigan Association of Direct Support Professionals' Annual Forum.

Emerging Issues

Recruitment

Historically, the importance of hiring quality direct care professionals to work with people with developmental disabilities has been an on-going problem.⁴ Recruiting and retaining a quality workforce is a difficult issue that has persisted through several paradigm shifts: institutionalization, deinstitutionalization, and the current era of community supports. Today, we are on the verge of an employment crisis for DSPs that will affect much of our aging society's population. HHS Secretary Tommy Thompson asserts that the shortfall in the direct support workforce can be addressed if basic recommendations are adopted,⁵ including:

- Innovative recruitment strategies that will increase the labor pool by targeting non-traditional persons such as
 - high school students
 - college students, and
 - people with disabilities
- Supporting state and local initiatives to increase the recruitment and retention of direct support professionals
- Continuing to support training and education for long-term care workers
- Finding new sources of wage increases, worker compensation and benefits
- Engaging employers and employees, as well as state and local officials in a dialogue on issues related to pay, benefits, career ladders, and improved worker conditions

These recommendations align with direct support professional workforce research findings that:

- Direct support professionals need adequate compensation and benefits to take care of their families. Many DSPs are America's working poor, with two jobs to meet living costs.⁶
- Career ladders and educational advancement should be made available to advance the professionalism of the direct support workforce.
- DSPs need competency-based training to perform their jobs well.⁷
- DSPs should be valued and respected for their work.⁸
- Little or no training is available to DSP supervisors, often promoted out of necessity. In new roles, they don't have the needed resources to solve daily staffing dilemmas.

"I will use this information to train both consumers and direct support professionals to have more effective working relationships."
 – Training participant

⁴ Hall & Hall, June 2002

⁵ HHS report, May 2003

⁶ Larson, 1998

⁷ Hewitt & Larson, 1994

⁸ Teal, March/April 2002

Trainer Profile: Kathy Flowers, Community Support Coordinator at The Disability Network

Kathy is well-recognized as an advocate for people with disabilities.

Among her activities is participation on the boards of many disability organizations.



Kathy began her career as a direct support professional at the Michigan Youth & Family Development Agency. She worked as a direct support professional for individuals with hearing impairments who had a dual diagnosis.

There were two reasons she wanted that specific assignment. "My son Christopher was an infant and I discovered that he was deaf," Kathy explains. "I decided to return to college to study social work, and I wanted a job that would give me

Compensation

In 2002, the Michigan Assisted Living Association conducted a Wage and Benefit Survey of mental health providers. Analysis of responses from 106 MALA members who provide mental health services, either in residential licensed or unlicensed settings, yields wage data for 2001 – 2002.

The average starting pay for a direct care worker in a licensed residential mental health setting was \$7.52/hour, virtually unchanged from the \$7.53 rate in a comparable survey from 2000. The average starting hourly wage in an unlicensed setting (e.g., a supported independence program), was slightly higher at \$7.73/hour, not much changed from the \$7.66 average in 2000 (Figure 12).

Annualization based on a 2,080 hour work year (40 hrs./wk., 52 wks./yr.), results in earnings of \$15,642 per year for licensed direct care workers and

Retention

Reflecting on this profession as regards wages and benefits it is not surprising that turnover rates are very high or that it is increasingly difficult to recruit people to the field. Residential direct care staff turnover was 53 percent and residential home manger turnover was 18 percent. This far exceeds the national averages of 12 percent for all industries and 19 percent for health services.

\$16,078 per year for direct care workers in unlicensed settings. For home managers in a licensed residential setting the average starting pay was \$10.62 per hour, little changed from the \$10.54 rate of 2000. The overall average pay for a home manager or equivalent in a licensed setting was \$12.21 per hour or \$25,397 per year.

Increases in wages since 1995 have not kept up with the basic cost of living. The federal poverty threshold for a single parent with two children is \$14,494 and for a two-parent family with two children it is \$18,244. Michigan’s tax on a family of three with minimum-wage earnings is seventh highest in the nation.⁹

In terms of indirect compensation, 20 percent of providers have cancelled health benefits, while 75 percent have asked employees to share more of the costs of the benefits offered.

Turnover is costly as the employer has already paid to train a worker and now must train another—if one can be found. Turnover is highest during the first six months on the job, so there is a shortage of experienced staff to assist consumers or to be promoted. Most importantly, an underpaid, under-trained and under-appreciated direct support professional adversely impacts the quality of services consumers receive.

