

**Alberta Disability Workers Association**

# **Compensation & Commitment Survey**

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September 15, 2015

## Purpose

When turnover is high, the level of relevant skill within the sector drops over time, as educational institutions cannot keep up with demand. Service provider costs of recruitment and training soar and individuals receiving services constantly have to train workers to understand their needs and the kind of support that works best for them. Service quality and the ability to achieve valued outcomes drop.

Several years ago, the Alberta Ministry of Human Services, Persons with Developmental Disabilities (PDD) Program Branch recognized the role that chronically inadequate compensation has made to high turnover and made a commitment to increase money for wages and benefits in service provider contracts by 30% over three years. Over the next four years, 25% of this increase was delivered, with 10% of that in the 2014-2015 fiscal year. Service providers were given flexibility to apply the increase to compensation as they chose. The funding could be applied to wages and/or benefits. It could be applied equally across all PDD-funded positions in the organization or allocated differentially to address recruitment and retention challenges in key positions.

This study attempts to answer the question of what difference the funding increase for compensation has made in addressing retention among Alberta disability workers. While other studies may focus on reported distribution by service providers and actual turnover rates, this study focuses on disability workers' expectations and perceptions of their compensation experience. For instance, disability workers who were led to expect a 10% compensation increase but who either received less in the allocation or received it in a form they did not recognize because they were not informed of their agency's distribution plan may, in fact, not experience increased commitment to their employer and, perhaps, the field. While actual turnover is an excellent measure of the success of the funding injection for staff compensation, changes in worker commitment give valuable information for projecting future turnover that may take place when local economic conditions improve. Changes in commitment may also be moderated by non-monetary factors, such as love of the work or dedication to the people one supports.

## Method

A survey was developed (found in Appendix A) and hosted online on SurveyMonkey from June 19 to July 14, 2015. A variety of strategies was used to increase awareness of and participation in the survey by disability workers. An *E-Bulletin* was prepared and sent to over 650 ADWA members and supporters on June 19 with the link. We also posted the link on ADWA's Facebook page and Twitter feed (with a consequent number of Likes, Shares and Retweets expanding their reach). The Alberta Council of Disability Services sent a notice to their member agencies asking them to share the request and survey link with their staff. We also approached service provider councils in all regions asking them to share the request and survey link with member agencies. We approached Inclusion Alberta to share it with family-managed services for their staff. Reminders were posted on ADWA's Facebook page and Twitter feed.

While the main focus was on obtaining data from PDD-funded disability workers at all levels of organizations, we also included input from individuals who support children with disabilities or provided

other disability supports. Some individuals in the disability field are known to work multiple jobs, which may or may not cross funding boundaries. Their compensation increase experience may vary by position and their perspective on the differences was of interest.

### Respondent Characteristics

A total of 214 individuals completed the survey. Of these, 161 (75.2%) reported holding one job in the field, 41 (19.2%) reported holding two jobs in the field and 12 (5.6%) held 3 or more jobs in the field. A total of 279 positions were reported on. The vast majority (at least 242 positions) provide services to adults funded through PDD. This is not surprising, as the survey is most relevant to that group.

Geographically, respondents reporting their region (n=193) were skewed in favour of the South with Edmonton region being under-represented relative to the number expected, based on size of service population in each region. (See Table 1.)

**Table 1 – Geographic distribution of respondents identifying their region**

Region	# Respondents (%)	~# Served by PDD* (%)
South	69 (35.8%)	1171 (11.8%)
Calgary	50 (25.9%)	2792 (28.0%)
Central	37 (19.2%)	1917 (19.3%)
Edmonton	15 (7.8%)	3088 (31.0%)
Northwest	8 (4.1%)	408 (4.1%)
North Central/East	14 (7.3%)	581 (5.8%)

\*Numbers provided by PDD in 2013 on GOA website

The largest number of positions was identified as front-line (157), not including supportive roommates (9). Supervisors/Team Leaders accounted for 49 sets of responses, management level positions for 54 sets of responses and administrative or other specialized positions for 11 sets of responses.

Of respondents answering the question, 41% indicated that they were a member of ADWA.

