Working in the Community—Update 4

The Status and Outcomes of People with Intellectual and Developmental Disabilities in Integrated Employment

By Lindsay DuBois, Jean Winsor, Dorothy Hiersteiner, & John Shepard

APRIL 2026

EXECUTIVE SUMMARY

This Special Issue Data Brief updates the September 2018 NCI Data Brief. In this updated brief, we describe the employment status of adults supported by state IDD systems and explore characteristics related to community employment. This brief provides data on the following measures:

- Percentage of people with paid jobs in the community
- Types of jobs held in the community
- Types of industries where people work
- The impact of having an employment goal on whether someone works
- Where and how people spend their time throughout the week
- Employment trends since 2016–2017

Terms to Know

Competitive integrated employment (CIE) is a type of job. You know a job is CIE when a person works full or part time for a business, is fully integrated working alongside peers without disabilities in the business, and is doing work and earning wages and benefits similar to their co-workers without disabilities. It can include a job where people work with or without paid support. If the business that the person receives a paycheck from is also paid to provide the individual on-the-job supports the job is not CIE.

Subminimum wages are wages that are less than a state's minimum wage. Some states use the federal minimum wage of $7.25 while other states have higher minimum wages. A business or employer can pay subminimum wages if they apply for a special certificate with the federal government.

Individual job in the community is a job where people work for a local business alongside people without disabilities. However, it may include some people who earn subminimum wages, so it is not the same as competitive integrated employment.

Intellectual and developmental disabilities (IDD) are often present at birth but can also develop at any point before age 22. An IDD usually impacts an individual's physical, intellectual, and/or emotional development; and may affect multiple body parts or systems.

Intellectual and developmental disabilities (IDD) system includes state-level agencies and authorities that work to develop, implement, and monitor services for eligible people with IDD.

National Core Indicators (NCI) Project is the source of the data for this report. The NCI-IDD surveys are a partnership between the National Association of State Directors of Developmental Disabilities Services (NASDDDS) and Human Services Research Institute (HSRI) to gather performance and outcome data for the IDD system.

INTRODUCTION

For nearly 15 years, federal policy has been revised and realigned to support the preferences of people with intellectual and developmental disabilities (IDD) (National Association of Councils on Developmental Disabilities [NACDD], 2011; Nord et al., 2013; Nord et al., 2016; Winsor et al., 2025). Centers for Medicare and Medicaid Services (CMS) guidance (CMS, 2011; 2014), the Workforce Innovation and Opportunity Act (WIOA), and the US Department of Justice have applied the *Olmstead v. L.C.* decision related to the segregation of people with disabilities to employment, further prioritizing competitive integrated employment (CIE) at the federal level. State IDD systems have also established their own expectations for CIE. Thirty-nine states have established Employment First policy, and nearly every state has some form of an Employment First initiative (Hoff, 2023), prioritizing community employment as an outcome for people with disabilities, including people with IDD who receive state services (Kiernan et al., 2011; Nord et al., 2015).

Despite the long-term focus on community employment as a priority outcome, overarching state IDD system policy and strategy related to prevocational, day habilitation, and residential services continue to invest in program-based models and not CIE (Winsor et al., 2025). There is limited information on what types of implementation activities occurred to prioritize community employment and whether the changes included guidance and accountability standards to significantly alter outcomes (Hall et al., 2018; Moore & Friedman, 2017).

National data indicate that most people who receive daytime supports from a state IDD system participate in non-work day habilitation services or pre-vocational services (Friedman & Nye-Lengerman, 2018; Winsor et al., 2025). Over the past 10 years, participation in facility-based and non-work services supported by state IDD systems has consistently made up about 80% of the services provided by state IDD systems, representing 85–90% of all IDD system funds spent on employment and day services (Zalewska et al., 2023). Although facility-based work and pre-vocational services are intended to lead to CIE, Freidman and Nye-Lengerman (2018) found that most people who participate in these services do not transition to CIE. Zalewska et al. (2023) found that participation in facility-based work has steadily declined while growth has primarily been in non-work services, indicating that people are not transitioning to CIE.

National Core Indicators-Intellectual and Developmental Disabilities (NCI™-IDD) In-Person Survey (IPS) data provide an important window to the employment of people receiving IDD system services.

Description and Demographics of the Sample

We've drawn the information in this report from the 2023–24 NCI™-IDD IPS conducted with 17,585 adults from 30 states (including Washington, DC). For the purposes of these analyses, people under the age of 22 who were enrolled in public schools (or for whom this information could not be determined) were excluded; subsequently, data is available on 16,925 adults receiving support from their state's IDD system. The data reported in this brief are not weighted and are averages of the responses of all people surveyed (except when otherwise specified). The demographic data and employment information come from the Background Information section, which is collected from existing system records, such as case management records, state data systems, provider data, or other records. Some demographic data (e.g., race and ethnicity) and employment data (if person wants to work) come from Section I of the IPS, which can only be answered by the individual using services.

Figure 1 shows the demographic makeup of the sample: The majority of NCI-IDD IPS respondents are aged 35 or older, male, and white. Table 1 shows additional personal characteristics that are often connected to employment, including guardianship, level of intellectual disability, and residence type. The most common residential settings are group homes and family homes, with just 15.7% of respondents living in their own home or apartment.

