Direct Support Workers in Residential, Sheltered Employment and Extended Day Care Programs for People with Mental Retardation: Characteristics, Role Perception and Job Satisfaction

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Executive Summary

Background
In recent years, there has been a growing awareness, in the world and in Israel, of the contribution of direct support workers (hereafter, DSWs) for people with mental retardation to the quality of life of this population. In addition, there has been a growing recognition of the centrality of these workers to the broad system of services that this population requires. In Israel, to date, the issue of DSWs has not been examined. In light of the importance of this topic, and the experience of the Myers-JDC-Brookdale Institute in studying populations with mental retardation and issues of quality of home-care workers for the elderly, the Division for Services for Mentally Retarded Persons of the Ministry of Social Affairs and the Shalem Foundation asked the Institute to conduct a study in this area. Their request was based on the assumption that a comprehensive study focused only on DSWs might contribute to the promotion of the quality of care and the quality of life of people with mental retardation.

The Goals of the Study
This study aimed to characterize DSWs who care for people with mental retardation in three types of programs in the community: housing, sheltered workshops and extended day care. In addition, its goal was to examine DSWs' role perceptions and job satisfaction and issues such as burnout and fatigue. The recruiting patterns of DSWs and the organizations' policy regarding their employment were also examined.

Study Method
The data were gathered by telephone interviews with a sample of 298 DSWs and 53 directors in the three types of programs. The two sources of data aimed to complement each other and provide basis for comparison.

Findings

Demographic and Professional Profile of Direct Support Workers
- The DSWs were mostly women (86%); approximately half (43%) of them were young, under the age of 34, and half (51%) had higher education.
- About two-thirds (62%) had been employed in their current position for five years or less. Half (47%) of them had prior experience working with people with disabilities. Only one-third (35%) were certified.
- The programs differed in the demographic and professional profile of the DSWs (who are called "instructors" in sheltered employment programs and "caregivers" in residential and extended day care programs). At one end, were residential programs, which employed high rates of young (58% were 34 years old or under), educated (62% had higher education) DSWs; most were new to their current job (75% had been employed for up to two years) and had previous experience working with people with disabilities (58%). One-quarter (23%) of them were certified. At the other end, were sheltered employment programs, which employed mostly older (76% were 35-64
years old), less educated (41% had only primary or partial secondary education) DSWs; most (57%) had been employed for five or more years in their current position, and some (40%) were certified. In the middle were extended day care programs, which employed young (42% were 34 years old or under), educated (72%) DSWs. Like those employed in residential programs, two-thirds (63%) of these DSWs were new to their current job (had been employed up to five years); like those employed in sheltered employment, about half (46%) of them were certified and 39% had prior experience working with people with disabilities.

The Nature of the Roles of Direct Support Workers

- The study shows that the role of the DSW has two main components: a personal-social component, which is common to all types of programs and includes personal conversations with participants and organization of social activities, and a task-oriented component, which is specific to each type of program, and includes work and instruction in sheltered workshops and personal care and housekeeping in residential and extended day care programs.

- The relative amount of time dedicated to each component varies by program. In sheltered employment programs, a greater part (two-thirds) of the time is invested in the task-oriented component than in the personal-social component (one-third of the time); in residential and extended day care programs, time is divided equally between these two components.

- In residential and extended day care programs, the prevalent work pattern is that several DSWs are in charge of one group (63% and 67% of the DSWs reported working this way, respectively); in sheltered employment programs, most (62%) of the DSWs are in charge of one group each. Groups of which several DSWs are in charge are larger than those of which one DSW is in charge. This trend is especially prominent in residential programs.

Role Perception

- Almost all (75%-93%) of the DSWs believe that their work requires training and agree that not everyone could perform their job. These perceptions varied by program, especially from the point of view of directors: consistently, a higher rate of directors of sheltered employment than of the other programs held this view.

- In defining a "successful" DSW, workers and directors emphasized the importance of treating people with mental retardation with respect. The perception of a "successful" DSW varied between the DSWs and the directors: the DSWs emphasized the personal component of their performance, while the directors perceived the task-oriented aspect of the role as also being very important.