### Changes in Compensation

Because so few individuals outside the PDD system participated in the survey over all, the quantitative analyses of compensation will focus on those with positions funded by PDD.

Table 2 presents the numbers of respondents who were informed of how compensation increases were to be distributed in their organization and the number whose compensation increased, to the best of their knowledge, unrelated to performance.

**Table 2 – Distribution awareness and compensation increases**

	# Aware of how \$ distributed (%)	# Receiving compensation increase (%)
First job	158 (73.8%)	159 (74.2%)
Second job	36 (66.7%)	38 (70.3%)
Third job	9 (75%)	10 (83.3%)
All jobs	203 (72.5%)	207 (74.0%)

Tables 3, 4 and 5 present the salary levels reported before and after the most recent PDD increase for front line, supervisory and management positions respectively. The median is used to represent the average, rather than the arithmetic mean, to remove the skew caused by extremely high or low salary rates within responses. Salary ranges among respondents provide information about the highest and lowest hourly wage rates reported. Note that a few respondents, often in supportive roommate positions reported increases in monthly payments. These increases were usually around \$100/month.

**Table 3 – Wage rates for front line disability workers funded through PDD**

<i>Front Line</i>	<b>First Job (n=49)</b>	<b>Second Job (n=19)</b>	<b>Third Job (n=5)</b>	<b>All jobs (=73)</b>
<b>Median Before</b>	\$17.80	\$17.99	\$18.54	\$17.99
<b>Median After</b>	\$19.56	\$20.18	\$20.15	\$19.99
<b>Increase (%)</b>	\$1.76 (9.9%)	\$2.19 (12.1%)	\$1.61 (8.7%)	\$2.00 (11.1%)
<b>Range Before</b>	\$14.00 – \$22.40	\$14.52 – \$20.50	\$16.00 – \$20.00	\$14.00 - \$22.40
<b>Range After</b>	\$15.37 - \$24.95	\$15.83 - \$23.00	\$17.45 - \$22.47	\$15.37 - \$24.95

**Table 4 – Wage rates for supervisor-level disability workers funded through PDD**

<i>Supervisors</i>	<b>First Job (n=16)</b>	<b>Second Job (n=2)</b>	<b>Third Job (n=2)</b>	<b>All jobs (n=20)</b>
<b>Median Before</b>	\$20.50	\$20.72	\$17.04	\$19.82
<b>Median After</b>	\$23.35	\$21.44	\$17.90	\$22.29
<b>Increase (%)</b>	\$2.86 (13.9%)	\$0.72 (3.5%)	\$0.86 (5.0%)	\$2.47 (12.5%)
<b>Range Before</b>	\$12.10 - \$29.12	\$17.08 - \$24.35	\$17.00 - \$17.08	\$12.10 – 29.12
<b>Range After</b>	\$13.31 - \$32.03	\$17.80 - \$25.08	\$17.80 - \$18.00	\$13.31 – 32.08

**Table 5 – Wage rates for management-level disability workers funded through PDD**

<i>Management</i>	<b>First Job (n=19)</b>	<b>Second Job (n=1)</b>	<b>Both Jobs (n=20)</b>
<b>Median Before</b>	\$27.46	\$22.50	\$26.97
<b>Median After</b>	\$30.55	\$26.00	\$29.58
<b>Increase (%)</b>	\$3.10 (11.3%)	\$3.50 (15.6%)	\$2.61 (9.7%)
<b>Range Before</b>	\$15.00 - \$50.00	\$22.50	\$15.00 - \$50.00
<b>Range After</b>	\$16.50 - \$56.50	\$26.00	\$16.50 - \$56.50

Note that no information was requested as to the number of years of experience in a position, whether wage scales were on a grid, the size and complexity of the organization, or whether the position was full- or part-time, all of which may affect wages. Some respondents reported that they are at the top of their salary grid, due to their longevity in their position and in the field. It is unlikely that respondents would include people who started work within the last year, as they could report no “before” measure. Given the turnover in the field, this situation would suggest that the results skew slightly high as a measure of what staff in this field typically earn.

Increases in the form of benefits were also reported. Note that the results reflect only changes in benefits that respondents were aware of. Some may not have been aware of changes to benefits because they had not been informed or had not tried to access those benefits. Likewise, lack of a benefits increase may be the result of already having full coverage in a particular benefits area. Table 6 presents the number reporting increases in different types of benefits. Some individuals reported changes to more than one benefit type.