Figure 1. Age, Race / Ethnicity, and Gender of Sample

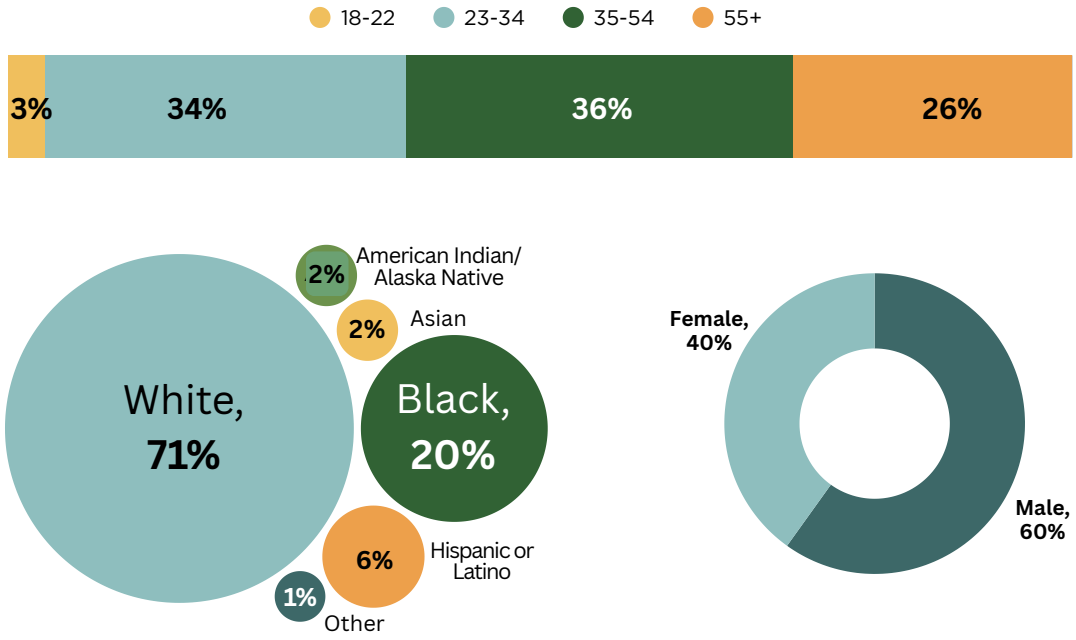


Table 1. Personal Characteristics of Sample

Characteristics	Unweighted % (Total N = 16,925)
Has guardian (limited or full)	**54.6%**
Level of ID[1]	**missing = 4,188 (24.7%)**
None	13.1%
Mild	41.7%
Moderate	32.6%
Severe or profound	12.6%
Residential setting[2]	**missing = 987 (5.8%)**
ICF/ID	2.2%
Group home	37.7%
Own home or apartment	15.7%
Parents/relatives home	37.6%
Foster care or host home	6.8%

[1] Level of intellectual and developmental disability (IDD) has standard cut-points within states, but across states, there may be differences as states use different eligibility criteria.

[2] ICF/IID, or intermediate care facility of individuals with IDD is a Medicaid-licensed residential facility that provides 24-hour support.

RESULTS

What does NCI Data Reveal about Employment among People Receiving IDD System Services?

Data from the 2023–24 NCI-IDD IPS shows that 18.4% of respondents have a paid job in the community (Table 2). Of those with paid community jobs, most work an individual job in the community (12.2%), with the remainder employed in group work crews (4.4%) or at a business that primarily hires people with disabilities (2.1%). More than half of those working in individual jobs, group supported employment, and businesses that primarily hire people with disabilities get publicly funded services or supports to participate in employment. Altogether, 6.8% of respondents perform paid work in a facility-based setting, which is not considered a paid community job. Participation in each type of work is not mutually exclusive; respondents may participate in more than one type during the week.

Table 2. Employment and Facility – Based Work

Type of Employment	N	Unweighted %
Any paid job in the community (excludes facility-based work)		
Yes	**2,513**	**18.4%**
No	11,120	81.6%
Missing	3,292	
Individual job in the community	**1,756**	**12.2%**
Group supported employment	**632**	**4.4%**
Works at community business that primarily hires people with disabilities	**284**	**2.1%**
Paid Facility-based work		
Yes	**913**	**6.8%**
No	12,489	93.2%
Missing	3,523	

In addition to looking at how many people are working; we can use NCI data to look at how many hours people work and how much they are paid. Table 3 shows that those with individual jobs have the highest number of biweekly hours, or about 14 hours each week. Those in individual jobs also have the highest wages at an average of $13.44 per hour.

Table 3. Hours and Wages by Job Type[3]

Hours	Individual job (N = 1,756)	Group supported employment (N = 632)	Job in business that hires people with disabilities (N = 284)
Average biweekly hours	27.93	26.41	27.13
Average hourly wages	$13.44	$11.03	$10.67

[3] Information about wages is missing for 30% of those with paid individual jobs, 40% of those with group supported employment, and 31% of those working in businesses that primarily hire people with disabilities.

Table 4 shows the top job industries for each job type. The categories listed here are not exhaustive of all categories surveyed; data do not add to 100%. Among those who work individual jobs in the community, nearly 1 in 4 jobs are in food prep and food service, with another 1 in 4 jobs in retail. Among those in group supported employment, more than 1 in 4 jobs are in building and grounds cleaning or maintenance. For those who work in businesses that primarily hire people with disabilities, more than 1 in 4 work in retail. Those in group supported employment and businesses that hire people with disabilities also have more than double the rates of working in assembly, manufacturing, and packaging jobs than those with individual jobs in the community, which may be a legacy of the types of work performed in sheltered workshops.

