

Memorandum

Attracting Direct Support Professionals: Advancing Career Pathways with Job Quality in Mind

Introduction

For years, workforce experts have viewed the shortage of direct support professionals (DSPs) as a crisis. According to [PHI](#), a nonprofit organization focused on research and advocacy for direct care workers—including not only DSPs, but also family caregivers, home health workers, certified nursing assistants, and personal assistants—the direct care sector is poised to [add more new jobs than any other occupation](#) in 2021–31. Specifically, [PHI](#) projected in a 2023 report that 9.3 million direct care jobs will need to be filled during this decade, including both new positions and vacancies. In 2023, the Biden Administration’s [Executive Order on Increasing Access to High-Quality Care and Supporting Caregivers](#) recognized the workforce crisis and directed federal agencies to collaborate to mitigate it. In the same spirit, this memo reviews policy and practice recommendations to help federal policymakers and stakeholders increase the recruitment, retention, and career progression of DSPs.

Context

DSPs support people with disabilities and older adults to live independently, participate in their communities, and seek and maintain [competitive integrated employment \(CIE\)](#). DSPs help people find and retain high-quality jobs, often playing a critical role in supporting the employment of people with a wide range of disabilities. The data show that DSPs are indispensable: In a 2022 survey of community-based providers that serve people with intellectual and developmental disabilities, for example, [83 percent reported turning away new referrals, and 92 percent reported struggling to achieve quality standards](#) because of insufficient numbers of direct care workers.

The findings indicate a significant need to expand the supply of DSPs who can support people with disabilities to live, work, and contribute to their communities. Nationally, however, disability service systems have struggled in this regard, with the most frequently cited hindrances to filling DSP positions being [low wages, lack of benefits, and limited upward mobility](#). Employers, policymakers, and others in the workforce development system must find new strategies to recruit and retain DSPs.

In this memo, we present three recommendations for making the occupation more attractive to job seekers:

- Reframing and honoring DSP work as a service tied directly to our national interests.

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- Supporting policies and practices that enable DSPs to build on their skills, earn postsecondary education credentials, advance in their careers, and earn higher wages.
- Encouraging people with disabilities and others who want to work to become DSPs.

This memo also addresses two topics that emerged from the [LEAD Center's 2022 Direct Support Professionals Think Tank Recommendations](#): 1) DSP career pathways and training and 2) DSP wages and benefits. In addition, the recommendations suggested here align with strategies included in the [Bipartisan Policy Center's 2023 report](#) on addressing the broader direct care workforce shortage, which highlights the need for public-private partnerships and innovative approaches to attract and retain direct care workers, including DSPs.

Reframe and honor DSP work as a service tied directly to our national interests

Essential but undervalued, DSPs conduct critical work. They deserve respect and should earn wages that allow them to support and sustain themselves. Prioritization of direct support work within national service programs could help highlight the need and value of DSPs. In the past, our country has created special service corps, such as [AmeriCorps](#), [National Health Service Corps](#), and [Climate Corps](#), to honor and recruit people performing work in times of need. Similarly, integrating the DSP profession into existing national service programs such as [Public Health AmeriCorps](#) or others could be a way to attract, train, and provide a career pathway for people to enter the DSP field. AmeriCorps [provides members](#) with an annual living allowance, money for college and trade schools, loan deferment and interest forbearance, professional development, and an alumni network.

Another entry point could include [Job Corps](#). Since 1964, Job Corps has helped youth (ages 16 to 24) finish high school while also providing training for careers in a variety of industries. Job Corps offers a training program, [Advanced Human Services Worker/Residential Advisor](#), that could serve as a model for creating a nationally recognized DSP credential/certification program, such as the ones offered by the [National Alliance for Direct Support Professionals](#) and [National Association of State Directors of Developmental Disabilities Services](#). Another option could be to include DSP training in the [Job Corps Health Care](#) pathway.

Support policies and practices that enable DSPs to build on their skills, earn postsecondary education credentials, advance in their careers, and earn higher wages. Even though their work requires significant technical and interpersonal skills, DSPs receive low wages and few benefits. An August 2023 brief from the [U.S. Department of Health and Human Services' Assistant Secretary for Planning and Evaluation](#) found that 45 percent of the direct care workforce live below 200 percent of the federal poverty level, and nearly half (47 percent) rely on public assistance. Strategies to increase earnings and improve DSPs' financial security may include:

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Supporting employee ownership as a mechanism to increase DSP assets. Employee ownership can take many forms, with [employee stock ownership plans \(ESOP\)](#) being the most common in the United States. ESOPs allow employees to own shares through a company-funded trust. The value of company shares ostensibly accrues over time, to be drawn down by employees in retirement. One large company offering an ESOP is the disability services organization, [MyPath Companies](#) in Oconomowoc, Wisconsin, whose employees, including DSPs, each own a part. Other industry employers with ESOPs include [Eon, Inc.](#) (New Ulm, Minnesota), [Manos Home Care](#) (Oakland, California), [NHS Northstar](#) (Chisholm, Minnesota), and [Opportunities for Positive Growth](#) (Fishers, Indiana).

