ESSENTIAL JOBS
ESSENTIAL CARE

Lessons Learned from a Multi-State Direct Care Workforce Advocacy Initiative
Introduction

Advocates have been campaigning for better recognition and remuneration for direct care workers for decades.¹ These workers provide essential daily support to millions of older adults and people with disabilities across the country, yet struggle with persistently low wages, inadequate benefits, limited training and career advancement opportunities, and other challenges. For a workforce that is primarily women, people of color, and immigrants, these challenges are embedded in and perpetuated by structural inequities related to race, gender, national origin, and more.

In recent years, the direct care advocacy movement has gained new momentum and urgency at the state level, fueled by an ever-growing workforce crisis. Recognizing a new wave of advocacy across states—and witnessing the universal and unique challenges faced by advocates in different states—PHI launched the Essential Jobs, Essential Care™ multi-state advocacy initiative in 2020. In the first phase of this initiative, we aimed to advance meaningful policy reforms for direct care workers in three states, build advocacy capacity across those states, and translate lessons learned for advocacy in other states in the future.
From 2020 to 2022, we partnered with advocates in Michigan, New Mexico, and North Carolina to pursue three broad goals:

1. Addressing long-term care financing and direct care worker compensation;

2. Investing in recruitment, training, career advancement, and other workforce innovations; and

3. Improving data and research to inform efforts to strengthen the direct care workforce.

During this three-year period, PHI and our advocacy partners raised awareness of direct care workforce issues, engaged existing and new advocates, and pursued concrete advocacy priorities. We led hundreds of advocacy activities, including hosting meetings, developing policy proposals, educating policymakers and the public, building relationships with decision-makers, and more. And we contributed to meaningful change—from a permanent wage increase for direct care workers in Michigan, to new legislation on workforce data collection in New Mexico, to the creation of a statewide caregiving workforce council in North Carolina.

Complementing the interim report that we released in March 2022, this report summarizes the first three years of the Essential Jobs, Essential Care initiative—highlighting our achievements and lessons learned—and previews what will come next.

Introduction

Thanks to the solid foundation built over the past three years, in partnership with PHI, and attention paid to all of the demographic, economic, cultural, political, organizational and other forces that have an impact on success, we now have an opportunity to shape the future of direct care workers in Michigan.

CLARE LUZ
Founding Director, IMPART Alliance (Michigan), Associate Professor, MSU College of Osteopathic Medicine, and State Partner in Essential Jobs, Essential Care
Who We Are

The Essential Jobs, Essential Care initiative is a collaborative, multi-state effort led by PHI, the nation’s leading expert on the direct care workforce. PHI promotes quality direct care jobs as the foundation for quality care through research, advocacy, public education, and workforce interventions.

Our partners in the first phase of this initiative (2020–2022) were:

**IMPART Alliance**, a membership organization in Michigan that is committed to supporting direct care workers through advocacy, culture change, coalition-building, research, resources, and opportunities for comprehensive, person-centered training and career pathways.

**New Mexico Caregivers Coalition**, which strives to enhance and promote family and paid direct care workers, supporting their professional development and advancing issues of importance to the field of long-term services and supports (LTSS) and direct care.

**The North Carolina Coalition on Aging**, a dynamic group of consumer, provider, and advocacy organizations and programs that represents North Carolina’s aging population and gives voice to issues that affect older adults through collective advocacy, education, and public policy work.
Evaluating Our Efforts

We conducted an extensive evaluation of the *Essential Jobs, Essential Care* initiative to maximize our impact and inform future state-based advocacy. This short report draws from the full evaluation, which addressed the following five questions:

1. **IMPLEMENTATION**
   Were the activities of the initiative implemented as intended and on schedule in each state?

2. **OUTCOMES**
   Did the initiative increase knowledge, supportiveness, engagement, and/or advocacy capacity related to direct care workforce policy issues in each state?

3. **IMPACT**
   Did the initiative contribute to measurable advancement in policy related to direct care worker compensation, workforce innovations, and/or data collection?

4. **CONTEXT**
   What demographic, economic, cultural, political, organizational, or other factors might have influenced the initiative’s implementation and outcomes?

5. **LESSONS LEARNED**
   What were the main lessons learned from this initiative?
What We Did

LAYING THE FOUNDATION

In the first year of the Essential Jobs, Essential Care initiative, we created an array of unique resources to support our strategy and boost our impact, including:

• Marketing and outreach brochures to raise awareness of and engagement in the initiative;

• Environmental scans to help advocates identify and prioritize advocacy opportunities;

• A “menu” of direct care workforce policy approaches to inform the development of a concrete advocacy agenda in each state (later published as State Policy Strategies for Strengthening the Direct Care Workforce);

• An interactive “ecomap” tool for identifying advocates in each state according to their locations, organizational affiliations, and priority issues;

• Advocacy roadmaps that specified advocacy goals, objectives, activities, and related considerations for each state—providing a detailed path forward.