**Table 6 – Reported increases in benefits**

Type of Benefit	First job	Second job	Third job	All jobs
Paid illness time increased	11	9	0	20
Health coverage or Health Spending/Wellness Accounts were added or expanded	19	10	1	30
Paid vacation time increased	14	6	0	20
RRSP contribution was made or matched	39	8	1	48
Training cost/time was covered or paid	32	13	4	49
Other (various)	1	1	0	2

## Compensation and Commitment

The issue to be addressed by a PDD increase to compensation of disability workers was that of recruitment and retention. While actual turnover is an obvious measure of relevance, intent to turnover—whether with respect to an organization or the field as a whole—is also a useful measure.

Table 7 presents the proportion of respondents who indicated that their commitment now was greater, less or the same as before, and whether their view of disability work as a profession had changed. (Note that the commitment to employer was asked for each of the person’s jobs, while the other questions were asked once and reflect the respondent’s total experience.)

**Table 7 – Change in commitment to employer and field among PDD-funded respondents**

<i>Of Those Responding (PDD-funded)</i>	Greater than Before	No Impact	Less than Before
<b>Commitment to Employer (all jobs)</b>	100 (41.4%)	109 (45.2%)	32 (13.3%)
<b>Commitment to Work in Disability Field</b>	79 (40.7%)	84 (43.3%)	31 (16.0%)
<b>View of Work as a Profession</b>	76 (39.2%)	100 (51.5%)	18 (9.3%)

While this question does not reveal the actual level of commitment, some respondents selecting “no impact” indicated in their comments that their commitment was already very high. Others felt that the increase to compensation was insufficient to change their level of commitment.

*“Wages are one small part of why someone would choose a particular field to work in. I love my job and stay here because of the flexibility I am offered, the opportunity for challenges and the variety of duties in my job.”*

To add depth to the analysis, we compared the change in commitment of those who reported getting an increase in compensation and those who said they got no increase from the extra PDD allotment. (Note that some of those reporting no increase may have received an increase that was not recognizable to them, for instance, if the increase was rolled into a performance-based or time-in-grade increase. As well, recall that about 25% reported that they had not been informed of how the PDD increase was being distributed at their organization.) Table 8 presents commitment responses based on whether a compensation increase was reported.

**Table 8 – Change in commitment as a function of compensation increase**

Question	Number Responding	Compensation Increase Reported	
		Yes	No
Commitment to continue working for employer	Increased	76	16
	No impact	84	26
	Decreased	13	19
Commitment to the field of disability work	Increased	66	12
	No impact	57	18
	Decreased	13	14
View of disability work as a profession	Increased	60	16
	No impact	68	20
	Decreased	8	8

The pattern of responses as to commitment to employer was significantly different for those reporting a compensation increase compared to those who reported no increase ( $X^2(2, N=234) = 22.35, p < .0001$ ). While those receiving an increase either felt more committed or had the same level of commitment to their employer as before, those who did not notice any increase in compensation experienced either the same or decreased commitment to their employer.

The pattern of responses regarding commitment to continue working in the field was also significantly different for those who reported a compensation increase compared to those who reported no increase ( $X^2(2, N=180) = 14.45, p < .001$ ). Commitment to the field was most likely to increase when compensation increased, while those who reported no compensation increase were most likely to experience no change or a decrease in their commitment.

While a higher proportion of those reporting no compensation increase indicated that their view of disability work as a profession had eroded, compared with those who reported a compensation increase, the impact of the compensation increase was smaller on this factor than on the other commitment questions ( $X^2(2, N=180) = 6.27, p < .05$ ).

If disability workers had an expectation of receiving a 10% increase to their wage, their commitment to their employer and to a future within the field might be expected to be affected by the degree to which their wage increase matched, fell short of or exceeded that figure. There was virtually no relationship between the percentage by which the reported hourly rate increased and the change in commitment to their employer ( $r = .031$ ). The correlation between the percentage by which the reported hourly rate

increased and the change in commitment to the field was a modest  $r = .298$ , accounting for merely 8.9% of the variance in field commitment, suggesting that movement forward is the more important factor.

