Labour / Le Travail

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The Canadian Context

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Volume 67, printemps 2011

URI : https://id.erudit.org/iderudit/lt67rn03

Citer ce document
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Introduction

A new body of literature – mobility studies – argues that mobility is a ubiquitous, normal, ongoing, and patterned aspect of all human societies. It treats mobility as socially produced, embodied, and mediated by class, gender, and ethnicity. This research suggests that mobility is underpinned by ideological meanings and material realities including issues related to social citizenship, as well as inequalities in access to mobility, in conditions of mobility, and in its consequences, all of which vary across situations, social classes, and genders. Employment-related mobility is a pervasive feature of many occupations. In this research note, we are particularly interested in employment-related mobility in the Canadian context. We define employment-related mobility as situations where workers regularly and repeatedly cross municipal, municipal, regional, national, and international borders.


provincial or national boundaries to get to and from their place of employment (sometimes working in multiple or transient worksites as with construction workers and home care workers), and work involving mobile workplaces such as cruise and cargo ships, planes, trains, trucks, and fishing vessels.

Although employment-related mobility has a lengthy history in Canada and globally, the current context of neo-liberal economic restructuring, associated policy changes, and industry rationalization means that for more and more Canadian workers and employers, employment-related mobility is an inherent part of working life.

This paper synthesizes results from existing Canadian and international research on the relationship between intra-national employment-related mobility and the health and well-being of workers, their families, and their communities. The key objectives of this research note are: a) to outline what is known about how employment-related mobility can affect workers’ health and the health of their families and communities; and, b) to identify research opportunities and priorities for future Canadian research on the health consequences of short-term, repetitive intra-national employment-related mobility and employment in mobile workplaces.

The Spectrum of Employment-Related Mobility

There is a broad spectrum of different kinds of employment-related mobility. Temporally, the spectrum includes daily, overnight and prolonged regular, sporadic and sometimes even permanent movement away from one’s usual place of residence, sometimes in association with employment in multiple or mobile work sites. Spatially, the spectrum of employment-related mobility ranges from relatively short commutes to nearby communities to the lengthy distances associated with international migrant work. Employment-related mobility can be a requirement of the job, as in work camp situations


and mobile occupations such as trucking, or an economic necessity linked to limited employment opportunities in home communities caused by a range of factors including resource depletion, industry restructuring, capital mobility (including capital flight) and precarious work. Among workers and their families, a variety of motivations influence decisions to engage in employment-related mobility. For young people, seasonal work away from home might be a necessity given limited employment and training opportunities there, or as a rite of passage into adulthood, or both. For those with dependents, employment-related mobility can help resolve spatial disjunctures between work opportunities, family responsibilities, friendship networks, and leisure activities. It can exacerbate or improve work-life balance issues, and can create new child and elder care challenges by extending care-givers’ time away from home and the distance between home and work. Moving to a rural area can provide growing families with access to more suitable lower-cost housing while they retain their urban jobs, but it may also separate them from social supports (such as grandparents). Whatever the origins of employment-related mobility, it has the potential to positively or negatively affect the physical, mental, emotional, and social health of workers and their family members, including spouses, children, and those in the extended family. Employment-related mobility can enhance community well-being by generating increased resources and opportunities, but it can also generate significant vulnerabilities within home and host communities. The remainder of this research note


describes the search strategy we developed to locate existing research on employment-related mobility and health, summarizes the existing research with a focus on intra-national mobility and Canadian studies and concludes with a discussion of gaps in the existing research and of future research needed to develop a comprehensive understanding of how the various types of employment-related mobility affect the health of individuals, families and communities.

Search Strategy

The literature on employment-related mobility (as we are defining it) can be found across multiple academic disciplines. Researchers employ diverse methods, and approach the problem from multiple, often widely-varying perspectives. For this paper, we conducted our literature search using a combination of formal and informal search methods. An initial formal search was conducted using three academic article indices: Sociological Abstracts, Academic Search Premier, and PubMed. Search terms included mobile worker, migratory worker, circular migration, and internal migration. From this search, we selected research articles in English and French and manually searched relevant citations within these articles. This search strategy revealed little research on intra-national employment-related mobility in Canada. Using the migratory search terms, 77 articles were found, all of which focused on international migrant workers. The mobile search terms resulted in 53 articles, all of which were also international. The circular migration term generated 92 articles, all of which were international in focus. The search using internal migration resulted in 1163 articles. Forty-seven of these focused on Canada, but none of these articles examined short-term, periodic mobility or employment in mobile workplaces. Our formal search found a body of literature on internal migration within Canada, but it tends to focus on inter-provincial migration of international immigrants once they have moved to Canada. There is relatively little research on short-term, repetitive employment-related mobility among Canadians.

