

Can Specialized Programming Help Newcomer Women Cope with COVID-19?



ABSTRACT

The Career Pathways for Visible Minority Newcomer Women (CPVMNW) pilot is a project that aims to help visible minority newcomer women in their integration with the Canadian labour market. While it was designed to be offered in-person, service providers had to switch to virtual delivery in response to the COVID-19 pandemic. Using novel survey data, we first summarize the opportunities and challenges of virtual delivery, as well as participants' financial situation, wellbeing, and employment outcomes. Second, exploiting the random assignment of program participation, we report the short-term impacts of the pandemic on program participants' mental health, stress levels, and employment outcomes. We find that the program significantly improves the mental health of participants and increases their confidence in finding work in the near future. Unsurprisingly, with weak labour markets and a short timeframe, we find that the program had no impact on the likelihood that participants were employed. However, the program did improve participant expectations of the likelihood of finding employment within the next three and six months. Future research will analyse the CPVMNW follow-up surveys and investigate whether the positive impacts on mental health and employment outlook translate into increased employment as well as improvements in other employment outcomes such as hours of work, job satisfaction, and earnings.

INTRODUCTION

The Career Pathways for Visible Minority Newcomer Women (CPVMNW) pilot project was designed in 2018/2019 to implement and evaluate four models, which aim to address the needs of visible minority newcomer women in their integration with the Canadian labour market. The pilot project involves eight service provider organizations implementing variations of the four models. The overall goal of each model is to support visible minority newcomer women in their successful transition to the labour market. The models differ by the target population (e.g., different education/language levels) and by the activities involved. Initially, all four models were intended to be offered in-person.

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The eight partner service provider organizations responded quickly to innovate their in-person services and pivoted to virtual delivery as a response to COVID-19 in mid-March 2020. With support from IRCC, the Social Research and Demonstration Corporation (SRDC) developed and implemented a COVID-19 sub-study to learn more about the impacts of the pandemic on the project and, more specifically, on the research program participants.

In this briefing note, we summarize the opportunities and challenges of virtual service delivery from the perspective of the research participants: program group participants who received CPVMNW services as well as those in the comparison groups who were offered regular services from the service providers. Moreover, we investigate the short-term impacts of the program on participants' mental health, stress levels, and employment outcomes during the pandemic.

SAMPLE & METHODOLOGY

The sample consists of CPVMNW participants who completed a short COVID-19 survey introduced in June 2020. All eligible¹ participants received an invitation, by email, to complete the survey. These invitations were sent in five batches (from early June to mid-September 2020), according to the date the participants completed the CPVMNW baseline survey.

The analysis of the survey data is comprised of two main components: an exploratory analysis and the impact analysis. For the exploratory analysis, we report descriptive statistics of the key outcomes of interest (opportunities and challenges of virtual service delivery) by participant characteristics of interest (marital status, number of children, and network size).

The impact analysis uses the data from participants at the service provider organizations with a randomized control trial design for the CPVMNW pilot project². Given that program participation for these participants was randomly assigned, the average effect of the program can be rigorously estimated by comparing the outcomes of interest between the program and comparison group members³. The outcomes of interest reported in this summary are self-reported mental health, stress levels, and employment outcomes.

¹ Participants who were due or overdue to complete any CPVMNW survey were not invited to participate in the COVID-19 survey.

² Achêv (model 2), Immigrant Services Association of Nova Scotia (model 2), Opportunities for Employment Inc. (model 1), la Société Économique de l'Ontario (model 3), and World Skills Employment Centre (models 2 & 3).

³ We estimate the following regression specification for outcome Y of person i : $Y_i = \theta \cdot \text{PROGRAM}_i + \gamma \cdot \text{SPO_MODEL}_i + \varepsilon_i$, where PROGRAM is a dummy variable that equals one for program group participants and zero for comparison group participants, SPO_MODEL is a vector of dummy variables for each SPO and model and ε is the idiosyncratic error term. θ and γ are parameters to be estimated with θ estimating the average effect of the CPVMNW program. Unless otherwise noted, statistical significance refers to significance at a 5% level.

