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Recueil des instantanés recherches- politiques du RCCDR

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Introductory Note/Remarque préliminaire

CRDCN invites researchers publishing academic articles or producing policy reports that use microdata available through CRDCN to provide one-page snapshots that can be used to communicate their work to a wide audience.

Each CRDCN Research Policy Snapshot Digest, produced twice per year, assembles the individual snapshots prepared in the previous six months, inviting authors to include up to one page of supplementary material to accompany their snapshot.

Le RCCDR invite les chercheurs qui publient des articles universitaires ou produisent des rapports sur les politiques publiques en se servant des microdonnées disponibles par l'intermédiaire du RCCDR à en fournir des synthèses d'une page qui pourront être utilisées pour faire connaître leurs travaux à un large public.

Chaque d'instantanés recherches-politiques du RCCDR, produit deux fois par an, compile les instantanés préparés au cours des six mois précédents en invitant leurs auteurs à ajouter jusqu'à une page de documentation supplémentaire pour les accompagner.

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<http://hdl.handle.net/11375/29518>

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The impacts of the minimum wage on post-secondary enrollment and retention

Diana Alessandrini, Joniada Milla. "The impacts of the minimum wage on post-secondary enrollment and retention."
CRDCN research-policy snapshots. Volume 3 January 2024 <http://hdl.handle.net/11375/29461>

Context

Previous studies have shown that the minimum wage can reduce enrollment at the secondary and post-secondary level. The effects of the minimum wage are more heterogeneous than previously thought and differ by type of post-secondary program. The minimum wage affects enrollment differently in university versus community college. In addition, these impacts vary by students' demographics, socio-economic background, and employment history.

Key finding(s) from the research

Minimum wage hikes are associated with an increase in community college enrollment and a reduction in university enrollment.

Population(s) studied: Ages 18-45 with at least a high-school diploma (or GED equivalent), excludes residents of Quebec

Research dataset(s) used: Survey of Labour and Income Dynamics (SLID) 1993-2011

Policy implications for this research

The results of this paper shed new light on the unintended effects of the minimum wage policy on educational attainment and human capital formation. We find that recent high-school graduates and individuals from low socioeconomic backgrounds are less likely to study in university when the minimum wage rises. However, mature students are more likely to attend community college and acquire occupation-specific skills following a minimum wage hike. Hence, increasing the minimum wage likely generates a multitude of effects, which do not always go in the same direction. Overall, these findings provide insights to policymakers on the effects of minimum wage policy on higher education attainment and have implications for policy decisions.

Policy area(s) this research can inform: Education, training and learning; Government

Read the full article

Alessandrini, D. & Milla, J. (2023). "Minimum Wage Effects on Human Capital Accumulation: Evidence from Canadian Data." *Journal of Human Capital*, <https://doi.org/10.1086/728084>

Allied health professionals-to-population ratio 15 times higher in urban centres than in remote communities

Neeru Gupta. "Allied health professionals-to-population ratio 15 times higher in urban centres than in remote communities."
CRDCN research-policy snapshots. Volume 3 January 2024 <http://hdl.handle.net/11375/29466>

Context

Health workforces around the world are characterized with geographic maldistribution, often leading to inequalities in rural health outcomes. Few rural health workforce studies focus on allied health professionals, include urban comparators, integrate gender considerations, or measure rural diversity. While pharmacists residing in more rural and remote communities earned 9% more than those in core urban centres, relative remoteness contributed little to wage differentials among dentists, physiotherapists and occupational therapists, or other allied health professionals (AHPs) in therapy and assessment. Women earned significantly less than men in dentistry, pharmacy, and physical or occupational therapy, after adjusting for remoteness and other characteristics.

Key finding(s) from the research

This national observational study found that the density of AHPs was 15 times higher in more urbanized and accessible parts of Canada in 2016 compared with the most rural and remote areas, a pattern which had changed little since 2006.

Population(s) studied: Allied health professionals in Canada

Research dataset(s) used: 2016 Canadian Population Census, 2006 Canadian Population Census, Index of Remoteness

Policy implications for this research

Monetary incentives are frequently raised as a policy option to bolster recruitment of healthcare practitioners to rural and underserved communities; however, this investigation did not find consistent wage disparities by relative remoteness as characterizing allied health professions in Canada. The evidence base to support financial incentives to AHPs to reduce perceived opportunity costs associated with working and living in rural and underserved areas remains limited.

Policy area(s) this research can inform: Health; Labour; Population and demography

Read the full article

Gupta, N., Gulliver, A. & Singh, P. (2023). "Relative remoteness and wage differentials in the Canadian allied health professional workforce." *Rural and Remote Health*, 23:7882. <https://doi.org/10.22605/RRH7882>

Providing more money to low-income families through the Canada Child Benefit reduces the risk of food insecurity

Tim Li. "Providing more money to low-income families through the Canada Child Benefit reduces the risk of food insecurity."
CRDCN research-policy snapshots. Volume 3 January 2024 <http://hdl.handle.net/11375/29462>

Context

The Canada Child Benefit (CCB) provides up to \$1,068 more annually for families with children under 6, compared to those with older children. The researchers matched CCB-receiving families with and without children under 6 across a wide suite of household characteristics to determine the impact of the additional benefit supplement on household food insecurity, the inadequate or insecure access to food due to financial constraints. Identifying the effect of the more generous child benefit for younger children contributes to a larger body of evidence showing that policy interventions reduce food insecurity when they improve the financial circumstances of low-income households.