- This difference in the views of DSWs and directors is also reflected in the rate of those who believed it was possible to learn how to be a "successful" DSW (only 57% of the DSWs versus 75% of the directors believed so), and in the way they believed this could be learned: while most (48%) of the DSWs believed that it could be learned from experience on the job, the directors' approach was formal, and supported acquiring knowledge in courses, in-service training, employment, academic studies, etc. (41%). This approach was dominant among sheltered workshop directors (57%).
Job Satisfaction

- Most of the DSWs perceived the job as having positive characteristics: variety, independence, enjoyment, and use of skills (75%-85%).
- The DSWs' satisfaction with their job was very high (61%) and high (35%). Almost all (83%) of them reported that they were most satisfied with their contribution to the participants, and almost all (87%) of them would have chosen this job again if they had had to choose.
- Most of the DSWs expressed satisfaction with the way the organization treated them and the role they fulfilled. They felt that the organization did not perceive them as temporary workers, but rather the opposite (81%), and that it acknowledged their professionalism (95%) and importance (85%). In comparison, the rate of DSWs who expressed a positive attitude toward the extent of the organization's investment in them was lower (54%).
- The various measures of job satisfaction did not vary by program.

Difficulties at Work

- Most (57%) of the DSWs complained of problems working with "difficult" participants. This complaint was more prevalent among DSWs in extended day care programs (67%).
- DSWs indicated a number of areas in which they would like to see a change: reducing the number of participants per DSW; changing the division of time among different activities and investing more time in activities of a personal-social nature and less time in task-oriented activities; and improving physical working conditions. The rates of DSWs who wanted a change were higher (25%-31%) in sheltered employment than the other two types of programs (20% and less).
- The issue of burnout was examined by tools available in the literature according to which a burnout index (which ranged from 1=never to 4=all the time) was built. In the examination, we found no burnout among the DSWs, and the average score was 1.6. An examination of burnout factors indicated that it is mostly physical – feeling tired, physically exhausted (average score of 2.1), and not emotional – feeling depressed, emotionally drained, etc. (1.4) or mental – feeling worthless, hopeless, etc. (1.4). The extent of burnout did not vary by program.
- Burnout was also reflected in the physical and emotional burden index, on which the average score was 2.3 (on a scale of 1=no burden to 4=heavy burden). The components of burden examined indicated that DSWs perceive their job as being physically difficult, stressful, with a heavy work load, involving risk, and demanding emotional investment.
- The DSWs' fatigue was also expressed in the considerable rate (40%) of DSWs who reported being absent from work in the three months preceding the study. In sheltered employment and extended day care programs, the rate of DSWs who were absent from work was higher than in residential programs (47%, 43% and 33%, respectively). DSWs in sheltered employment were absent more days (18% were absent for five days or more). The rate of DSWs who felt tired, physically exhausted or worn out among those who were absent from work for three or more days was higher than among those who were absent two or less days or not at all.
Employment Conditions and Ways of Compensation

- Programs differ considerably with regard to work hours. In sheltered workshops, almost all (92%) of the DSWs work over 31 hours a week, versus 53% of the DSWs in extended day care programs and 58% in residential programs.
- In addition to work hours, the programs differ in the basis of employment (hourly or a staff position): hourly employment was the prevailing employment pattern in residential programs (64%), while in sheltered employment almost all (85%) of the workers were employed in staff positions. In extended day care programs, two-thirds (67%) of the DSWs were employed in staff positions.
- Working in shifts (79%) and on Sabbaths and holidays (72%) is unique to residential programs. Short hours and work times (shifts, Sabbaths and holidays) are, on one hand, a prerequisite, but, on the other hand, allow a considerable portion (56%) of the DSWs to work at another job and/or study. Most of those who worked overtime in residential programs (56%) or in extended day care programs (40%) were satisfied or very satisfied, as were the majority (68% in residential programs) of those who worked shifts.
- The average gross hourly wage of DSWs who were employed by the hour was NIS 20 in 2002, with a standard deviation of NIS 4; the average gross hourly wage of those who were employed in a staff position was NIS 26, with a standard deviation of NIS 10. The difference between the two is due to added social benefits and a seniority increment, which are included in wages for staff positions. At the time of the study, the minimum hourly wage was NIS 17.56.
- Few (28%) DSWs expressed satisfaction with their wage. A similar trend was found among the directors: few (23%) were satisfied with the wage of the DSWs.
- Most (76%) of the DSWs and (89%) of the directors were not pleased with the promotion opportunities available to DSWs.