RESULTS

THE SAMPLE

A total of 602 research participants answered the COVID-19 survey: 392 (65%) in the program group who were offered CPVMNW services and 210 (35%) in the comparison group. Most of the survey respondents (80%) are married. 41% of the respondents do not have any children under the age of 18⁴, 28% have one child, and 32% have two or more children. The average age among respondents is 36 years and they had been in Canada for approximately 19 months, on average, before they joined the research project. Survey respondents are also highly educated: 37% have a university bachelor's degree, 51% have a university master's degree or more, 7% have another type of diploma and 6% have a college education or less.

Among program group survey respondents, the majority (79%) participated in the program remotely, approximately 12% indicated that the program was delivered in-person, and the remaining 9% indicated they participated in the program both in-person and remotely.

WHAT PARTICIPANTS LIKED ABOUT REMOTE SERVICE DELIVERY

The program group respondents who joined the program remotely were asked what aspects of this remote delivery they enjoyed. The exploratory analysis shows that 78% enjoyed participating in the program remotely because it reduced their travel time. Figure 1 also shows that, in addition to enjoying the reduced travel time, 57% of married women appreciated the reduction in costs associated with childcare, food, and transportation etc., while 58% of non-married women simply liked being at home.

CHALLENGES EXPERIENCED WHILE TAKING PART IN THE PROGRAM REMOTELY

Program group respondents who participated in the program remotely shared the challenges that they experienced. 33% of program group participants reported they did not have any challenges in taking part in the program remotely, while the remaining two-thirds faced some difficulty participating in the program remotely. Furthermore, Figure 2 shows that respondents without children at home were more likely to report not having any challenges with remote access (38%) while some (37%) indicated the lack of human or in-person exchange as their primary challenge. On the other hand, participants with children pointed out the difficulty of having a child at home and other distractions in the home as challenges.

⁴ With whom they live.

Figure 1 What Participants Liked about Remote Service Delivery by Marital Status

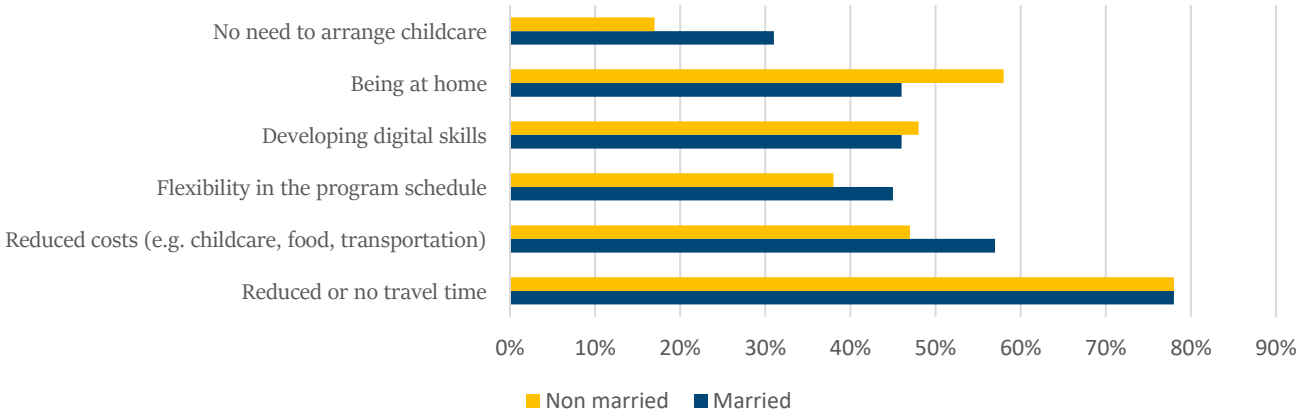
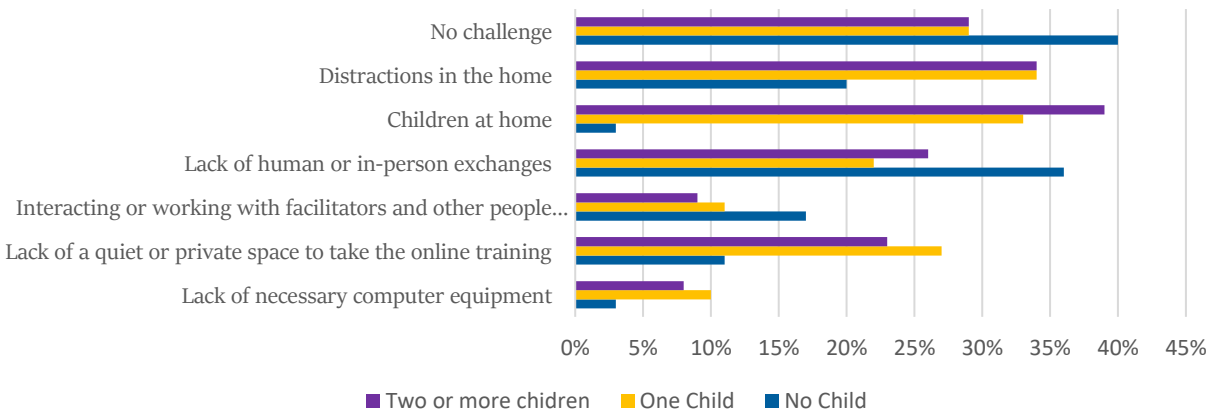