In our informal search, we collected resources on an ad hoc basis. Throughout the literature review process, as our attention was brought to various elements of employment-related mobility and health, we also searched a variety of academic databases trying to identify specific useful terms, including commuting, out-migration, boomtown, place attachment, and parent-child attachment. In addition, in June 2009 we held a research team-building workshop on employment-related mobility and health at Memorial University, and from members of the network established at that meeting we received new

citations and suggestions for relevant material. This variety of search methods allowed us to better explore this topic given that the research literature on employment-related mobility can be found in a variety of academic disciplines.

The Wider Context

Employment-related mobility is a pervasive, volatile and multi-faceted aspect of contemporary societies. The United Nations now estimates that there are 200 million international migrants worldwide, nearly double the number from 1985. Many of these individuals have migrated for employment reasons, working temporarily as unskilled or deskilled labourers, in informal sector jobs such as the sex trade, in domestic service or personal care, as trades workers, or as professionals. These workers are also sometimes doubly mobile, migrating to work and then working in mobile workplaces such as in seafaring.

Intra-national employment-related mobility also appears to be on the rise, with growing numbers of workers commuting between municipalities,
counties, states, or provinces. Rural to urban commuting or \textit{rurbanisation} is widespread. Within the European Union (EU), mobility has recently been enhanced by legislation relaxing restrictions on the rights of EU nationals to work in other EU countries.

Existing research indicates that while international mobility was historically male-dominated, it has become increasingly feminized. With changing gender roles in both home and host countries, and a growing demand for workers in the female-dominated informal sectors, such as personal care for the elderly, sex work, and domestic service, more and more women are migrating for work on their own, often from poorer to wealthier countries. Despite the growing number of women engaged in employment-related


mobility, researchers have noted the continuing invisibility of skilled women workers in migration research.\textsuperscript{28}

**The Canadian Context**

Since the 1970s, Canada has been experiencing a period of neo-liberal policy reform designed to encourage labour (and capital) mobility as a key mechanism for promoting growth and prosperity within a larger institutional framework characterized by private property rights, free markets and free trade, as well as reduced state intervention into markets.\textsuperscript{29} One overall result of this approach is that paid work has become increasingly important for the economic survival of Canadians even as economic restructuring has dramatically altered the employment landscape – undermining traditional livelihoods (as in the fishing industry in Atlantic Canada) and opening up opportunities in new geographic locations, often requiring different skills.

In Canada and elsewhere, there is no “single, comprehensive source of data on temporary population movements that captures the full diversity of the space-time dynamics of such moves.”\textsuperscript{30} As in the US, census questions about “usual residence” assume that each person can be uniquely and unambiguously attached to a household where he or she ‘lives and sleeps most of the time.’\textsuperscript{31} While the Canadian census has informed a growing literature on commuting, most of it focuses on daily inter-urban and inter-regional mobility.\textsuperscript{32} Research using other datasets usually looks at inter-provincial mobility\textsuperscript{33}

\textsuperscript{28} Kofman et al., *Gender and International Migration in Europe*.
\textsuperscript{29} Harvey, *A Brief History of Neoliberalism*.
with an eye to permanent relocation in response to regional labour market differences, rather than temporary migration or commuting for the purpose of employment.

We recently developed an analysis of Canadian census data using a new system of employment-related mobility categories. Based on that analysis, in Canada in 2006, nearly 32 per cent of Canadians worked outside of their census subdivision, 1.4 per cent worked in a different province or country, and slightly more than 10 per cent had no fixed workplace address (many of these individuals work outside their communities or provinces). Thus, according to the 2006 census, up to 44 per cent of Canadians crossed at least one jurisdictional boundary on their way to and from work. In some provinces and industrial sectors, the proportions working outside of the province or at no fixed workplace was substantially higher, up to 2.7 per cent out of province/out of country for Newfoundland and Labrador in 2006, and 49.2 per cent of those employed in the construction sector reported no fixed workplace in the 2001 census. As is the case in other countries, numerous residents of Canada travelled as part of their work on a more intermittent basis, to attend events such as meetings and conferences; in addition, approximately 200,000 international migrant workers, not tracked in the census, were employed in Canada in 2007.