Other forms of [employee ownership](#) include stock options, synthetic equity (i.e., granting the right to the value of shares but not the shares themselves), employee ownership trusts, and worker cooperatives (co-ops). Worker co-ops run democratically and are owned by workers who pay a fee to join. In theory, worker co-ops intend to maximize wages, increase benefits, provide employees a voice in decision-making, and increase their status through business ownership. The first such co-op in the direct care industry, [Cooperative Home Care Associates \(CHCA\)](#), was founded in 1985 by workers in New York City to address low wages and benefits. Co-ops provide [wage and benefit increases](#), and experience a [41 percent turnover rate](#) compared to the industry average of 65 percent. Co-ops also provide workers with leadership development opportunities, as they vote on business decisions and may serve on the board.

Exploring existing and potential federal, state, and private investments in DSP job quality and supporting states' experimentation to raise the DSP wage floor. Companies that employ DSPs, employee-owned or not, struggle to pay living wages. Because the Centers for Medicare and Medicaid Services [funds more than 44 percent of long-term services and supports](#), Medicaid reimbursement rates directly impact DSP wages. Medicaid reimbursement rates create a wage floor that, despite high labor demand, suppresses wages and keeps them static. Raising the wage floor would require higher appropriations in the federal budget, such as those proposed in the [Better Care Better Jobs Act \(S.100; H.R. 547\)](#), and passing such meaningful legislation would require bipartisan sponsorship.

At the state level, [19 states have implemented new strategies](#) to increase wages for direct care workers through reporting or enforcement mechanisms. Though the wage gains may not in all cases reach the threshold of a “living wage”—a wage that allows a person to fully support themselves without government or other assistance—these efforts move DSPs closer to self-sustaining employment.

Many states use blending, braiding, and sequencing strategies to leverage funding across systems, ensuring that money stretches further not only to support job security for DSPs, but also to maintain service continuity for people receiving care. For example, [the District of](#)

[Columbia](#) requires that providers of HCBS Supported Employment and Employment Readiness Services become vocational rehabilitation (VR) providers so that people receiving Medicaid HCBS employment-related services through the Developmental Disabilities Administration (DDA) can move between DDA and VR programs without having to change providers or be concerned about who is paying for their supports and services. Nine federal agencies encourage the use of blending, braiding, and sequencing in their [Joint Communication on Resource Leveraging & Service Coordination to Increase Competitive Integrated Employment for Individuals with Disabilities](#) and the accompanying resource, [Frequently Asked Questions: Competitive Integrated Employment and Blending, Braiding, and Sequencing Resources \(Services and Funding\)](#).

State minimum wages are rising, but not enough. In 2023, Tennessee raised the hourly minimum wage for DSPs to \$15. For a single person living in Tennessee in 2024, however, a living wage is \$20.77 per hour, while a worker with one child would need to make \$33.72 per hour to earn a living wage, according to the Massachusetts Institute of Technology's [living wage calculator](#). In [New York](#), the minimum hourly wage for home care aides increased from \$15.20 to \$16.20 in 2022, then to \$17.55 in 2024. Though improving, these wages do not meet the average living wage floor of \$26.86 per hour for a single person in New York or \$48.16 per hour for a person with one child.

Another strategy to support DSP wages is outlined in the [Medicaid Program: Ensuring Access to Medicaid Services Final Rule \(2024\)](#), which requires that 80% of Medicaid rates for homemaker, home health aide, and personal care waivers are passed to workers within six years. This means that by 2030, agencies that provide these services must spend 80% of their Medicaid payments on direct care worker compensation. Federally funded technical assistance centers focused on the direct care workforce (e.g., [Direct Care Workforce Strategies Center](#)) can disseminate what they are learning from states' experimentation to further inform federal, state, and local actions.

Supporting DSP-related unions and union organizing. A recent U.S. Department of the Treasury publication reports that [unions raise member wages by 10 to 15 percent](#) across industries. Likewise, an analysis of data from the Current Population Survey finds that wages for the 11 percent of direct care workers represented by a union are 7.6 percent [higher than those of nonunionized direct care workers](#). In [Washington](#) and [California](#), unions have contributed to modest wage and benefit increases. The [2021 White House Executive Order on Worker Organizing and Empowerment](#) encourages worker organizing and collective bargaining as a strategy to increase wages and benefits.