Table 4. Top Job Industries by Job Type

Job Industries	Individual job (N = 1,756)	Group supported employment (N = 632)	Job in business that hires people with disabilities (N = 284)
Food prep and food service	27.3%	7.9%	14.3%
Building and grounds cleaning or maintenance	19.6%	28.9%	19.4%
Retail	23.8%	4.0%	28.6%
General office and support	5.1%	1.6%	4.0%
Assembly, manufacturing, or packaging	4.3%	9.0%	11.9%
Materials handling, mail distribution	2.2%	4.3%	4.8%

Are There Differences in Employment Based upon Specific Characteristics?

Employment is associated with several factors, especially where people live. Table 5 shows the percentage of people with a paid community job by different demographic characteristics. Having a paid job in the community is significantly associated with age, gender, guardianship, level of IDD, and residential setting. For example, those who live in group homes have lower than average rates of paid community employment (12.4%). Those who live in their own home have the highest rates of paid community employment (31.6%), with the majority employed in an individual job in the community (Figure 3).

We can also look across types of jobs for trends by various personal factors. For example, Figure 2 shows, within each age category, the percentage of people who work in individual jobs in the community, small group employment, or for a business that primarily hires people with disabilities. Those who are ages 23–34 and 35–54 have the highest rates of paid community jobs; the differences in

Table 5. Employment by Demographics

Demographic	Percentage of people with IDD with any paid community job (Total N = 2,513)
Age	**p<0.001**
18-22	15.3%
23-34	21.5%
35-54	21.3%
55+	10.9%
Gender	**p<0.001**
Male	19.8%
Female	16.3%
Has guardian	**p<0.001**
No	22.2%
Yes	14.7%
Level of IDD	**p<0.001**
None	23.9%
Mild	25.9%
Moderate	14.6%
Severe or profound	2.6%
Residential setting	**p<0.001**
ICF/IID	n/a
Group home	12.4%
Own home or apartment	31.6%
Parents/relatives home	19.3%
Foster care/host home	19.5%

age groups are statistically significant for each of the job types (denoted by the asterisk). People may be counted in more than one type of job.

For each job type, the relationship between employment and residence type is statistically significant (Figure 3). Those who live in group homes have the lowest rate of individual jobs in the community (7.3%) and group supported employment (3.8%) compared to peers living in other settings. Those who live in their own home or apartment have the highest rates of individual jobs (22.9%), and similar rates of group supported employment as those who living in foster homes/host homes. Those who live in their parent or relatives' home have modest rates of individual jobs in the community (13.7%), and the lowest rates of working for businesses that primarily hire people with disabilities (1.7%). People may be counted in more than one type of job.

Figure 2. Type of Job by Age Group

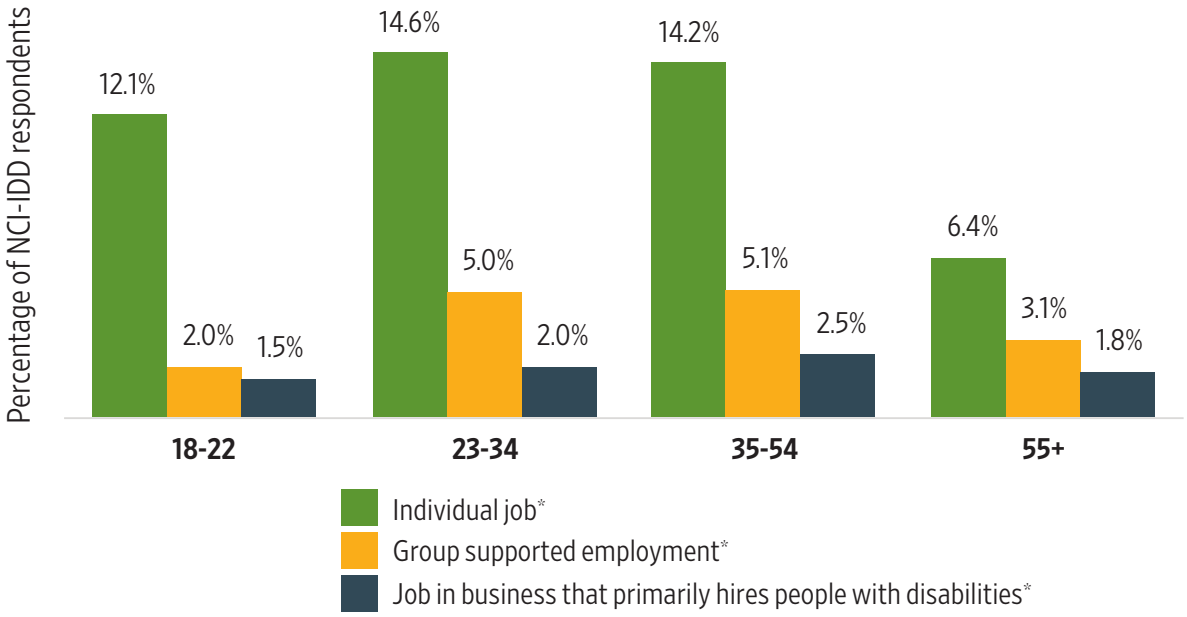
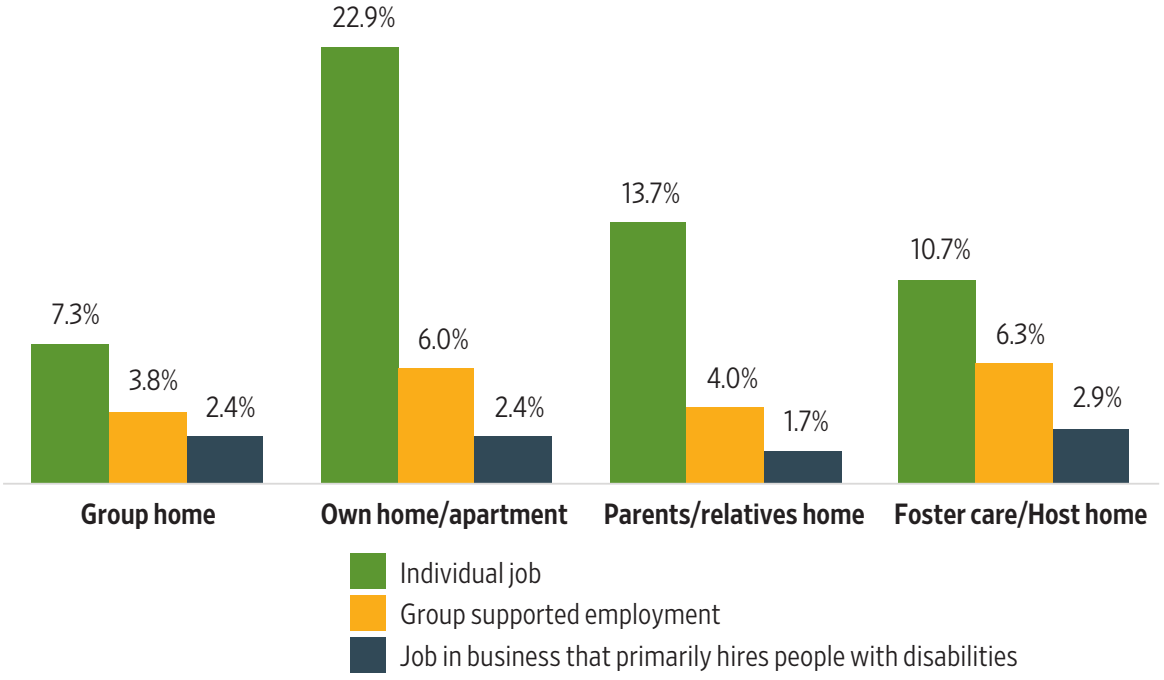