Key finding(s) from the research

The additional money provided by the CCB to families with children under 6 years old reduced their probability of food insecurity compared to similar CCB-receiving families with children over the age of 6.

Population(s) studied: Households receiving Canada Child Benefit with children aged <18 years

Research dataset(s) used: Canadian Income Survey 2018–2020

Policy implications for this research

The findings from this study demonstrate that raising the size of the CCB for low-income families would reduce their risk of food insecurity. The federal government could contribute to addressing this serious problem by making the benefit amounts for low-income households larger and equal irrespective of the children's ages. Since almost all provinces and territories also have their own child benefits, they can also implement targeted increases to reduce food insecurity.

Policy area(s) this research can inform: Children and youth; Families, households and marital status; Government; Health; Income, pensions, spending and wealth

Read the full article

Men, F., St-Germain, A. A. F., Ross, K., Remtulla, R., & Tarasuk, V. (2023). "Effect of Canada Child Benefit on Food Insecurity: A Propensity Score– Matched Analysis." *American Journal of Preventive Medicine*, 64(6), 844-852. <https://doi.org/10.1016/j.amepre.2023.01.027>

Health of caregiver-employees in Canada: Determining the value of caregiver-friendly workplace policies and social support

Allison Williams, Li Wang, Peter Kitchen. "Health of caregiver-employees in Canada: Determining the value of caregiver-friendly workplace policies and social support." *CRDCN research-policy snapshots*. Volume 3 January 2024 <http://hdl.handle.net/11375/29463>

Context

Caregiver-employees are working full-time in the labor market while also providing informal/family care to adults. This study provides evidence for the value of carer-friendly workplace policies in supporting caregiver-employees (CEs) in their paid work. Carer-friendly workplace policies (CFWPs) were found to support CEs physical health and it can be inferred that CFWPs thereby enable CEs to sustain their dual roles. CFWPs were found to be negatively associated with CE's unfavorable physical health. CFWPs assist CEs in managing the two demanding roles of unpaid care work and employment.

Key finding(s) from the research

When investigating the impact of various employment characteristics on the health of Canadian CEs, who are working full-time in the labor market while also providing informal/family care to adults, the findings provide evidence for the value of CFWPs in supporting CEs to best manage both roles.

Population(s) studied: CEs in Canada

Research dataset(s) used: Canadian GSS cycle 2012 Master File

Policy implications for this research

Carer-friendly workplace policies are needed in all workplaces to best support the health of carer-employees. Guidelines to create carer-friendly workplaces are available through complimentary download at <https://ghw.mcmaster.ca/tools-resources/>. These include the [CSA Standard B701-17 Carer-inclusive and accommodating organizations](#) and [Guide](#).

Policy area(s) this research can inform: Business and consumer services and culture; Families, households and marital status; Government; Health; Income, pensions, spending and wealth; Labour; Population and demography; Seniors and aging; Society and community

Read the full article

Wang, L., Williams, A. & Kitchen, P. (2018). "Health of caregiver-employees in Canada: Determining the value of caregiver-friendly workplace policies and social support." *International Journal of Workplace Health Management*, 11(6), 382-394. <https://doi.org/10.1108/IJWHM-04-2018-0043>

The Role of Carer-Friendly Workplace Policies (CFWP) and Social Support in Relation to the Mental Health of Carer-Employees (CEs)

Allison Williams, Li Wang, Joy Yang. "The Role of Carer-Friendly Workplace Policies (CFWP) and Social Support in Relation to the Mental Health of Carer-Employees (CEs)." *CRDCN research-policy snapshots*. Volume 3 January 2024 <http://hdl.handle.net/11375/29464>

Context

Carer-friendly workplace policies (CFWPs) have a significant moderate effect on the association between work interferences and caregiver-employees' (CEs) mental health. CEs who worked in a workplace that promote CFWPs without negative impacts on their career were less likely to experience appetite loss, trouble sleeping, mental health symptoms, and feelings of anxiety when turning down a job offer or promotion. Further, social support was associated with an increased chance of mental health symptoms, apart from help from the community. The odds of experiencing feelings of isolation decreased by 35% when CEs received help from the community. The odds of feelings depressed decreased by 35% when CEs had a flexible working schedule. Due to caregiving responsibilities, 44.7% of CEs reported feelings of anxiousness, and 42.4% reported feeling tired.

Key finding(s) from the research

The option to work part-time, and a workplace culture characterized by CFWPs taken without negative career impacts, were both negatively associated with CEs physical and mental health symptoms.

Population(s) studied: CEs in Canada

Research dataset(s) used: 2018 Canadian General Social Survey on Caregiving and Care Receiving (GSS)

Policy implications for this research

CFWPs need to be recognized as central to equity, diversity and inclusivity practices in all workplaces, irrespective of size or sector. Complimentary CFWP guidelines are available via a [CSA Standard](#) and [Guide](#). As the number of CEs increase, the need for effective and [wide-ranging CFWPs](#) is important for CE's mental health.

Policy area(s) this research can inform: Business and consumer services and culture; Education, training and learning; Families, households and marital status; Government; Health; Income, pensions, spending and wealth; Labour; Population and demography; Seniors and aging; Society and community

Read the full article

Yang, J., Wang, L. & Williams A. (2023). "The Role of Carer-Friendly Workplace Policies and Social Support in Relation to the Mental Health of Carer-Employees." *Health & Social Care in the Community*. <https://doi.org/10.1155/2023/5749542>