I have a lot of experiences I could share about relationships, their impact, and the physical, emotional, and mental toll that turnover causes on the lives of people we support. Talking with others though I realized that people don't always understand what it is like to live on a DSP wage and why people leave our field. Just over 10 years ago I was an assistant manager in a group home in Salem, the town I grew up in, and where my family has lived for 4 generations. As an assistant manager I made a bit over minimum wage. We had two incomes, our rent was just under \$500 a month. We had my wife's student loan debt, we drove a car that leaked a quart of oil between fill ups, and worked other people's gardens and foraged from local parks in order to have access to high quality fresh food since we couldn't afford it at the store; we survived but times were really tough. When my wife was pregnant with our first kid we hadn't yet qualified for public assistance, and didn't know how to access it. Because of this we drowned in medical debt for a couple years, and my health experienced a decline from the stress. We came to the brink of losing our housing and our transportation a few times during those years and even ended up in court due to medical debt. Later, when that leaky car died we spent our savings on a vehicle with no idea how we'd survive. I'll be honest, when I felt like I was struggling to survive, the work I did with the people I supported suffered. I was not a shining example of a DSP..... I reluctantly looked outside this field, looking at manufacturing or driving truck. Jobs where my friends and family made double what I did, with no experience, less responsibility and less hours. I moved up out of providing supports and into management mostly as a way to survive financially in this field, and worried if the staff that replaced me would be as good, or care as much.

Since my time doing DSP work, there have been some major strides that the legislature has taken. We've received some very appreciated funding increases tied to wages and benefits. but the cost of living, and especially housing has gone up. The moldy damp apartment I paid less than \$500 for had almost doubled in price when we could no longer afford to live there, and that was 5 years ago. Those great strides have largely just allowed providers to maintain a pay and benefit level that hasn't really improved the lives of DSPs, but rather maintained them where they were, and my story of being a DSP 10 years ago, sadly is still the story I hear from my employees. I've had staff and co-workers express that they are often one crises away from losing what they have. I've had employees who have needed to use draws, borrowing from their future pay to stave off debt collectors or prevent their family from becoming homeless. Almost every single time my staff are struggling, I have an inkling of what's going on before they approach me because their work suffers. They're absent more, they're more forgetful, the patient caring person doesn't appear as often. In short the care they provide suffers, and we work with people who cannot always afford for their care to suffer. Our rate model for services is already outdated and insufficient, and we're not even funded at the level it lays out. Part of valuing the work that DSPs do, and without worrying about how they will survive. I support the appropriations as outlined, but the reality is they are not enough, and more work is still needed.