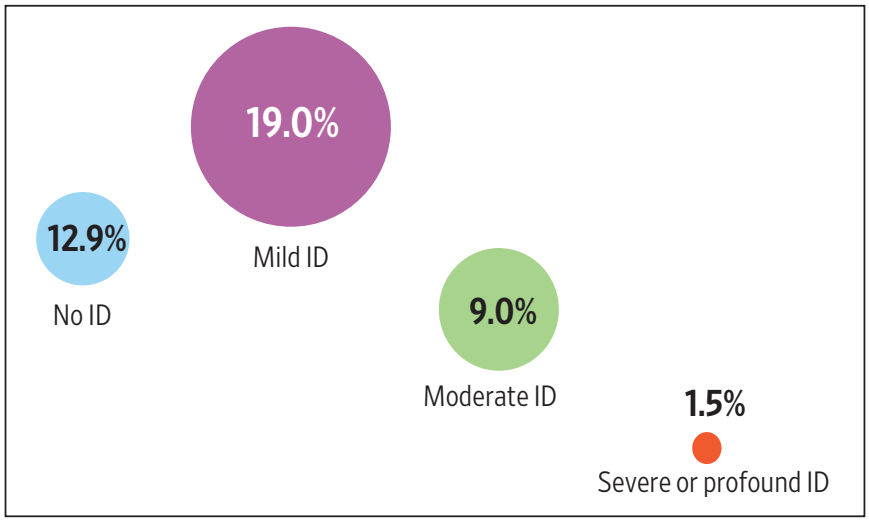
Figure 3. Type of Job by Residence



Given that most people with IDD who have paid community jobs have an individual job, we can also focus on how certain personal factors are associated with individual jobs in particular. For example, those who do not have a guardian have twice the rate of working in an individual job in the community compared to peers with guardians.

Similarly, in Figure 4, we look at the rates of individual jobs by level of IDD, with significant associations observed. Figure 4 shows both the percentage of people with IDD and the overall number of people with IDD (size of bubble) within each level of IDD who work a paid individual job. Those with mild IDD and moderate IDD are the largest groups overall, and those with mild IDD also have the highest rates of work in an individual job. Those with no diagnosis (likely individuals with a developmental disability like Autism Spectrum Disorder), are a smaller group overall and have lower rates of work in individual jobs (12.9%) than peers with mild IDD.