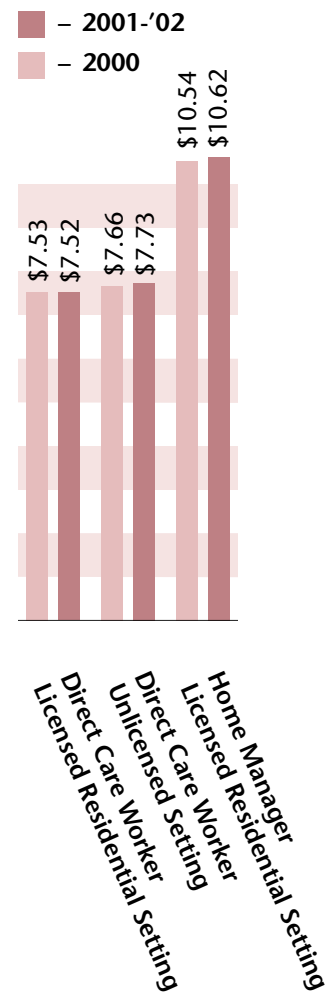
both the experience in the social services field and more information to help my child.” Today, as a Supports Coordinator at the Disability Network, Kathy works with people who have developmental disabilities. She has been with her current employer eight years.

Five years an Empowerment Education trainer, Kathy has strong views about the experience. “Empowerment Education gives me an opportunity to work with people who are direct support professionals and to teach about the principles of self-determination, person centered

planning and the importance of independent living,” she says. Kathy believes DSPs should receive on-going training because of the direct and positive benefits training can have on the lives of people with disabilities. “Empowerment Education Training teaches direct sup-



Figure 12.
DSP Wages 2000-2002



⁹ Michigan League for Human Services October 17, 2003



The images you have seen here on this and the preceding pages use American Sign Language to finger spell the motto “Working Together.”

This statement, it seems to us, accurately reflects a sentiment that should—and, in fact, must—come to represent the attitude of all those striving to improve conditions for consumers and direct support professionals.

For, in truth, when all of us—policy makers, professionals, DSPs, consumers and allies—work toward the same goals, our combined strength is truly unstoppable.

Certification and Credentialing

Direct Support Professionals are an essential and vital community link for individuals with a disability and their families. Their role in the lives of people with disabilities can not be denied. On October 24, 2003, the U.S. Senate passed a resolution recognizing the importance of direct support professionals. It states that direct support professionals have made it possible for people with disabilities to live and work in their communities.

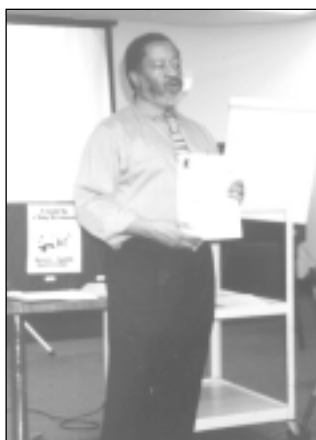
Unfortunately, providers of supports and services to individuals who depend on direct support professionals to lead full lives typically draw from a labor market that competes with other entry-level jobs. These jobs require work that is less demanding, both physically and emotionally, and often offer higher pay and other benefits. Direct support professionals’ jobs are thus not competitive in today’s labor market.

The Senate resolution recognizes the impossibility of continuing to staff direct support positions by hiring people who view the work as a temporary job on their way to another career or a “quick fix” to pay bills until a better paying position becomes available.

The National Alliance for Direct Sup-

port Professionals has proposed a voluntary, nationally-recognized credential, which would improve supports to people who rely on human services for assistance by strengthening the direct support profession. The NADSP proposal states, “Essential to shaping a rigorous, voluntary credential is the recognition and acceptance of the body of skills, knowledge and ethics that represent the spirit and essence of the direct support role in the contemporary human service environment. Establishing these elements of a professional identity is critical to changing the image of direct support to a job that is recognized within society and offers the promise of primary life work.” A voluntary credential, tied to competency-based skills, increases the likelihood of attracting quality people to the field and should stress the important role DSPs have in assisting consumers toward self-direction.

This national credential could be renewed regularly and kept up-to-date using a database. People with disabilities in need of a direct support professional could use a statewide database to gain access to workers who have received an accredited credential before scheduling an employment interview.



Bruce Smith presents training information.

Trainer Profile: Bruce Smith

Bruce Smith’s work at the Wayne County Detention Center gave him extensive exposure to youths involved with the juvenile justice system, and he noticed that many had disabilities. He believes that growing up they lacked parents who would advocate for the educational support services that could have helped them. Without parental involvement these

youths made inappropriate life choices that brought them into the juvenile justice system.