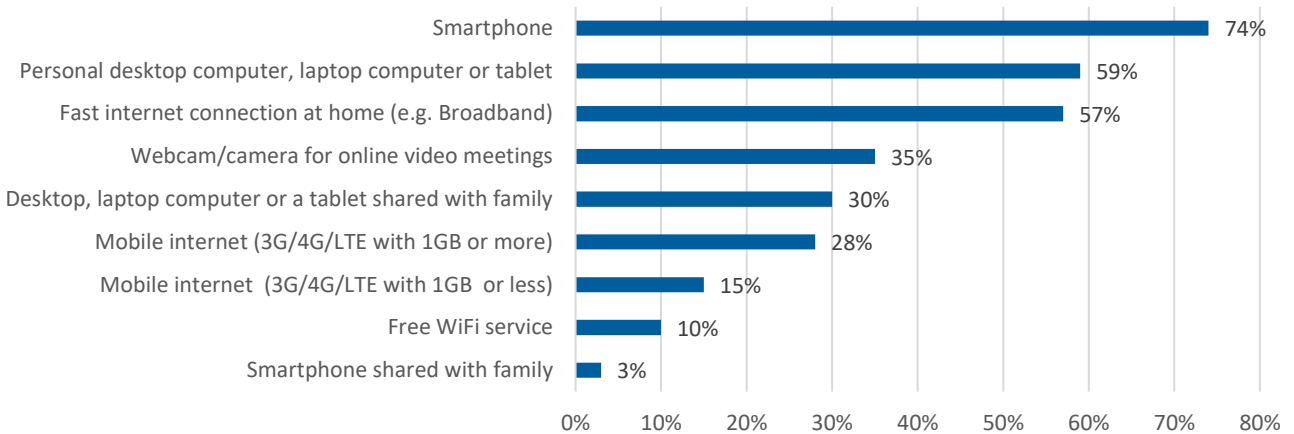
Figure 2 Challenges in Taking Part in the Program Remotely by Number of Children



ACCESS TO EQUIPMENT AND SERVICES

Figure 3 shows that 78% of program group participants reported owning a smartphone, 59% own a computer, while 57% reported having a fast internet connection. When program respondents were asked what equipment and services they needed, 33% wanted a personal computer, 26% reported the need for a fast internet connection, while 21% wanted a personal smartphone.

Figure 3 Access to Equipment and Services



FINANCIAL SITUATION DURING THE COVID-19 PANDEMIC

To understand the financial situation of research participants, all COVID-19 survey respondents were asked to report any COVID-19 benefits they had received as well as the impact of COVID-19 on their financial obligations. Since March 2020, approximately, 49% of the comparison group and 53% of the program group participants did not receive any benefits related to COVID-19. However, the most common COVID-19 related benefit received by research participants was the Canada Emergency Response Benefits (CERB). Moreover, since March 2020, approximately 30% of participants with children under five years old received provincial childcare benefits.