Figure 4. Rates of Working Individual Jobs by Level of IDD



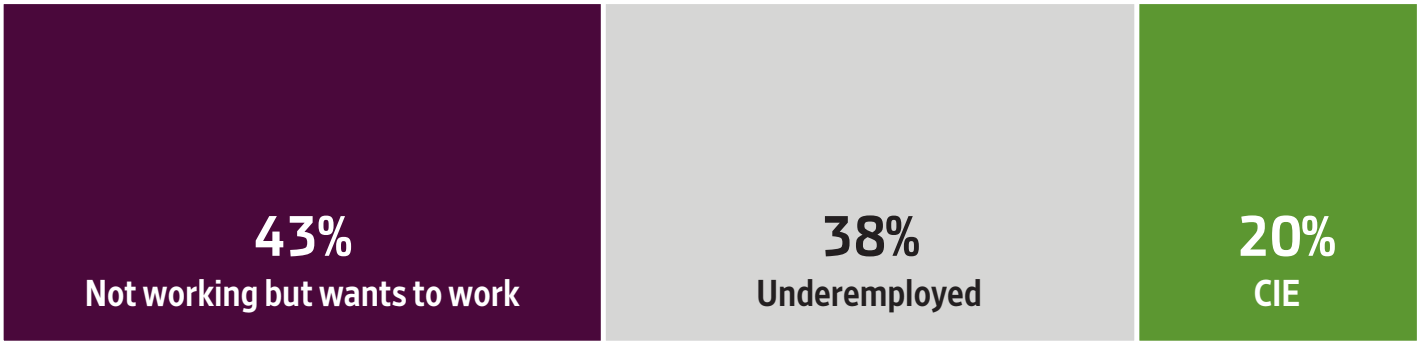
Using NCI Data to Look at Competitive Integrated Employment

To look at outcomes that explain how many people are in competitive integrated employment (CIE), we used the NCI data to place respondents into three different groups:

1. Those who are not working but want to work.
2. Those who are underemployed. This means that their job doesn't offer full integration with people without disabilities or it pays less than minimum wage.
3. Those who are in competitive integrated employment, also called "CIE" for short. This means that they have an individual job in the community and they earn at least minimum wage for their job.

When we use these categories, we are looking at data for more than 4,000 people with IDD. Figure 5 shows that of this smaller group of people with IDD, 43% are not working and want to work, 38% are *underemployed*, and just 20% are in CIE. For this section of the data brief, those who work in group supported employment or for businesses that primarily hire people with disabilities would fall into the category of underemployed, as they don't have the same chances to interact with peers without disabilities. Those who work in individual jobs but earn less than minimum wage in their state would also fall into the category of *underemployed*.

Figure 5. Of the People with IDD who are Not Working But Want to Work, Underemployed, and in Competitive Integrated Employment, those who are in each category



Notably, there is wide variability in these rates across states, ranging from a high of 49% of people in CIE to a low of just 3% of people in CIE. Looking at those who are not working but want to work, those who are underemployed, and those with CIE, we can look at other NCI data to understand how that might be connected to employment outcomes. For example, people may need to take classes or training to gain the skills needed for a specific job. Table 6 shows how those who are not working but want to work and those who are underemployed are more likely to be taking classes, training, or skill building to help them get a job or a different job. In fact, more than 1 in 5 people who are unemployed and underemployed are taking classes to help them get a job. Of note, those who have CIE have similar rates to the overall sample in taking classes.

Working on job skills is important, but it is often not enough to improve employment outcomes. Some people with IDD may need supports to find, apply, and perform jobs, and these types of supports need to be specified in their service plans. Table 6 also shows data from NCI about whether people have employment-related goals in their service plan. Among those who are not working but want to work, just 1 in 3 people have an employment goal in their service plan. On the other side, among those in CIE, almost 3 in 4 people have an employment goal in their service plan. Research has shown that this is one of the strongest predictors of achieving CIE, and this data supports that case managers can play an important role in improving employment among people with IDD (DuBois et al., 2024).

Table 6. Employment – Related Activities Overall and by Employment Category

Activity	Overall (N = 16,925)	Not working but wants to work (N = 1,946)	Underemployed (N = 1,746)	CIE (N = 922)	p-value
Take classes, training, or skills building to help get a job/get a different job	1,399 (14.8%)	409 (21.5%)	279 (20.5%)	122 (15%)	<0.001
Have goal for employment in service plan	3,892 (26.4%)	666 (35.3%)	932 (55.1%)	651 (73.1%)	<0.001