Encouraging the expansion of existing and new opportunities for advancement and wage progression within the DSP profession. DSPs need access to advancement opportunities, quality training, and education, all of which contribute [to a good job](#) that pays living wages.

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Employers need to be able to offer competitive salaries and opportunities for wage progression to recruit and retain DSPs. Some employers have created internal career ladders for their DSPs. Advancement opportunities for DSPs may include serving in [peer mentor roles](#) and moving up into [program management and clinical supports jobs](#). New York’s [DSP Supervisor Apprenticeship](#), for example, builds on the effectiveness of the earn-and-learn strategy to formalize the career path for DSPs into supervisory roles.

Encouraging DSPs’ advancement and wage progression in higher-paying related professions and supporting their pursuit of college degrees to reach career goals. As outlined in the U.S. Department of Labor’s [Good Job Principles](#) fact sheet, workers’ wages should ideally increase as they gain skills and experience. In practice, however, most low-wage workers, including DSPs, [lack opportunities to advance to a level where they can earn a living wage](#) unless they earn credentials that qualify them to advance to higher-paying occupations.

The [Quality Improvement in Long Term Services and Supports \(QuILTSS\) Institute’s career pathways](#) for DSPs highlight opportunities with and without a degree requirement. In many systems, however, DSPs without an associate or bachelor’s degree rarely advance to leadership or supervisory positions. There are programs that support advancement: For example, the New Jersey Association of Community Providers offers a DSP Career Development Program, in partnership with the state’s Community College Consortium for Workforce and Economic Development, to recruit and train DSPs. Through this program, DSPs are [provided with tuition reimbursement and a stipend](#) while pursuing an associate degree.

Employers and systems that create opportunities for DSPs to pursue higher education credentials can make the profession more appealing to potential workers. In addition, the skills and education DSPs acquire can help them move on to other careers that pay family-sustaining salaries, with opportunities to earn additional credentials in many career pathways, such as allied health, human resources, job/career coaching, and education.

Minnesota’s “[Start in Health Care. Go Anywhere](#)” campaign highlights the diversity of career paths that DSPs can pursue. The state initiative features former DSPs who gained additional credentials to achieve more financial security, then went on to become leaders in the fields of social services and education. The campaign emphasizes that DSPs can pursue occupations such as:

- Community or social service provider (e.g., social worker, vocational rehabilitation counselor, or career counselor)
- Education (e.g., special education teacher or teacher’s aide)
- Health care practitioner (e.g., registered nurse, physical therapist, occupational therapist, or speech language pathologist)

Encourage people with disabilities and others who want to work to become DSPs

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People who are seeking new opportunities for work but frequently face barriers to employment, such as people with disabilities, immigrants, veterans, people receiving public assistance, and re-entry populations, could be candidates for DSP work. To encourage their participation in the labor market, the broader workforce system can identify opportunities for inclusion and engage the systems that support them. Strategies include:

Creating more accessible and flexible workplaces to accommodate people with disabilities working as DSPs. People with disabilities can support others with disabilities as DSPs, bringing their lived experiences as an asset to their work. [RCM of Washington](#) trains disabled people to do just that through its vocational training program [DSP Academy](#). For people who use assistive technology and want to work as DSPs, technological advancements and [remote support offerings](#) can facilitate success. There are benefits to the agencies that hire DSPs with disabilities, too, such as possible [tax benefits](#). Employers, including agencies that employ direct support professionals, can access resources from the [Office of Disability Employment Policy](#) and its [Employer Assistance and Resource Network on Disability Inclusion](#), [Job Accommodation Network](#), and [Partnership on Employment & Accessible Technology](#), as well as the business membership organization [Disability:IN to learn about creating inclusive and accessible workplaces](#).

Promoting the registered apprenticeship system as an entry point for new DSPs. Registered apprenticeship is an industry-driven, high-quality career pathway through which employers can develop and prepare their future workforce, and individuals can obtain paid work experience, receive progressive wage increases, classroom instruction, and a portable, nationally recognized credential. There are seven components of a registered apprenticeship:

1. **Industry led:** Registered apprenticeship programs are vetted and approved by industry to ensure alignment with industry standards and to make sure apprentices are adequately trained for highly skilled, high-demand occupations.
2. **Paid jobs:** Registered apprenticeships are jobs! Apprentices earn progressive wages as their skills and productivity increase.
3. **Structured on-the-job learning/mentorship:** Registered apprenticeship programs provide structured on-the-job training, including instruction from an experienced mentor, to prepare apprentices for a successful career.
4. **Supplemental education:** To ensure quality and success, apprentices are provided supplemental classroom education based on the employer's unique training needs.
5. **Diversity:** Registered apprenticeship programs are designed to reflect the communities in which they operate through strong nondiscrimination, anti-harassment, and recruitment practices that ensure access, equity, and inclusion.
6. **Quality and safety:** Apprentices are afforded worker protections while receiving rigorous training. They are equipped with both the skills they need to succeed and the proper training and supervision to be safe.