Another possibility to consider is that commitment to continue working for one's employer or to continue working in the field might relate to one's rate of pay. However, there was virtually no correlation between wage rate after the increase and a change in desire or ability to continue working for the same employer across the full range

of positions ( $r = .047$ ) or to continue working in the field ( $r = .11$ ). Some respondents suggest that the increases have been too small to bring wages up to a livable standard, particularly given the level of skill required by the work. Looking at wage rates within each type of position, correlations were modest and similar to those for the respondents as a whole, except for managers, who had a modest negative correlation between wage rate

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*“Wages are still well below where they need to be to continue to attract and retain a qualified, educated workforce. Providing quality, professional services to individuals requires that people are trained and compensated accordingly. Recognition that the field of Community Disability Services is a profession continues to require advocacy. Wage parity between public and private sector for comparable skills and duties is essential.”*

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and change in commitment to their organization ( $r = -.254$ ) or with change in commitment to the field ( $r = -.241$ ), accounting for 6.5% and 5.8% of the variance in these relationships, respectively. By comparison, the relationship between commitment to the organization and commitment to the field among respondents is a significant  $r = .564$ , accounting for 31.8% of the variance. The relationship between commitment to the field and view of disability work as a profession is even stronger ( $r = .632$ , accounting for 39.9% of the variance). Note that these correlations are for change in commitment, not level of commitment. Those who already had a very strong commitment to the field or their employer would be restricted in the degree to which it could increase.

### Mediating factors

Position within the organization was related to whether one knew how the compensation increase was distributed. While, 96% of management level respondents reported knowing how the increase was distributed within their organization, only 71% of supervisor respondents and 68% of front-line respondents reported that they had been told how the funding increase was distributed.

Good organizational communication is a human resources factor that supports staff commitment, and may contribute to an agency being an “employer of choice” separate from actual compensation level. Position within an organization and whether one knew how compensation was distributed within the organization interacted in their impact on commitment. Table 9 presents the proportion of respondents at the front-line, supervisor and management level whose commitment to their employer increased decreased or was unchanged, depending on whether or not they reported knowing how the funding increase was distributed.

**Table 9 – Relation of job level and communication about compensation to organizational commitment**

% Respondents in Job & Information Group	Distribution Explained			Distribution Not Explained			
	Job (N)	Front-line (91)	Supervisor (29)	Manager (44)	Front-line (43)	Supervisor (41)	Manager (2)
More Committed		49.5%	55.2%	52.3%	20.9%	8.3%	50.0%
No Impact		36.3%	41.4%	43.2%	55.8%	66.7%	0.0%
Less Committed		14.3%	3.4%	4.5%	23.3%	25.0%	50.0%

On average, disability workers who had their organization’s funding distribution plan explained to them were more likely to show increases in organizational commitment, followed by no impact, with slightly higher positive impacts on commitment at supervisor and manager levels than at the front line level. Supervisors and front-line workers who did not get any explanation of the distribution plan were more likely to have no change in commitment related to compensation, followed by having less commitment. Only two management-level respondents reported not knowing the distribution plan, skewing the percentages in this category.

Position within an organization and whether one received an increase in compensation also interacted in their effect on commitment. Table 10 presents the proportion of respondents at the front-line, supervisor and management level whose commitment to their employer increased decreased or was unchanged, depending on whether or not they reported an increase in compensation.

**Table 10 – Relation of job level and compensation change to organizational commitment**

% Respondents in that Job & Compensation Group*	Compensation Increase			No Compensation Increase		
	Front-line	Supervisor	Manager	Front-line	Supervisor	Manager
More Committed	45.6%	50.0%	51.6%	24.0%	42.9%	50.0%
No Impact	45.6%	46.2%	45.2%	36.0%	28.6%	33.3%
Less Committed	8.8%	3.8%	3.2%	40.0%	28.6%	16.7%

\*These figures are for respondents’ primary job only because no managers reported a third job.