Beyond Employment: Time Spent in other Day Services and Supports

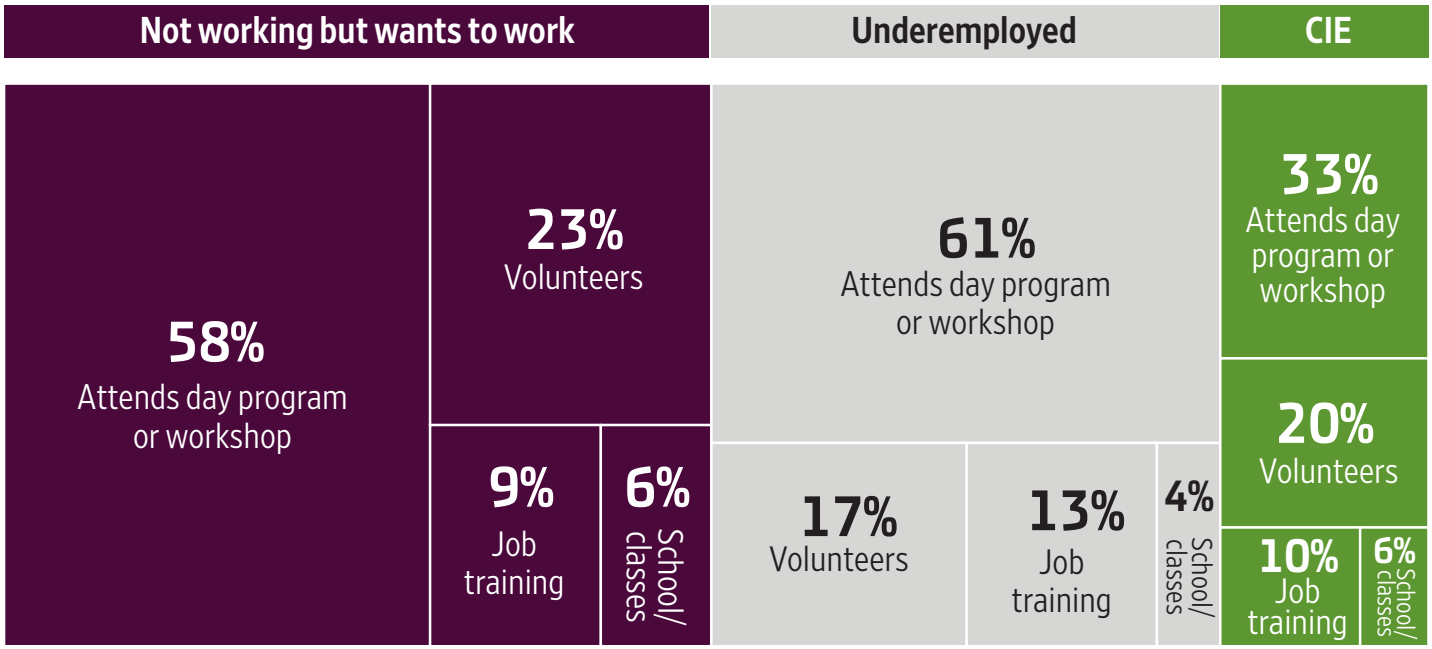
For people with IDD who receive supports from the state IDD system, the types of activities they are participating in during the week with support from their providers may be tied to their employment outcomes. Table 7 shows the overall percentage of people with IDD who attend various activities at least weekly. Most participants (51.3%) attend a day program or workshop at least once per week, with the next most frequent activity described as "community activities with paid supports" (42.5%). A small proportion of people with IDD overall spend their time in activities each week that may connect to employment, such as volunteering (18.9%), job training (7.6%), and school or classes (4.9%).

Table 7. Weekly Participation in Activities

Attends day program or workshop	Community activities with paid support	Volunteers	Job training	School/ classes	Other	No activities
51.3%	42.5%	18.9%	7.6%	4.9%	21.1%	17.4%

Participation in these activities is significantly associated with employment outcomes. Figure 6 shows a treemap that represents both the overall number and percentage of people participating in activities at least once each week, stratified by employment category (not working but wants to work, underemployed, and in CIE).

Figure 6. Percentage of NCI-IDD Respondents by Employment Category who Participate in Each Activity at Least Once per Week.



Those who are not working and those who are underemployed represent a much larger share of the sample, and they attend day programs and workshops at rates that are nearly double that of peers in CIE. Furthermore, those not working and who are underemployed have lower rates of participating in activities that can connect to improved employment outcomes; just 9% of those who are not working and 13% of those who are underemployed attend job training activities at least one per week, and just 6% of those who are not working and 4% of those who are underemployed attend school or classes. These numbers are similar to those with CIE, suggesting opportunities to individualize how people spend time each week to optimize employment outcomes.

How has the Employment of Adults with IDD Receiving Services from the State Changed Since 2016–2017?

There are differences between the 2023–24 and the 2016–17 National Core Indicators samples. There were nine fewer states (including Washington, DC) who participated in the 2023–24 NCI-IDD IPS data collection. This resulted in 3,943 fewer individuals in the 2023–24 sample. However, this should have a limited impact on the overall comparison of findings between the two data collection periods. NCI works with states to develop a robust sampling frame for each participating state. Each state is asked to complete a number of randomly selected surveys that helps to make sure that the sample is representative of the population. This helps to make it possible to compare across states where service systems are sometimes quite different. For this reason, the authors choose to focus on percentages when presenting findings.

In *Working in the Community—Update 3*, data from NCI-IDD 2016–2017 showed 20% of people were engaged in paid employment in the community. Nearly 10 years later, the 2023–24 data suggest a similar story: A minority of people with IDD have paid jobs in their communities.

One important change to note is that there was a significant drop in the number of people in group supported employment. In 2016–2017, 28% of people with individual jobs were in group-supported employment compared to 2023–2024, where 4.4% of people were employed in group work crews or at a business that primarily hires people with disabilities (2.1%). This change shows an increasing emphasis on CIE as the priority outcome of employment services for people with IDD.

Biweekly wages are also remarkably consistent with the previous update. In 2016–2017, people in individual jobs earned a little over $9 per hour, while in 2023–24, NCI-IDD respondents who worked in individual jobs earned $13.44 per hour. Adjusting for inflation, $9.33 in July 2017 is the equivalent of earning $11.99 in July 2024. This suggests that, after adjusting for inflation, average wages among NCI-IDD respondents in paid individual jobs has gone up by just $1.45 since 2017.

Biweekly hours are also remarkably consistent with the previous update. The focus on individual jobs as the priority outcome also is reflected in changes in the number of hours worked in a two-week period. In 2023–24, people in individual jobs worked on average 14 hours per week, the highest for all community job types. Group supported employment and jobs that primarily hire people with disabilities averaged 13.4 hours per week in 2023–24, a drop from 15 hours per week for group supported community jobs in 2016–17. It is hopeful that the slight increase from 2016–2017 (13.4 hours worked per week on average) for individual jobs and the slight decrease in group employment hours further supports an emerging priority on individual jobs.