CONVENCING ADVOCATES

The cornerstone of this initiative was the annual convening in each state. Bringing together hundreds of existing and new advocates, these virtual statewide convenings raised awareness of direct care workforce issues, strengthened relationships and networks, generated or reaffirmed concrete advocacy priorities, and built momentum for the future.

The convenings were rated very positively by participants and also appeared to improve their knowledge of direct care workforce issues, according to post-convening survey results.

The convenings also helped kindle or renew participants’ commitment to the cause. When asked for the most relevant takeaway from the 2022 convening, a Michigan participant reported, “As a group we can finally make changes, [but] we must continue to advocate”; a New Mexico participant said, “Learning how together we CAN advocate [for] increasing wages and education for direct care workers”; and a North Carolina participant named the “ongoing critical need to advocate.”
ENGAGING IN ADVOCACY

Guided by our advocacy roadmaps, we conducted over 600 advocacy activities across all three states from the launch of Essential Jobs, Essential Care through its conclusion in November 2022—including 239 activities in Michigan, 198 in New Mexico, and 189 in North Carolina.

Of note, these figures show an increased focus in the third year of the initiative on public education (up from 8 percent by the end of 2021, as documented in the interim report5) and on relationship-building with policymakers (up from 4 percent).

HONING ADVOCACY SKILLS

As well as directly supporting advocacy efforts in each state, PHI also aimed to build advocacy capacity and sustainability through this initiative. To that end, among other strategies, we organized a three-part advocacy skills series for advocates from all three states in March 2022. The lead training providers for the series were the Advocacy Institute, a New York-based organization that supports social justice organizations to build the advocacy skills, knowledge, and power they need to shape government policy; and FrameWorks, a think tank that helps mission-driven organizations communicate about social issues in ways that build public will to support progressive change. The three sessions focused on convening and mobilizing strong coalitions (attended by 77 participants), communicating the value of care work (65 participants), and building relationships in advocacy (55 participants).
ADVANCING EQUITY
The Essential Jobs, Essential Care initiative was designed with an explicit commitment to racial equity and other aspects of social justice. We actualized this commitment by integrating messages about the underlying causes of inequity for direct care workers—including structural racism, sexism, xenophobia, ageism, ableism, and other forms of discrimination—into all presentations and communications. Additionally, as we catalogued advocacy activities, we identified whether each activity had an explicit racial equity component, with approximately 21 percent of advocacy activities meeting this goal by the end of 2022 (up from 14 percent at the end of 2021). Each state partner also took additional steps to promote racial equity in their work. In Michigan, for example, IMPART Alliance established a partnership with Black Women in Homecare, a small group of direct care workers in Detroit, and continues to regularly seek feedback from this group on their approaches and outputs.

SHARING LESSONS LEARNED
One of the final milestones in this phase of the Essential Jobs, Essential Care initiative was the creation and publication of A Practical Resource Guide for Direct Care Workforce State Advocacy. The guide includes 20 concrete strategies based on the lessons learned from this initiative and informed by PHI’s decades of experience in state-level direct care workforce advocacy and by ideas from other published resources and state advocacy experts. The strategies are organized across five dimensions of advocacy—strategizing, designing, persuading, advocating, and evaluating—and each strategy includes specific steps and key resources. The guide can be read sequentially from start to finish, or users can access individual strategies based on their specific advocacy needs and interests.

“...we’ve tried to build a more diverse Board of Directors for the Coalition on Aging, taking into account social justice, and not just racial equity, but other forms of equity. And some of the [other] work that we’ve been doing with Essential Jobs, Essential Care has really become infused in the culture of the Coalition on Aging as well, and I think that’s been exciting, to see that fluidness... go from one particular project into the infrastructure of the Coalition.”

HEATHER BURKHARDT, Executive Director, North Carolina Coalition on Aging, and State Partner in Essential Jobs, Essential Care
What We Achieved

With our state coalition partners and other advocates, we celebrated numerous policy wins across the three Essential Jobs, Essential Care states. Here we highlight three achievements from each state.