Among those who reported a compensation increase, there was a slight trend of increasing commitment to the employing organization for those at higher levels of the organizational structure. The differences across the organization were intensified among those who reported not receiving an increase in compensation. While around half the managers reported greater commitment regardless of compensation increase, those at the front-line level reporting greater commitment was nearly half that when compensation was not increased compared to when it was. The percentage of those reporting a drop in commitment was significantly higher at all levels of the organization when there was no apparent compensation increase.

Table 11 presents the relationship between whether compensation increased and how commitment to the field changed based on one’s position in the organization.



**Table 11 – Relation of job level and compensation change to field commitment**

% Respondents in that Job & Compensation Group	Compensation Increase			No Compensation Increase		
	Front-line	Supervisor	Manager	Front-line	Supervisor	Manager
More Committed	44.1%	50.0%	61.3%	26.1%	28.6%	0.0%
No Impact	45.6%	41.7%	38.7%	39.1%	28.6%	66.7%
Less Committed	10.3%	8.3%	0.0%	34.8%	42.9%	33.3%

Among those whose compensation increased, those higher in the organization were more likely to experience greater commitment to the field of disability work than those lower, with fewer experiencing less commitment or no impact as one rose in the organization. Commitment to the field of disability work was less for all positions without a compensation increase, but the pattern within the organization is less easy to understand. The majority of managers who had not received an increase in compensation indicated that it had no impact on their commitment to the field, while a third felt less commitment.

**Table 12 – Relation of job level and compensation change to view of work as a profession**

% Respondents in that Job & Compensation Group	Compensation Increase			No Compensation Increase		
	Front-line	Supervisor	Manager	Front-line	Supervisor	Manager
More as a profession	36.8%	54.2%	58.1%	30.4%	42.9%	50.0%
No Impact on view	55.9%	41.7%	41.9%	52.2%	28.6%	33.3%
Less as a profession	7.4%	4.2%	0.0%	17.4%	28.6%	16.7%

Although somewhat over half of supervisors and managers who had received increases in compensation said they were more likely to view disability work as a profession, a similar proportion of front line staff said the compensation increase made no difference to their view. Those reporting no increase in compensation reported less positive views of disability work as a profession than those whose compensation had increased. However, the pattern of change was less pronounced than with the question of commitment to the field.

### **Thematic Analysis of Comments**

Respondent comments provided insight into the quantitative information and extended our understanding of the issues disability workers face affecting their commitment. The impact of any change is moderated by factors such as expectations vs. outcomes, the level of compensation relative to the challenges inherent to the work or the level of compensation relative to living requirements.

**Expectation & Accountability.** The government and provincial organizations had released information as to the percentage increase to be distributed for staff compensation. To the extent that staffing costs were not fully funded by PDD, the amount could be less than expected. While PDD made it clear that service providers had flexibility within that requirement to decide the best way to distribute the money (e.g., wages vs. benefits, variably across staff positions) to address human resource issues, that message

did not always reach non-management staff, just over 30% of whom felt they had been left in the dark about what was and was not allowed (easily rectified by better organizational communication). Several respondents complained of what they felt were inappropriate decisions made at the agency level. Some assumed that compensation increases were to be directed only to the frontline level. One reported that several upper management staff were hired with the extra money and a new payroll system was installed. Several individuals expressed concern that better PDD oversight of the distribution was needed to ensure agency accountability. It is unclear whether this issue was simply the result of poor communication by organizations' management of the rules surrounding the increased funding or, indeed, misuse of the funding.

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*“PDD needs to be involved to ensure desired intention[s] on increases are followed.”*

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**Wage Disparity across Human Services.** The distribution challenges have been even more difficult in organizations with a mixture of service populations and funders as wage rates for workers requiring the

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*“When PDD-funded workers received 10% increases in the past two years and FSCD-funded workers only received 5% each year...it does cause a lot of retention problems. We have lost Child & Youth Care Workers to adult services as well as to other systems and programs (i.e., education support programs). This has resulted in our agency having people who are doing the same work receiving different wages as we were told by the funders that we could not equalize the wage increases across the board.”*

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same skill sets and doing the same general type of work differ. A number of respondents commented that they are still underpaid given the stress, the level of responsibility and the vulnerability of the population served. One noted that the work was done in the psychiatric in-patient ward of a hospital instead of a home in the community, wages would be \$7.50/hour higher and include a pension. As well, while

service provider agencies received increased PDD funding for compensation, those working in family-managed service situations reported that they did not receive any increase.