Within Canada, the flow of migratory workers has historically been from rural to urban areas and from provinces that received federal equalization payments, particularly Atlantic Canada, to those that did not, such as Ontario and Alberta. Despite evidence that permanent or semi-permanent intra-national migration may have decreased somewhat in recent years, this westward, often rural to urban, flow of workers continues today. In addition, due in part to improved transportation and communications, patterns of

34. Deatra Walsh, Sandra Cooke, and Barbara Neis, "On the Move: Using the Canadian Census to Profile Employment-Related Mobility," The Canadian Geographer, (Submitted).
employment-related mobility are changing. In Atlantic Canada, for example, increasing numbers of workers are engaged in long-distance travel to work on a daily, weekly, monthly, or seasonal basis.  

Historically, not all employment-related mobility has been rural, east to west or north to south. As company towns were developed to extract resources, many workers and their families moved into rural and remote environments with prospectors and geologists starting the migration, followed by construction, building trades and transportation workers, and then by the mine, mill, forestry and other workers and their families. This pattern continues today, although in most cases company towns housing families and other infrastructure have been replaced by fly-in/fly-out operations and associated work camps.

In addition to the above, many types of work in Canada and elsewhere have mobility built into them as with the mobile workplaces associated with fishing, shipping and transportation; the transient worksites associated with much construction, oil and gas sector and temp agency work; professional occupations, such as teaching and health care, where workers commute to remote regions to work for periods of time for higher pay; as well as travelling executives and businesspeople often employed by large national and multi-national companies.

Employment-Related Mobility and Health

There is a substantial body of literature on international, long-term or permanent migration and health, but the literature on shorter-term employment-related mobility and health is relatively limited in comparison. In this section, we draw on the literature on international migration and health, commuting and health, out-migration and health, and other relevant areas, to identify some of the potential key health implications of intra-national mobility including in mobile and transient workplaces such as trucking and work camps. We cluster the results of our review into sections on the following health areas: (1) physical health; (2) mental and emotional health; (3) social health; and, (4) community well-being.

Employment-Related Mobility and Physical Health

Literature on the links between migration and mobility and physical health, indicates that cardio-vascular health, sexually transmitted diseases (STDs),


transportation injuries and fatalities, and occupational injury and illness may be important health concerns for Canadian mobile workers and their families.

**a. Cardiovascular health**

Research on permanent or semi-permanent international migration and poor cardiovascular health is not consistent. Many studies compare the cardiovascular health of international migrant and native populations within the same country, and they have demonstrated that migrant populations tend to have higher blood pressure levels than native populations. In cases where workers migrate to regions with a lower incidence of cardio-vascular problems, however, the situation appears to be reversed. A recent study showed that Finnish twins who had migrated to Sweden, which has a lower incidence of coronary heart disease, presented a reduced prevalence of heart disease compared to their co-twins who remained in Finland. Gender may be an important factor here. In a second study of Finnish labour migrants in Sweden, women and men showed opposite tendencies: female migrants reported poorer cardiovascular health than their counterparts in Finland while male migrants reported better health. In Denmark, male Inuit migrants were shown to have significantly higher cardiovascular risk factors than their Greenland counterparts, but the relationship was not as clear for women migrants from the same population. The research therefore suggests that any link between migration and poor cardiovascular health may be highly dependent not only on gender but also the conditions within the host community including the food culture and supports for migrants.

**b. Sexually Transmitted Diseases**

Studies linking migration with the spread of sexually transmitted infectious diseases such as hepatitis C and the Human Immunodeficiency Virus (HIV) also tend to come from the international migration research. Much

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46. For example, see Christophe Béné and Sonja Merten, “Women and Fish-for-Sex: Transactional Sex, HIV/AIDS and Gender in African Fisheries,” *World Development*, 36 (2008), 875–899; Monique Brammeier, Joan M. Chow, Michael C. Samuel, Kurt C. Organista, Jamie
of the research on migrant workers and sexually transmitted diseases has been conducted in China, a country with an immense, temporary and vulnerable intra-national migrant worker population. These studies have shown that temporary migrants are particularly vulnerable to risky sexual behaviour that transmits STDs and HIV.47 This pattern has also been noted in many other parts of the world, including other parts of Asia, Africa, and North America.48 This suggests that STDs may be an important health concern relevant to the context of intra-national Canadian mobility as well.

c. Commuting Injuries and Fatalities

Literature on frequent and long-distance commuting suggests that employment-related mobility may enhance the risk of commuting hazards, including injury and fatality caused by driving or flying during bad weather.49