Training and Professional Consultation

- The DSWs participate in various types of training at work: upon starting work (60%), while working (41%), and at staff meetings which serve for professional training (70%). Nevertheless, we found that 20% of the DSWs received no training, neither upon starting, nor during, work.
- One-quarter (28%) of the DSWs participated in in-service training outside working hours in the two years preceding the study, and a slightly higher rate (39%) participated in in-service training at work. In all, half (52%) of the DSWs participated in internal or external in-service training in the two years preceding the study.
- There were differences in the directors' attitudes regarding internal and external in-service training. A higher rate (62%) expressed a positive attitude toward external in-service training than toward internal in-service training (38%).
- Almost all (86%) of the DSWs and (93%) of the directors believed that additional in-service training programs were needed, primarily in relation to dealing with issues that are typical of a population with mental retardation; learning methods of, and acquiring tools for, working with this population and upgrading its abilities; team development and work management.
- Almost all of the DSWs were pleased/very pleased with the professional support (93%) and the professional guidance (85%) their supervisors provided. In addition, we found that all (94%) of
the DSWs were pleased/very pleased with their relationship with colleagues at work. The directors also believed that working relationships among the DSWs were good, and during the preceding year, most (70%) of the directors took at least one action to encourage cooperation among DSWs.

**Recruitment and Turnover**

In the two years preceding the study, a substantial portion (69%) of the directors recruited DSWs. In residential programs, most (79%) of the directors reported recruiting DSWs. Thirty-five percent of the directors reported difficulties in recruitment. This phenomenon was especially prominent in residential programs, where half of the directors reported recruitment difficulties. A substantial portion (51%) of the directors had to deal with turnover of DSWs. This phenomenon was especially prominent in residential programs (62% of the directors).

**Issues for Discussion**

The study findings raise a number of issues related to the role of DSWs in these programs and the directions for the development of this role in the future.

1. **Is the current division between the task-oriented and the personal-social components desirable?**

   The DSWs estimated the amount of time invested in the various assignments that their role entails. The estimated division of time indicates that, in all of the programs, the role consists of assignments of a personal-social nature (social activities and personal conversations) and task-oriented assignments (instruction, individual care, and assistance in housekeeping).

   Alongside this similarity, the roles and their components differ by type of program: in residential and extended day care programs, the task-oriented component includes primarily individual care and housekeeping, while in sheltered employment it includes primarily instruction and work. In addition, the personal-social component is indeed common to the DSWs' role in all of the programs, but the portion of time invested in this component in sheltered workshops is smaller (30%) than in residential and extended day care programs (50%).

   These differences are reflected in the title of the role: in sheltered employment DSWs are called "instructors", while in the other two types of programs they are usually called "caregivers".

   The DSWs in all of the programs expressed satisfaction with the structure of the role, although some suggested that the personal-social component be expanded and the task-oriented component of the job be reduced. Still, these findings raise a question as to whether the existing division between the role's components in the various programs is the most desirable one for the population's needs and for best use of personnel.
2. What are the skills required for performing the role of a direct support worker, and how can they be developed?

The study findings show that, when recruiting DSWs, directors do not require formal training or specific skills. However, an analysis of the role of the DSW indicates that several skills are needed, such as the ability to instruct, provide care, lead a group and conduct personal conversations. Most DSWs have no formal training in these subjects.

In addition, we found that most of the DSWs and directors in all of the programs perceived the humane aspect of the DSW's conduct – "treats participants with respect" – as being the most important characteristic of "a successful direct support worker". DSWs differ in their opinions as to the extent to which it is possible to acquire the skills of "a successful DSW". In contrast, most directors believe that these skills can be learned while obtaining the certification for the job and by acquiring formal knowledge (academic studies, courses, in-service training, employment, etc.). This perception is prevalent especially among sheltered workshop directors, and attests to their view of the role of the DSW in their program as requiring more professionalism in comparison with the perception of directors in the other two types of program.