Many children in the penal system have fetal alcohol syndrome or lead poisoning; others have mothers who used drugs while they were pregnant. Bruce was interested in working with these young people because of his own experiences. Growing up, his

friends were often incarcerated or victims of violence because of the dangerous life-styles they lived. “I knew there had to be a way to circumvent kids from getting into this type of trouble, and being victims of violence,” Bruce says. “I knew some of them needed help they weren’t getting at home.” Bruce has watched these youths become productive and positive after receiving educational support and atten-

Listed below are some examples of philosophical, ethical and skills-based competencies that should be considered when developing a credential for direct support professionals:¹⁰

- The direct support professional and the consumer are partners. This partnership includes mutual respect and a collaborative approach, rather than the imposition of control.
- The role to be shaped by the direct support credential is that of fully empowered, expert practitioners who embrace long-term direct service work as their primary life's work.
- Direct support professionals recognize that consumers' social and community networks are central to their success and that their own role seeks to strengthen, not replace them.
- The credential must be voluntary. Each DSP must be free to pursue a professional credential without external pressure. Mandatory credentialing could remove or diminish consumer choice and/or lead to inflexible services and the imposition of new burdens on all parties.
- The credential's purpose is to encourage people to recognize—and select—direct service as a primary life work, not to exclude anyone.
- All key affected stakeholders must partner collaboratively to develop and implement national credentials.

The content of the credential should include:¹⁰

- A base of valid, consensus-driven criteria, deriving from a mastery of and expertise in competency-based performance indicators.
- Credential competencies representing a consensus of consumers, workers, families, employers, administrators, trainers, funders and educators.
- State or national credentials defined based on competencies to help structure career and education ladders for students and incumbent workers.
- Integration with related learning experiences in secondary and post-secondary educational settings to increase the exposure of young people to human services at earlier ages.
- Investing in a credentialing process via both financial support and restructuring of training requirements to align with credential criteria as a critical role for policy makers, industry leaders and public funders.

tion from someone who cares about them.

After 20 years, Bruce left his job at the detention facility to teach sociology and criminology at Wayne State University. Nevertheless, he continues to volunteer at the detention center and with other programs that involve children in the juvenile justice system. He currently facilitates a parent support group and sponsors workshops to educate parents about supports

they can access to help their children.

Bruce believes that helping parents is the most effective way to achieve positive outcomes for the children. He and his wife have extensive parenting experience as the proud parents of 13 children, several of whom have special needs. "We have children who range in age from 6 to 40 and five wonderful grandchildren," says Bruce.

Bruce learned about Empowerment Education while employed at Wayne State. He is an alumnus of the first train-the-trainer class, and continues to provide Empowerment Education training. "I enjoy teaching and I think the training teaches direct support professionals valuable information that they in turn pass on to consumers and parents of children who have disabilities," he adds.

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Acknowledgments

The authors gratefully acknowledge the assistance of all those who consented to be photographed. We are particularly thankful to Kathy Flowers, Abe Lindner, Debbie Morgan, Bruce Smith, and Laurie Thomas, who agreed to be profiled. Finally, we thank the staff of the Developmental Disabilities Institute, especially Michael Bray, without whose help this report could not have been completed.



In the future . . .

Several of the current Empowerment Education Direct Support Professional Training modules have recently updated literature and activities supporting what is new in evidence-based best practices in the field.

In addition, the initiative will offer three new modules in the Direct Support Professional Training series in 2004:

Sponsoring Community Mentorship Opportunities for People with Disabilities

This module teaches community mentorship. Some DSPs choose to bring persons with disabilities into their homes to teach independent living skills and prepare them to eventually move into their own homes. Objectives include:

- Define the community mentorship model
- Learn if community mentorship is right for you
- Identify strategies to start community mentorship
- Develop your own community mentorship program
- Identify steps to the transition plan and fading

So You Want To Be a Direct Support Professional

This session will introduce reasonable expectations for anyone beginning work with persons who have disabilities. Learner objectives will include:

- identify key tasks direct support professionals must accomplish daily
- identify personality traits successful direct support professionals possess
- understand the role of the DSP in the lives of people with disabilities
- learn about rewards and benefits associated with being a DSP

Self-Determination, Part 2

This module will serve as a follow-up to the much requested "Self-Determination: Our Right to Meaningful and Fulfilling Lives." The topic is teaching self-determination skills to people with disabilities. Objectives are:

- Identifying the five principles of self-determination
- Understanding the five principles of self-determination
- Developing life goals incorporating principles of self-determination
- Understanding DSPs' roles in supporting others' self-determination

Future goals for the initiative include:

- Increasing training availability for DSPs residing in the state's Upper Peninsula
- Increasing training to culturally diverse DSPs.

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Produced in March, 2004