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7. **Credentials:** Apprentices earn a portable, nationally recognized credential within their industry.

[Registered apprenticeship programs](#) are registered either with the U.S. Department of Labor Office of Apprenticeship (OA) or a state apprenticeship agency and have access to federal resources, state tax credits where available, technical assistance, and a recognized credential. Examples of apprenticeship for DSPs are found in [Alaska](#), [Colorado](#), [Maryland](#), [Missouri](#), [New York](#), and [Tennessee](#).

Colorado, Alaska, and Missouri registered their apprenticeships with the U.S. Department of Labor's OA. Maryland, New York, and Tennessee have state-registered apprenticeships. Apprentices who complete these programs earn a portable, industry-recognized credential that allows DSPs to take their certifications with them more should they decide to transition between employers or careers.

Supporting Limited English Proficiency individuals and new immigrants to work as DSPs.

Reducing barriers for current employees with Limited English Proficiency (LEP) and encouraging more new immigrants to become DSPs could further expand labor supply. For current or potential LEP employees, employers could focus their hiring and on-the-job training practices to allow more LEP workers to both serve customers whose preferred language is not English and hone their English-language skills on the job.

Immigrants comprise [a quarter of the larger direct care workforce](#), including DSPs, and employers could offer more supports by partnering with organizations that serve new immigrants. In Worcester, Massachusetts, for example, Open Sky Community Service's [Human Services Career Support \(HSCS\) program](#) partners with other immigrant-serving agencies, including African Community Education, Seven Hills Foundation, and Southeast Asian Coalition, to provide five months of paid training, peer mentorship, and career placement services, among other supports. Participants also receive English language classes, immigration-related legal support, driver training and transportation, childcare, housing support, and assistance with a high school equivalency diploma. HSCS is funded by the [Massachusetts Executive Office of Labor and Workforce Development](#) and the [American Rescue Plan Act](#).

Potentially training and hiring returning citizens for DSP work. [According to the U.S. Department of Justice](#), some people with prior involvement with the justice system, particularly those with nonviolent offenses, could be good candidates for direct care work, if applicants pass background checks and assessments. Suggestions outlined in the [Fair Chance Hiring](#)

[Toolkit](#), developed by the [National Reentry Workforce Collaborative](#), can help employers reevaluate their hiring policies and practices and ultimately hire more people who are reentering the workforce. Additionally, the [Safer Demand Skills Collaborative](#), an employer-driven initiative focused on guiding returning citizens into in-demand industries, could serve as a model to follow.

Conclusion

DSPs play a critical role in helping disabled people live full lives, work in competitive integrated employment, and contribute to their communities. To address the worsening shortage of DSP workers, we recommend that workforce partners focus on the following priorities:

Promoting the value of direct support work and workers. Federal, state, local and community partners can consider launching national or local campaigns focused on DSP opportunities, including as national service. Campaigns may be used to increase public awareness of the profession and to create opportunities for DSPs to pursue further education credentials and advance their careers.

Advancing DSP job quality and mobility. Per the 2023 [Executive Order on Increasing Access to High-Quality Care and Supporting Caregivers](#), it is important that agencies collaborate to incentivize expanding and formalizing career pathways for DSPs. Goals include improving wages, which would dramatically impact recruitment and retention, and increasing opportunities for continuing education, employee ownership, registered apprenticeship, national service, and other pathways to advancement within the profession.

Studying, sharing, aligning, and expanding existing solutions across federal, state, local, and community agencies. Agencies at many levels can collaborate and learn from one another to design comprehensive DSP recruitment, retention, and advancement strategies. Many partners can explore and strengthen these efforts. For example, the [Direct Care Workforce Strategies Center](#), a technical assistance center funded by the Administration for Community Living, focuses largely on state-level efforts.

Conclusion

Given the scale of the DSP workforce, federal, state and local partners will need to pursue these strategies in tandem to affect the systems change required to ensure DSPs have quality jobs and people with disabilities and older adults have access to high quality support.