However, it is important to note that while average wages earned and average hours work have increased, they are still below what is considered Substantial Gainful Activity (SGA) for the purposes of remaining eligible for Supplemental Security Income (SSI) and consequently Medicaid healthcare benefits. In 2016, the SGA allowance per month for individuals who are not blind was $1,130, and in 2023, the allowance was $1,470 (Social Security Administration, n.d.) Using NCI data on biweekly hours and wages, the average monthly earnings for those with individual jobs in the community in 2023–24 was $813.32.

One measure unchanged from 2016–17 to 2023–24 data collection periods was the concentration of individual jobs in food prep, food service, and retail industries. Similarly, group employment positions continue to be concentrated in building and grounds cleaning or maintenance. This suggests that people with IDD continue to lack access to a wider range of potential job matches in their communities.

Personal characteristics continue to be associated with whether someone with IDD has a job in the community. In the 2023–24 data collection period, the association between guardianship and employment seems to be primarily due to differences in rates of individual jobs in the community; those who do not have a guardian have twice the rate of working an individual job in the community. This suggests that despite the awareness of the impact of guardianship on employment, states have not been able to act at the scale necessary to remove this barrier to employment. Similarly, those who live in group homes continue to have the lowest rate of individual jobs in the community and group supported employment compared to peers living in other settings.

Underemployment and lack of access to work services continue to impact people with IDD. In 2023–24, people who are not working but want to work and those who are underemployed are more likely to be taking classes, training, or skill building to help them get a job or a different job. Continued research and analysis should be conducted to better understand whether the classes, training, and skill building are specifically linked to individual employment goals within service plans or if they are more general types of education that focus on “employment readiness skills.” Those who are not working but want to work are least likely to have an employment goal in their service plan, making it difficult to assess whether the education classes, training, or skill building are tied to individual employment goals.

People who are working in an individual job are still the least likely to attend a day program or workshop at least once per week relative to peers who are underemployed or not working. In 2023–24, regardless of whether someone was employed in an individual job, underemployed, or not working but wanting a job, people have similar rates of volunteering in their community at least once per week. If CIE is to be the priority outcome for all adults with IDD, there needs to be greater research and model development that

supports individuals to move from day programs and workshops to CIE. There also needs to be support for provider organizations to transform their programmatic models.

POLICY AND PRACTICE IMPLICATIONS

Continued need to focus on individual jobs over group jobs or community jobs that primarily hire people with IDD. The September 2018 NCI Data Brief noted that the benefits and advantages of individual employment should be reflected in policy and operational practices that prioritize individual employment outcomes. The data in this report suggest that these efforts need to continue and be expanded. Over the last decade, the data has continued to show that individual employment yields higher levels of income and a wider array of job choices than other types of employment.

Broader understanding of the types of jobs in the community. IDD systems should expect their employment specialists, case managers, transition specialists, and other direct services providers to use data to support people to connect to areas of employment growth in their communities, just as state vocational rehabilitation agencies do. For example, the fiscal year *(FY) 2022 Disability Innovation Fund - Subminimum Wage to Competitive Integrated Employment (SWTCIE) Innovative Model Demonstration Projects* were encouraged to focus on linking people with the most significant disabilities to growth industries in their state (Federal Register: Applications for New Awards; Disability Innovation Fund-Subminimum Wage to Competitive Integrated Employment Innovative Model Demonstration Project). In 2024, the National Governor's Association also endorsed the use of labor market data on employment sectors to inform employment training and career planning decisions for people with disabilities who are involved in the workforce development system.

Policy and practice guidance to address the impact of personal characteristics on employment. Guardianship continues to be a barrier to employment. To address this issue, states must incorporate alternatives to guardianship and supported decision- making models into individual planning services, including in discussions about employment. Interventions such as those developed by the Center for Youth Voice, Youth Choice that provide direct support and instruction to people with IDD to ensure that their choices are honored within the planning process have been shown to be successful in supporting individuals to obtain their goals (Center on Youth Voice, Youth Choice, n.d.). Another area of consideration for states is strengthening expectations for residential services providers to support CIE. In 2023, Pennsylvania analyzed data on their residential service providers and found that many struggled to support their residents in CIE (Office of Developmental Programs Pennsylvania Department of Human Services, 2023) One suggested solution was to consider reimbursement structures such as paying for performance to ensure that residential providers prioritize CIE for their residents.

Linking non-work activities to the attainment of individual goals, including CIE. State IDD systems need to provide more explicit guidance and monitoring regarding the types of classes, training, or skill building activities that individuals are engaged in, especially when these activities are requested to help them get a job or a different job. Without a layer of quality assurance and direct connection to individualized employment goals, there is no way to determine if these activities are correctly matched to the individual's career goals and aspirations.

Support for providers to transform from day programs and workshops to CIE. Policy efforts need to continue to address the implementation of Employment First and Medicaid Home and Community-Based Services Waiver requirements. Incremental progress has been made in reducing the reliance on legacy services to provide supervision and training for people with IDD. To continue the long-term system change work that has occurred over the last 20 years, systems must fully address the factors that keep individuals with IDD in day programs and workshops, even when they say they want to work or would like a better job that reflects their individual preferences and skills.