With regards to meeting financial obligations, about 55% of both program and comparison group respondents indicated a major or moderate impact of COVID-19 on their ability to meet their rent or mortgage payment obligations. An analysis by marital status suggests that 27% of couples reported a major impact of COVID-19 on their ability to meet their rent or mortgage payment obligations compared to 41% for non-married respondents. With regards to paying monthly bills, 62% of those without a social network⁵ felt that COVID-19 had a major impact on their ability to pay their monthly bills while

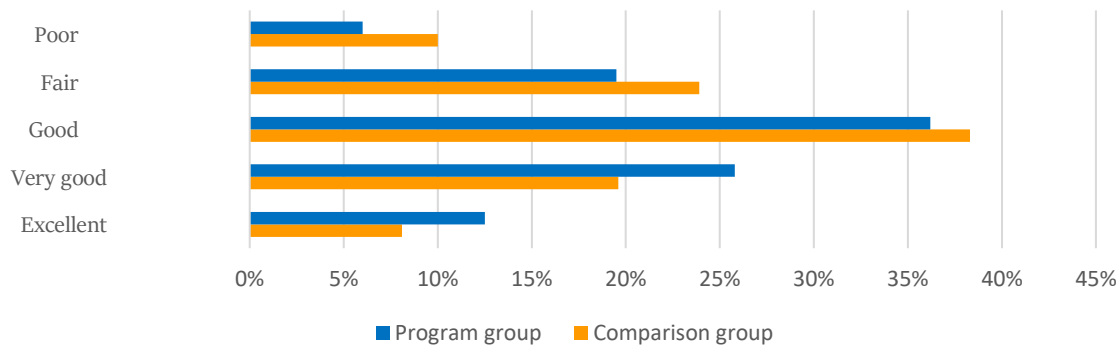
⁵ A social network is defined based on the question “Thinking of all the people (including family, friends, and people you know) who can give you help and support in these areas: help with household activities, specialized advice, emotional support, and help with job or career, in total about how many would that be?”. A respondent is considered as not having a social network if her response to this question is “none” but has some social network if her response is “1-3, 4-6, 7-10 or more than 10”.

this was the case for only approximately 21% of those with some social network. Respondents with a social network are also less likely to report that COVID-19 had a major impact on their ability to pay for groceries and to provide financial help to other family members.

WELLBEING

Both the program group and comparison group were asked about their general mental health. Figure 4 shows the distribution of mental health by program assignment. Most participants in both the program and comparison groups rated their mental health as "good" (38% and 36%, respectively). However, the category with the fewest respondents from the program group is those who rated their mental health as "poor" while the category with the fewest respondents from the comparison group is those who rated their mental health as "excellent", suggesting the programs may have had a beneficial impact on participant mental health. This is investigated further in the impact analysis.

Figure 4 Mental Health of Program and Comparison Groups



The impact analysis identifies the effect of the program on mental health. Using a 5-point Likert scale, we find that the program resulted in a statistically significant average increase of 0.26 in the mental health of participants. This corresponds to an 8.8% improvement in mental health compared to the average mental health level of the comparison group (2.95 on the 1-5 scale). When considering mental health as a dummy variable, our estimates show that the program caused a statistically significant increase of 11.3 percentage points in the probability of reporting very good or excellent mental health.

Survey respondents also reported their level of stress in life. Fifty nine percent of the program group reported lower levels of daily stress compared to only 51% of the comparison group⁶. Using a 5-point

⁶ Fifty-nine percent of the program group and 51% of the comparison group responded that most days were a bit stressful, not very stressful or not at all stressful. The other options were quite a bit stressful and extremely stressful.

Likert scale, we did not find a statistically significant effect of the program on respondents' stress levels. However, the program statistically (at a 10% significance level) increased the probability of being a bit, not very, or not at all stressed by 8 percentage points (compared to being quite a bit or extremely stressed) when we consider stress level as a dummy variable.

