Direct support professionals (DSPs) provide an array of critical supports making it possible for people with intellectual and developmental disabilities (IDD) to live, work, and thrive in their communities. The pandemic has affected this work in many ways. This survey, completed by 722 DSPs from Maryland, gathered information about the experiences of DSPs intended to inform efforts to prepare for future waves of the pandemic.

### WAGES
DSPs reported on their wages before the pandemic and on whether they received extra pay for pandemic-related risks. Many received extra pay, although states and businesses had varying levels of access to additional dollars to compensate essential workers.

- **77%** feel their work is appreciated by their organization
- **95%** were classified as essential workers
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**Mean hourly wage for DSPs before pandemic:** $13.97 (this wage is higher than expected or typical based on previous studies [NCI, 2020])

- **13%** received COVID-19 augmentation or bonus pay
- **87%** didn’t receive COVID-19 augmentation or bonus pay

Of those receiving extra pay:

- **23%** $0.01-$1.00 per hour
- **18%** $1.01-$2.00 per hour
- **4%** $2.01-$3.00 per hour
- **4%** more than $3.01 per hour
- **44%** a lump sum bonus

**23%** received COVID-19 augmentation or bonus pay

### SCHEDULES AND STAFFING
DSPs were asked to report on how the pandemic affected the number of hours they worked, where and when they worked, and how their role may have shifted.

- **43%** work more hours per week
- **25%** work the same hours per week
- **14%** work less hours per week
- **30%** work different shifts
- **28%** work in different settings
- **37%** additional responsibilities/different roles
- **5%** furloughed/laid off/unemployed/facility closed
- **12%** working remotely/telehealth now
- **3%** lived in residence

- The locations in which I work have been adequately staffed: **64%**
- If staff where I work display symptoms of COVID-19, they are guaranteed paid time off: **60%**
SAFETY MEASURES
DSPs were asked to report on the kinds of personal protective equipment (PPE) provided by their employer, whether they had adequate training in using PPE, and other safety measures that were taken.

- **78% gloves**
- **34% purchased fabric face masks**
- **20% goggles/safety eyewear**
- **22% homemade face masks**
- **34% medical-grade face masks (N95)**
- **59% disposable or paper face masks**
- **47% face shields**
- **39% purchased medical-grade face masks (N95)**
- **1% neck gaiters**

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I have had an adequate supply of PPE to keep myself and the people that I supervise safe — **82%**

I participated in a training on how to safely use PPE — **83%**

I have had resources about COVID-19 available to me — **88%**

REASONS FOR LEAVING DSP POSITION
The pandemic affected many aspects of peoples’ lives and their ability to work. DSPs reported on reasons that they or their co-workers were no longer working in direct support.

- **testing positive for COVID-19** — 8%
- **quarantine due to COVID-19 exposure** — 10%
- **fear of becoming infected** — 17%
- **childcare issues (e.g. daycare closed)** — 15%
- **fear of infecting others** — 7%
- **family reasons (e.g. caring for someone with health issues, homeschooling children)** — 13%

SOCIAL DISTANCING
DSPs were asked to gauge how well the people they supported were following social distancing measures.

DSP perceptions of social distancing practices of people supported

- **28% excellent**
- **39% good**
- **10% poor**
- **23% fair**

We have had the space and ability to practice social distancing — **86%**

I have had information to offer to the people to whom I provide support that was conducive to their learning styles — **79%**
IMPACT OF ISOLATION ON PEOPLE SUPPORTED

Many people experienced social isolation during the COVID-19 pandemic. DSPs were asked about the consequences of increased isolation on the people they supported.

- difficulty addressing dietary issues 10%
- difficulty addressing pain management 5%
- other health issues 8%
- decreased exercise 47%
- missed going out into the community 75%
- increased behavior issues 36%
- increased mood swings and/or depression 40%
- more anxiety 40%
- boredom 61%
- loneliness 32%
- academic concerns 3%

DEMOGRAPHICS, ROLE, AND SETTING

DSPs self-reported demographic information and the primary setting where they worked.

<table>
<thead>
<tr>
<th>Demographic</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>American Indian/Native American</td>
<td>2%</td>
</tr>
<tr>
<td>Asian</td>
<td>2%</td>
</tr>
<tr>
<td>Black/African American</td>
<td>53%</td>
</tr>
<tr>
<td>White</td>
<td>40%</td>
</tr>
<tr>
<td>Another race</td>
<td>1%</td>
</tr>
<tr>
<td>Two or more races</td>
<td>3%</td>
</tr>
<tr>
<td>Hispanic</td>
<td>3%</td>
</tr>
<tr>
<td>Female</td>
<td>79%</td>
</tr>
<tr>
<td>Average age</td>
<td>47 years</td>
</tr>
</tbody>
</table>

- 55% agency/facility sites
- 29% family/individual homes
- 10% community employment
- 7% other

(45% of DSPs reported working in more than one setting)

Please contact Jerry Smith with questions at smith495@umn.edu. View the full report at z.umn.edu/dsp-covid19.

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