REFERENCES

Center on Youth Voice, Youth Choice. (n.d.). https://youth-voice.org/

DuBois, L. A., Bradley, V., & Isvan, N. (2024). An observational investigation of unemployment, underemployment, and competitive integrated employment of people with intellectual and developmental disabilities in 2021–2022. *Disability and Health Journal*, 101620. https://doi.org/10.1016/j.dhjo.2024.101620

Federal Registrar. (2022). Applications for New Awards; Disability Innovation Fund-Subminimum Wage to Competitive Integrated Employment Innovative Model Demonstration Project. https://www.federalregister.gov/documents/2022/03/21/2022-05974/applications-for-new-awards-disability-innovation-fund-subminimum-wage-to-competitive-integrated

Friedman, C., & Nye-Lengerman, K. (2018). Exploring the role of prevocational services for people with intellectual and developmental disabilities in Medicaid HCBS waivers. *Journal of Vocational Rehabilitation, 49*(1), 127–138. https://doi.org/10.3233/JVR-180959

Hall, A. C., Butterworth, J., Winsor, J., Kramer, J., Nye-Lengerman, K., & Timmons, J. (2018).Building an evidence-based, holistic approach to advancing integrated employment. *Research and Practice for Persons with Severe Disabilities, 43*(3), 207–218. https://doi.org/10.1177/1540796918787503

Hoff, D. (2023). *Employment First resource list. State Employment Leadership Network working document.* University of Massachusetts Boston, Institute for Community Inclusion. https://static.prod01.ue1.p.pcomm.net/umass/content/Employment%20first%20resource%20list%20June%202023.pdf

Kiernan, W. E., Hoff, D., Freeze, S. & Mank, D. M. (2011). Employment First: A beginning not an end. *Intellectual and Developmental Disabilities, 49*(4), 300–304. https://doi.org/10.1352/1934-9556-49.4.300

Moore R, Friedman M. (2017) The role of informed choice in advancing competitive integrated employment. *Journal of Vocational Rehabilitation, 46*(2): 245–264. doi:10.3233/JVR-160860

National Association of Councils on Developmental Disabilities. (2011). *The time is now: Embracing Employment First.* https://www.akleg.gov/basis/get_documents.asp?session=28&docid=16672

National Governors Association. (2024). Aligning the Workforce System and Economic Growth: Best Practices from State WIOA Planning. https://www.nga.org/publications/aligning-the-workforce-system-and-economic-growth-best-practices-from-state-wioa-planning/

Nord, D., Luecking, R., Mank, D., Kiernan, W., & Wray, C. (2013). The state of the science of employment and economic self-sufficiency for people with intellectual and developmental disabilities. *Intellectual and Developmental Disabilities, 51*, 376–384.

Nord, D., Barkoff, A., Butterworth, J., Carlson, D., Cimera, R., Fabian, E., Grossi, T., Hall, A., Lucus, J., Nye-Lengerman, K., Strobel Gower, W., Tyree, M., Von Schrader, S., & Wohl, A. (2015). Employment and economic self-sufficiency: 2015 national goals for research, policy and practice. *Inclusion, 3*(4), 227–232. https://doi.org/10.1352/2326-6988-3.4.227

Nord, D., Butterworth, J., Carlson, D., Grossi, T., Hall, A., & Nye-Lengerman, K. (2016). Employment of people with IDD: What do we know and where are we going? In Critical Issues in Intellectual and Developmental Disabilities: Research, Practice and Policy, (pp. 71–88). American Association on Intellectual and Developmental Disabilities.

Office of Developmental Programs Pennsylvania Department of Human Services. (2023). Selective Contracting Residential and Supports Coordination Services Concept Paper. https://www.paproviders.org/wp-content/uploads/2023/05/Selective-Contracting-Program-Concept-Document-May-2023.pdf

Social Security Administration. (n.d.). Substantial Gainful Activity. https://www.ssa.gov/oact/cola/sga.html

Winsor, J., Shepard, J., Zalewska, A., Domin, D., Migliore, A., Wedeking, R., White, A. & Butterworth, J. (2025). *State Data: The national report on employment services and outcomes through 2022.* University of Massachusetts Boston, Institute for Community Inclusion.

Zalewska, A., Winsor, J., & Butterworth, J. (2023). Intellectual and developmental disabilities agencies' employment and day services (1988–2021). *Data Note Plus 87.* University of Massachusetts Boston, Institute for Community Inclusion. https://www.thinkwork.org/sites/default/files/files/DN_87_R.pdf

Funding

This NCI Data Brief was collaborative developed by staff at the Human Services Research Institute and the Institute for Community Inclusion, University of Massachusetts Boston. This work was supported with funds from the Access to Integrated Employment, a project of ThinkWork at the Institute for Community Inclusion, University of Massachusetts Boston with the support of the Administration on Intellectual and Developmental Disabilities, U.S. Department of Health and Human Services under cooperative agreement #90DNPA0007. The opinions contained in this manuscript are those of the grantee and do not necessarily reflect those of the funders.

Suggested Citation

DuBois, L., Winsor, J., Hiersteiner, D, & Shepard, J. (2026). Working in the Community Update 4: The Status and Outcomes of People with Intellectual and Developmental Disabilities in Integrated Employment. University of Massachusetts Boston, Institute for Community Inclusion.

For More Information

Dorothy Hiersteiner
National Core Indicators Co-Director, Human Services Research Institute
dhiersteiner@hsri.org

Jean Winsor
Access to Integrated Employment Principal Investigator
Institute for Community Inclusion, UMass Boston
jean.winsor@umb.edu

The authors would like to thank Laura Vegas and Wesley Anderson from the National Association of State Directors of Developmental Disabilities Services for their review and input.

For more information on the Access to Integrated Employment Project, visit www.thinkwork.org/aie