**Impacts of Low Wages.** The low wages have also resulted in disability workers giving up family time and working many hours in multiple jobs to make ends meet. With 19.2% of respondents working two jobs in the field and 5.6% working three jobs, the number of hours worked in demanding situations takes a toll on health.

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*“Some of the front-line workers have to work 150 to 220 hours every two weeks just to pay our bills...and have to give up time with our families so we can support them, meaning too many hours a week for us.”*

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Low wages have also had an impact on hiring within the field. As noted in an earlier comment, wages are still too low to attract and retain a qualified, skilled workforce. At the same time, respondents note that the number of high-risk clients they see is increasing. They noted that more education and training are required to support this population effectively. Yet workers cannot afford to build up student loan debt for an appropriate education when wages are too low to be able to pay it off. One respondent found it particularly disturbing when the

individuals one supports have incomes higher than their disability worker. While not begrudging individuals with disabilities enough to live on, the individual feels that the work s/he does is clearly undervalued and asks, “How is it that someone who just entered into the workforce with no education as they are fresh out of high school can take home more money than me when I have training, courses, experience and 14 years on the job?”

*“If my spouse did not work, I could not afford to work in this field.”*

Wages, in addition to their practical value, are also seen as a measure of respect for the profession and appreciation for the individuals who work in it. Some respondents indicated that the increases they’ve received, while appreciated, are simply not enough, given the impact of inflation and raises in other human service sectors to reflect the skills they require and have. Respondents reported feeling unappreciated by society in general and, in some cases, those who employ them. One respondent described the compensation increase as a “band-aid solution to a long term issue.” This person indicated the need to increase education, ensure consistent salaries with consistent cost-of-living increases, and build community awareness and confidence that funding dollars are spent appropriately.

**Minimum Wage.** With plans for a \$15 minimum wage in the media, several respondents expressed concern about long-term wage levels in the field. If new workers are brought up to \$15/hour, those with many years of experience may earn little more unless government funding prevents wage compression. Again, the perception of value is as important to people as the money. One respondent anticipates that her 17 year-old will then make only \$4 less per hour. “I have to have a lot of training and keep certificates updated just to keep my job, for only \$4 more than a regular customer service job.”

*“I love this field of work and dearly love to stay in it as long as I can afford to live on the money I make. If we do not receive the proper and deserved increases in wages to bring us up to where we should be, I may be forced to re-evaluate my occupation.”*

**Impacts of System Changes.** Some respondents took the opportunity to express concerns about increased administrative burdens resulting from new PDD requirements. Several respondents feel that

*“Management is so concerned with meeting PDD targets and operating within budgets, that client behavioural needs often go unnoticed, client/guardian wishes often go unheeded, and frontline staff bear the brunt of this burden.”*

the new PDD demands have changed the focus of their work from supporting individual’s goals and quality of life to meeting PDD targets and completing paperwork. One respondent noted that the team leaders’ paid administration hours were cut from 10 to 8 hours, while paperwork demands increased. This

individual reported having had to donate 16 hours of personal time in the past month to complete new paperwork. Delegation to others only goes so far before staff are exhausted, particularly if they work multiple jobs.

**Disability Work as a Profession.** Many respondents identified the need for a skilled and educated workforce to carry out disability work, and fair and equitable compensation as a necessary part of the picture. Respondents suggested that the way to attract workers with education and training is to tie wage rates to education and experience. Positive comments were made supporting the need for a certification system for those working in the field and regulation as a profession.

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*“I think the disability field should be seen and treated as a profession [and] have a regulatory body as any other professional body.”*

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## Conclusions

While the compensation increase within PDD-funded services over the past few years has had a positive effect on commitment to employers and the field overall, this effect has been moderated by several factors. These factors include the worker’s position within an organization’s hierarchy; the degree to which information about the amount received, restrictions on use and the rationale behind distribution plans were communicated by the organization; and the worker’s pre-existing level of commitment. While grateful for any increase, workers still felt under-paid and under-valued given the demanding nature of their work.