1. As described in the Essential Jobs, Essential Care interim report, the first major policy win in Michigan—thanks to sustained joint advocacy efforts—was the passage of a $2.35-per-hour wage increase for direct care workers in the state budget for fiscal year 2022.7

2. We celebrated a second landmark achievement in 2022, when the Michigan Department of Health and Human Services (MDHHS) endorsed the direct care worker competency guidelines that had been developed by IMPART Alliance in collaboration with direct care workers, the Direct Care Worker Advisory Council convened by MDHHS, and other partner organizations. State endorsement means that these guidelines can serve as a robust foundation for development of curricula and career pathways for direct care workers. This effort was supported by a $250,000 grant awarded to IMPART Alliance by the Workforce Development Division of the Michigan Department of Labor and Economic Opportunity.8

3. A third significant policy win came when the Michigan state legislature allocated $2.8 million in the fiscal year 2023 state budget for IMPART Alliance to lead the creation of a statewide direct care worker training and credentialing infrastructure.9 The goals for this funding include completion of comprehensive curriculum guidelines that map to the recently endorsed core competency guidelines; development of a training structure to widely distribute and deliver curricula that meet these guidelines; and design of a competency-based credentialing system.
Our first success in New Mexico was the introduction of SB 342 in the 2021 legislative session—a bill that would have improved compensation for direct support professionals (DSPs) and strengthened data collection under the state’s Developmental Disabilities waiver program. Although SB 342 was unsuccessful, we sustained our advocacy on this priority issue—and, as a result, saw a revised version of the bill introduced in both houses of the state legislature in January 2023 (SB 203 and HB 395, respectively). This landmark legislation requires all developmental disability service providers to report key workforce data annually and directs the Developmental Disabilities Support Division to calculate the provider reimbursement rate using a wage floor for DSPs that is 150 percent of the minimum wage. Both bills passed unanimously, and HB 395 was signed into law by New Mexico Governor Michelle Lujan Grisham on April 5, 2023. The new law will ensure better evidence on the workforce challenges faced by providers and establish the rationale for a higher wage for DSPs through Medicaid reimbursement rates.

Finally, a third success in New Mexico was establishing a partnership with the Federal Reserve Bank of Atlanta to bring the Career Ladder Identifier and Financial Forecaster (CLIFF) tools to the state. These tools will help inform policy solutions to strengthen the social safety net in New Mexico going forward, as well as help direct care workers navigate their own career decisions.

“Essential Jobs, Essential Care helped us to reach those state agency officials—so whenever, say, our Medicaid director has a public meeting and even though she has thousands of constituents that she’s got to listen to, it’s clear that we’re at the top of that list. That relationship has now changed as a result of this project.”

ADRIENNE SMITH, President and CEO, New Mexico Caregivers Coalition, and State Partner in Essential Jobs, Essential Care
As described in the *Essential Jobs, Essential Care* interim report, an unprecedented coalition of advocates were successful in advocating for a rate increase for home and community-based services (HCBS) and intermediate care facilities in the North Carolina state budget for fiscal years 2021 through 2023. Although we were not able to secure a wage pass-through requirement, the budget language did include “strong encouragement” for providers to pass at least 80 percent of the increased funds through to workers’ wages (amounting to a potential raise of just under $2 per hour).

The budget also included one-time bonuses of approximately $2,000 that were distributed to over 62,000 direct care workers in the state. Another policy win in North Carolina, as in the other two states, was the inclusion of several of our direct care workforce recommendations in the state’s American Rescue Plan Act HCBS Spending Plan, including enhanced workforce development funding and a workforce survey initiative, among others. One recent outcome of our recommendations: in March 2023, the state’s Department of Health and Human Services and the Department of Commerce announced the launch of a new Caregiving Workforce Strategic Leadership Council that will work to create statewide solutions to the caregiving workforce crisis. The direct care workforce is a primary focus of the Council.

A third success was in mobilizing *Essential Jobs, Essential Care* steering group members to successfully secure a multi-year grant to develop a training and credentialing system for direct care workers in North Carolina, similar to Michigan’s approach. The project is titled WECARE: Workforce Engagement with Care workers to Assist, Recognize, and Educate, and is funded by the Centers for Medicare & Medicaid Services (CMS) through the School of Social Work at the University of North Carolina-Chapel Hill. Combined with additional grant funds, this project has enabled the North Carolina Coalition on Aging to hire a Program Coordinator to lead their direct care workforce advocacy efforts, a major boon for the sustainability of this initiative.
Expanding Advocacy Capacity

We aimed to build the sustainability of *Essential Jobs, Essential Care* by expanding advocacy capacity in each state related to direct care workforce policy issues. Findings from in-depth interviews with our state partners (conducted in July 2022) indicate that we reached this goal in four main ways:

**GREATER KNOWLEDGE AND RESOURCES**

Our partners reported that this initiative expanded their advocacy capacity first and foremost by strengthening their own knowledge on direct care workforce issues. As our North Carolina partner said, “I think the breadth and depth of my knowledge over the last two years specifically has grown, as well as [my awareness of] different interventions or models or reforms that other states are using.” The tools, resources, and assistance offered by PHI, a national expert on this issue, also helped build capacity.

**STRENGTHENED CONNECTIONS**

Our partners indicated that *Essential Jobs, Essential Care* also helped them extend their advocacy networks, reaching more advocates across different issue areas. Our Michigan partner said, for example, “[I]n large part due to [this initiative], we are breaking down the silos that have long existed. Several of the advocacy groups have banded together and are committed to the advocacy objectives and everyone is pulling in the same direction.”