EMPLOYMENT

Among survey respondents, 26% of the program group and 23% of the comparison group were employed at the time of the COVID-19 survey, though this difference is not statistically significant in the impact analysis. On average, respondents answered the COVID-19 survey approximately 116 days (just under 4 months) after they joined the research project. Given an average program duration of 33 days and the very weak labour market⁷ at the time of data collection, these employment levels are not surprising.

Given that we find no short-term difference in program and comparison group employment status, we can investigate the impacts of the program on respondents' employment outlook (in three months and in six months)⁸. Figure 5 shows the distribution of whether participants believed that they would find work in the next three months by program assignment. About 23% of the program group strongly agreed that they would find a job in the next three months, compared to only 12% of the comparison group. When asked about their employment outlook for the next six months, 41% of the program group strongly believed they would find a job in the next six months, while only 28% of the comparison group did.

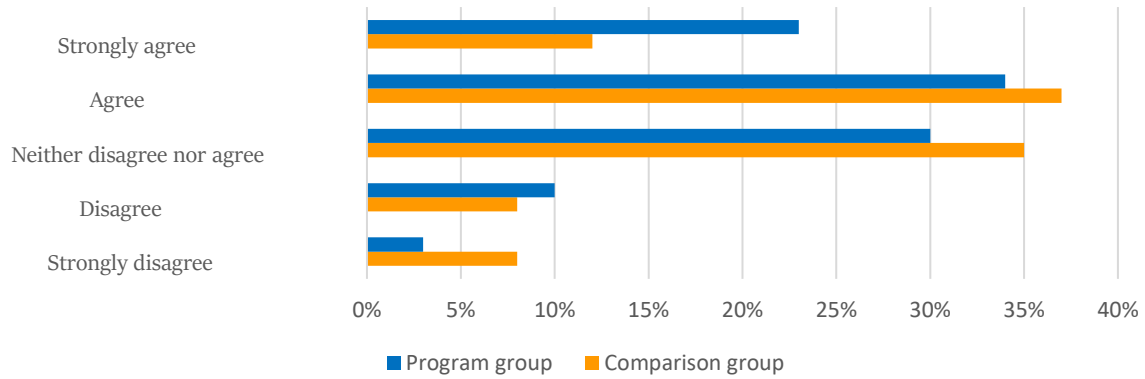
Using a 5-point Likert scale, our impact analysis of employment outlooks shows that the program statistically significantly increased the average employment outlook in the next three months by 0.23. This implies that compared to the comparison group, on average, the program group have 6.6% higher confidence of finding a job in the next three months. We also find that the program resulted in a statistically significant (at a 10% significance level) increase of 0.20 in participants' beliefs that they will find a job in the next six months using a 5-point Likert scale. This translates to a 5.3% average increase in confidence in finding a job in the next six months.⁹

⁷ In addition to respondents being at different points in the program, from June to September 2020, when the data was collected, the Canadian labour market was performing poorly due to the COVID-19 pandemic, with high unemployment rates, weak job creation, and diminished work hours.

⁸ Questions on employment outlook were only asked of those respondents who were not employed at the time of the survey.

⁹ We also investigate the heterogenous effects of the program on mental health, stress, and employment outcomes. The analysis does not show consistent differential impacts by socio-demographic characteristics or by service provider organization. We will investigate heterogenous effects further in the analysis of the first and second follow-up surveys.

Figure 5 Confidence in Finding Work in the Next 3 Months by Program Assignment



NEXT STEPS

At the time of writing, January 2021, the CPVMNW service providers continue to offer virtual specialized programming to visible minority newcomer women and SRDC continues to collect data and to study the implementation of the pilot project and its immediate and intermediate impacts. Upcoming research will analyse the CPVMNW first and second follow-up surveys¹⁰ and investigate whether the positive impacts on stress, mental health, and employment outlooks translate into increased employment for the program group as well as improvements in other employment outcomes such as hours of work, job satisfaction, and earnings.

¹⁰ The first follow-up survey is conducted between 3 and 5 months after a participant joins the research project while the second follow-up survey is conducted 3 months after the first follow-up survey.