While recommending that the remaining 5% that was originally promised be distributed as soon as possible, disability workers also recommend that

- The human services develop consistent and appropriate compensation rates so that the sectors have equal access to a skilled, qualified workforce. This includes both service-provider delivered and family-managed supports within the PDD system as well as children’s services. ADWA supports the work of the provincial Workforce Alliance in achieving that aim through its continued participation and contribution.
- Compensation levels should reflect the level of relevant education, skill, experience and certification status of the disability worker, and be appropriate to the demands of the work.
- Funding levels should support the development of skills through education and training of disability workers to address the increased complexity of individuals’ needs in the service system, including those associated with aging.
- With nearly 25% of respondents reporting that they work two or more jobs in the field to make ends meet, compensation rates must be raised to at least “living wage” levels to ensure that disability workers can have the kind of balanced life that prevents burnout, stress and medical leaves, and turnover that is currently endemic in the field.
- The nature of human services work naturally supports a high level of commitment because of the opportunity to change people’s lives for the better. Recent changes at a systems level have reduced the time that disability workers spend helping individuals achieve their goals and improve their quality of life in favour of completing paperwork and other administrative tasks. With less time spent on emotionally rewarding work, the lack of adequate remuneration becomes all the more apparent to workers and continued commitment to the work becomes a challenge.

## Appendix A – Survey Questions

**Note:** Because of the nature of Survey Monkey, instructions to skip to a particular question are not seen but handled directly by the software.

### Disability Workforce Compensation and Commitment Survey

Over the past few years, the PDD Program Branch of Human Services has given a 25% increase to service provider funding to increase staff compensation (i.e., wages, benefits packages, professional development). Each service provider was able to decide how the additional funding would be allocated. We want to know your experience with this process and its impact on your commitment to this work. This survey is confidential; no one will know who gave what answers.

1. How many full- or part-time jobs in the disability field including both adult and children's services) do you currently hold?
  - a. One
  - b. Two
  - c. Three or more

If you currently hold more than one job, decide which is your main (#1) and secondary job(s) based on the number of hours worked each week and how long you have held that job.

#### Job #1

2. What population do you serve in this job?
  - a. Adults (Persons with Developmental Disabilities – PDD)
  - b. Children (Family Support for Children with Disabilities – FSCD)
  - c. Other (please specify) \_\_\_\_\_
3. What kind of position do you hold? (pick just one)
  - a. Management
  - b. Supervisor/Team Leader
  - c. Front-line Worker (full-time, part-time or casual/relief)
  - d. Supportive Roommate/Neighbour, Home Support Proprietor or similar
  - e. Other speciality (please specify) \_\_\_\_\_
4. Were you given an explanation of how the increased funding was being spent within your organization? \_\_\_ Yes \_\_\_ No
5. Has your compensation increased this past year (2014) in an amount NOT SIMPLY DUE to successful performance evaluation? \_\_\_ Yes \_\_\_ No
6. If your wage increased, what was it before and what did it change to? (Skip this question if your wage did not change in this job.)
  - a. Hourly wage before \$ \_\_\_\_\_
  - b. Hourly wage after \$ \_\_\_\_\_
7. Check every non-wage item that you KNOW increased.
  - a. Benefits – Paid illness time increased

- b. Benefits – Health coverage % was increased (e.g., dental, medication, optometry, therapy, hospital) or Health Spending/Wellness Accounts were added or expanded
  - c. Benefits – Paid vacation time increased
  - d. Benefits – RRSP contribution was made or matched
  - e. Training cost was covered or training time was paid (if this was not the case before)
  - f. If Other, please specify \_\_\_\_\_
8. Has your increase or lack of increase made a difference in your desire or ability to continue working for the organization?
- a. Yes, I am more committed to stay with this organization
  - b. Yes, I am less committed to stay with this organization
  - c. No, it has not affected my commitment to this organization

Job #2 – If you only work one job in the disability field, go to question 23.