The question is what knowledge and skills are required for performing the role, and how they can be taught. At present, training is provided mainly in the framework of the organization that employs the DSW. There is no uniform perception of the best topics and methods of training. Regarding the best type of training, the nature of the role in each type of program must be taken into account.

3. What are the difficulties experienced by DSWs at work, and how can they be addressed?

One of the research assumptions was that the DSWs population would experience burnout. An examination of the different components of burnout found a certain degree of physical burnout, but no emotional or mental burnout.

It should be emphasized that alongside the lack of burnout, the study found other expressions of difficulties and fatigue among the DSWs. First, we found that DSWs feel physically and emotionally burdened because the job entails hard physical work and emotional investment. Second, we found that a considerable rate of DSWs were absent from work. Fatigue was more prevalent among those who were absent from work for three or more days than among those who were absent less or not at all.

In addition to absenteeism, the DSWs related to difficulties that arise from the composition of the population and the size of the groups they work with. Over one-half of the DSWs reported problems working with particularly "difficult" participants (participants with behavior problems or mental illness, deep or severe mental retardation, and physically disabled participants who suffer from chronic diseases). The rate of those who reported this type of difficulty was higher (67%) in extended day care programs than in the other two types of programs. This is probably partially related to the higher level of disability of the participants in extended day care programs, compared to those in residential and sheltered employment programs.
In light of these findings, the question arises how to reduce the long term emotional and physical burden on DSWs who work with this population while distinguishing between physical and emotional burnout. The causes of burden should be examined in depth in order to find ways to relieve DSWs.

4. Should the job of direct support workers be turned into a profession to ensure work force stability?

The findings indicate that most DSWs are relatively new to their job, and that there is turnover in half of the programs. The highest turnover rate was in residential programs, followed by extended day care; the lowest rate was in sheltered employment. Turnover does allow "new blood" to flow into the system, but there is much evidence that turnover is costly and detrimental to participants' quality of care.

In order to ensure a high quality work force, the directors of the programs (especially of residential programs) recruit many students from relevant fields of study. The quality of these workers is indeed high, but it is given that many of them will leave the programs upon graduation.

Note that, at present, problems related to the work force are less severe, mainly because the programs (especially residential and extended day care programs) have recruited immigrants from the former Soviet Union who arrived in Israel during the 1990s, many of whom are academics and who constitute a stable work force of high quality. But, with time, this work force will leave the system, and it is unclear whether it will be possible to recruit stable personnel of this quality and quantity in the future. Today, one-third of the directors already report recruitment difficulties. The literature also indicates an increasing demand for DSWs for various populations. The claim is that in a market in which job offers are in short supply, it is not difficult to recruit DSWs. Still, some maintain that a rise in demand in the future might cause a shortage in DSWs. Hence, the challenge facing the system is adequate preparation for the future.

Some of the literature maintains that, in order to keep personnel in the system, the role of the DSW should be turned in to a profession with a defined professional identity. Those who oppose this view maintain that DSWs constitute the majority of manpower in these programs and that, therefore, professionalizing their job will raise the cost of employment. The dilemmas regarding the professionalization of this occupation are similar to those regarding the development of paraprofessional care roles for other populations.

An increase in the wages of DSWs and creation of promotion tracks are related to changing the professional status of DSWs. In the United States and several European countries, this idea – which requires a comprehensive system-wide change, including changing the law, allocating resources adequate for the rise in the professional level, defining the qualifications that will be required of those who choose this profession, determining the type and duration of training, and creating training frameworks – is being discussed. It is advisable to monitor the developments in these countries, and to try to adapt and implement some of them in Israel.
In conclusion, the issues presented above should be examined on the basis of the study's data, in order to prepare for the development of this manpower and to ensure its availability.

The data have been presented in various forums: the Division of Services for Mentally Retarded Persons of the Ministry of Social Affairs, the Shalem Foundation, representatives of the welfare divisions of the Jerusalem, Tel Aviv–Yafo and Haifa municipalities, and professional conferences.
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