**ENHANCED CREDIBILITY**

Our partners also affirmed that this initiative has bolstered their organizations’ credibility in the long-term care sector. In the words of our Michigan partner, “We’re just in a much more recognizable position, which makes it more possible to get external funding, to get allies’ support, to be able to approach legislators again with some name recognition and some knowledge that we know what we’re doing and that we have the organization behind us, we have the coalition behind us. We have the capacity.”

**CONSISTENT FOCUS AND MESSAGING**

Finally, all partners spoke about how the structure of this initiative—namely, the consistent emphasis on compensation, workforce innovation, and data collection—has helped them focus and sustain their efforts. As our New Mexico partner said, “*Essential Jobs, Essential Care* has really focused our work around those three issues…and helped us get more clear with the public. I would say that’s been a real great outcome in terms of our communication with other organizations.” And our North Carolina partner reported, “We have multiple agencies and groups doing [advocacy] days with the same verbiage and support, where we’re all singing from the same kind of song book.”
What We Learned

From the evaluation of the three-year Essential Jobs, Essential Care initiative, we distilled eight cross-cutting lessons for future advocacy efforts:

1. **Start with Structure:** Practical tools such as the ecomap and advocacy roadmap help build relationships, establish priorities and approaches, and maintain focus.

2. **Convene Early (and Often):** Large convenings are critical to generating momentum and solidarity, while smaller gatherings such as committee meetings help sustain that momentum.

3. **Take Time to Define:** To ensure consistent messaging and avoid misunderstandings, it is important to dedicate time to identify and reach provisional agreements on key terms.

4. **Set a Bigger Table:** Creating and maintaining a space for diverse stakeholders to come together around their shared concerns can pay dividends over time.

5. **Center Workers:** In direct care advocacy, meaningful participation of direct care workers is essential—but requires concerted effort and proactive strategies.

6. **Emphasize Equity:** More must be done to reinforce the message about the long-standing structural inequities faced by direct care workers and the individuals they support.

7. **Learn Across State Lines:** Advocates operating in different regions and policy contexts can benefit enormously from opportunities to share their experiences and learn from each other.

8. **Invest in Earned Media:** A well-defined and resourced media strategy is important for amplifying the impact of advocacy initiatives.

“We went a number of months before circling back to reach agreement about what we mean by ‘direct care worker’—but we should have started there, because everyone defines it differently.”

**CLARE LUZ**
Founding Director, IMPART Alliance (Michigan), Associate Professor, MSU College of Osteopathic Medicine, and State Partner in Essential Jobs, Essential Care
What Comes Next

Although the three-year Essential Jobs, Essential Care initiative concluded in 2022, this work is continuing in a range of ways.

First, each state partner will sustain their direct care workforce advocacy efforts under the Essential Jobs, Essential Care banner, given the name recognition and success of this initiative.

Second, PHI has already expanded the Essential Jobs, Essential Care model to other states, including Maine, New Jersey, and New York. We have tailored the model to reflect the unique interests of each state, but are maintaining the focus on compensation, workforce innovation, and data collection—and replicating the broad coalition-building approach.

Two of the state partners have already secured funding and hired new staff to sustain their direct care workforce advocacy efforts.

Third, PHI will soon launch a membership-based Learning Collaborative to amplify the impact of Essential Jobs, Essential Care—with the original three state partners serving as strategic advisors. Through the Learning Collaborative, advocates and leaders from various states will be able to share their expertise on direct care workforce policy reform and learn how other states are approaching this work.

Finally, PHI has launched an interactive Direct Care Workforce State Index to help advocates, policymakers, and other audiences understand how their states are supporting direct care workers and identify critical areas for intervention. Our state partners have already begun using this tool to strengthen their advocacy messages and inform their approaches, and we plan to release complementary resources (such as an in-depth report and user’s guide) to help advocates in other states effectively leverage the State Index as well.

In summary, while the first phase of the Essential Jobs, Essential Care multi-state advocacy initiative has ended, the past three years have laid an important foundation for state-based policy and advocacy efforts on behalf of direct care workers across the country. We look forward to continuing to expand and grow this work.
NOTES


5 Scales, 2022a.


14 NC DHHS, 2022.


For more information about *Essential Jobs, Essential Care*, please contact Amy Robins, PHI Director of Advocacy, at arobins@phinational.org or 718-928-2041.

PHI is a national organization committed to strengthening the direct care workforce by producing robust research and analysis, leading federal and state advocacy initiatives, and designing groundbreaking workforce interventions and models. For 30 years, we have brought a 360-degree perspective on the long-term care sector to our evidence-informed strategies. As the nation’s leading authority on the direct care workforce, PHI promotes quality direct care jobs as the foundation for quality care.

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