9. What population do you serve in this job?
- a. Adults (Persons with Developmental Disabilities – PDD)
  - b. Children (Family Support for Children with Disabilities – FSCD)
  - c. Other (please specify) \_\_\_\_\_
10. What kind of position do you hold? (pick just one)
- a. Management
  - b. Supervisor/Team Leader
  - c. Front-line Worker (full-time, part-time or casual/relief)
  - d. Supportive Roommate/Neighbour, Home Support Proprietor or similar
  - e. Other speciality (please specify) \_\_\_\_\_
11. Were you given an explanation of how the increased funding was being spent within your organization? \_\_\_ Yes \_\_\_ No
12. Has your compensation increased this past year (2014) in an amount NOT SIMPLY DUE to successful performance evaluation? \_\_\_ Yes \_\_\_ No
13. If your wage increased, what was it before and what did it change to? (Skip this question if your wage did not change in this job.)
- a. Hourly wage before \$ \_\_\_\_\_
  - b. Hourly wage after \$ \_\_\_\_\_
14. Check every non-wage item that you KNOW increased.
- a. Benefits – Paid illness time increased
  - b. Benefits – Health coverage % was increased (e.g., dental, medication, optometry, therapy, hospital) or Health Spending/Wellness Accounts were added or expanded
  - c. Benefits – Paid vacation time increased
  - d. Benefits – RRSP contribution was made or matched
  - e. Training cost was covered or training time was paid (if this was not the case before)
  - f. If Other, please specify \_\_\_\_\_
15. Has your increase or lack of increase made a difference in your desire or ability to continue working for the organization?

- a. Yes, I am more committed to stay with this organization
- b. Yes, I am less committed to stay with this organization
- c. No, it has not affected my commitment to this organization

Job #3 – If you only work two jobs in the disability field, go to question 23.

16. What population do you serve in this job?
  - a. Adults (Persons with Developmental Disabilities – PDD)
  - b. Children (Family Support for Children with Disabilities – FSCD)
  - c. Other (please specify) \_\_\_\_\_
17. What kind of position do you hold? (pick just one)
  - a. Management
  - b. Supervisor/Team Leader
  - c. Front-line Worker (full-time, part-time or casual/relief)
  - d. Supportive Roommate/Neighbour, Home Support Proprietor or similar
  - e. Other speciality (please specify) \_\_\_\_\_
18. Were you given an explanation of how the increased funding was being spent within your organization? \_\_\_ Yes \_\_\_ No
19. Has your compensation increased this past year (2014) in an amount NOT SIMPLY DUE to successful performance evaluation? \_\_\_ Yes \_\_\_ No
20. If your wage increased, what was it before and what did it change to? (Skip this question if your wage did not change in this job.)
  - a. Hourly wage before \$\_\_\_\_\_
  - b. Hourly wage after \$\_\_\_\_\_
21. Check every non-wage item that you KNOW increased.
  - a. Benefits – Paid illness time increased
  - b. Benefits – Health coverage % was increased (e.g., dental, medication, optometry, therapy, hospital) or Health Spending/Wellness Accounts were added or expanded
  - c. Benefits – Paid vacation time increased
  - d. Benefits – RRSP contribution was made or matched
  - e. Training cost was covered or training time was paid (if this was not the case before)
  - f. If Other, please specify \_\_\_\_\_
22. Has your increase or lack of increase made a difference in your desire or ability to continue working for the organization?
  - a. Yes, I am more committed to stay with this organization
  - b. Yes, I am less committed to stay with this organization
  - c. No, it has not affected my commitment to this organization

Impact on Commitment

23. Has your increase in compensation or lack of increase over the past three years made a difference in your desire or ability to continue working in the DISABILITY FIELD?
  - a. Yes, I am more committed to continue working in the disability field

- b. Yes, I am less committed to continue working in the disability field
  - c. No, it has not affected my commitment to this field
24. Has your increase or lack of increase made a difference in YOUR VIEW OF DISABILITY WORK AS A PROFESSION?
- a. Yes, I view disability work as a profession more than before
  - b. Yes, I view disability work as a profession less than before
  - c. No, it has not affected my view of disability work as a profession

Demographics

25. Are you a member of the Alberta Disability Workers Association (ADWA)? \_\_\_\_ Yes \_\_\_\_ No
26. What region of the province do you work in?
- a. South
  - b. Calgary
  - c. Central Alberta
  - d. Edmonton
  - e. North West
  - f. North Central / North East
27. Is there anything else you would like to add related to the survey or its topic?