Long-distance daily commuting is also linked to shortened sleep hours, which in turn is associated with higher morbidity and mortality.\(^{50}\) For those working night shifts, commuting may be particularly hazardous. An Australian study by Dorrian \textit{et al.}\(^{51}\) found that nurses who worked night shifts were more likely to report drowsiness and near-accidents during their commute. In Canada, concerns have recently been raised about the role that pilot fatigue can play in airplane crashes, particularly since pilots report feeling pressure to work beyond the regulatory guidelines for consecutive flying hours. In addition, unlike in Europe, Canadian duty times do not vary depending on whether pilots start work at night or in the day, despite concerns about how the disruption of circadian rhythms affects pilots’ flight performance.\(^{52}\) Studies show that pilots have poorer response times and make more flying errors when sleep-deprived.\(^{53}\)

Air pollution caused by petroleum-powered vehicles may also be a hazard to the health of mobile workers who travel frequently in automobiles and trucks. Research has shown that chronic exposure to air pollution from traffic is associated with numerous health impacts including an overall risk of earlier

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51. Dorrian \textit{et al.}, “Sleep and Errors in a Group of Australian Hospital Nurses at Work and During the Commute,” 605–613.


death; respiratory problems such as asthma, cardio-pulmonary problems, and pre-term birth.

In many cases, workers engaged in frequent work-related travel use a variety of mobile devices while driving, particularly mobile phones. Although we were unable to find studies directly examining the use of such devices by mobile workers, a large body of research links mobile phone use while driving to higher rates of automobile accidents. Such workers may include travelling businesspeople as well as health professionals, trades workers, and truckers, and workers in the mining industry who frequently communicate by mobile phone while travelling considerable distances between mines.

$d$. Occupational Injuries and Illness

In some cases, and for certain types of employment-related mobility, the literature suggests that mobile workers may enjoy some protection from certain health and safety risks compared to stationary workers. For example, Glass and Kromhout et al. demonstrated that itinerant workers who travelled between


multiple job sites suffered less chemical exposure than workers working at single job sites.\(^6\)

Much of the literature related to employment-related mobility and occupational health and safety deals with international migration, documenting an increased risk of occupational injury and illness for those who migrate internationally for work,\(^6\) particularly those who have newly arrived in a host country,\(^6\) and for those with limited rights and legal protections.\(^6\) Such workers may also have difficulty accessing workers’ compensation benefits in their host country.\(^6\)

There is a considerable body of literature on the exposure of international migrant workers to chemicals that can cause occupational illness, including pesticides,\(^6\) and also to hazards like asbestos.\(^6\) In Mexico, seasonally migrant Indigenous workers employed in agriculture are often forced to take their children with them into the fields where they often become child labourers and

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are potentially exposed to pesticides and other hazards.\textsuperscript{67} Securing treatment for occupational illness and access to benefits may be challenging for migrant workers who develop occupational illnesses after returning to their homelands, and particularly so for those without documentation.\textsuperscript{68} Employment-related mobility can also complicate the diagnosis, treatment, and recording of occupational illness. For example, efforts to establish a registry of former miners at Baie Verte, Newfoundland have been challenged by the fact that many of the miners migrated to mines in other parts of Canada during the operation of the mine and afterwards.\textsuperscript{69}

Employment-related mobility, both international and intra-national, as well as that involving mobile workplaces, also tends to involve precarious work.\textsuperscript{70} Precarious work includes work that is temporary, casual or on-call, that involves multiple employers, entails shift-work or other non-standard work schedules, or lacks access to benefits or employment rights and job security, often with low wages.\textsuperscript{71} Prolonged commutes over several weeks or months are generally associated with heightened worker willingness and employer pressure to work non-standard work hours. Barton reports that in remote worksites in northern British Columbia, Canada, companies “require workers to leave their communities and work 12 hour shifts and 42 days straight before having 14 days off.”\textsuperscript{72} These types of schedules have been associated with many physical and mental health problems,\textsuperscript{73} including stress and fatigue, which

\begin{itemize}
\item \textsuperscript{67} Barndt, \textit{Women Working the NAFTA Food Chain}.
\item \textsuperscript{68} Braun and Kisting, “Asbestos-Related Disease in South Africa,” 1386–1396.
\item \textsuperscript{69} Stephen Bornstein, personal communication to authors, 2010.
\item \textsuperscript{70} Marlea Clarke, Wayne Lewchuk, Alice de Wolff, and Andy King, “‘This Just Isn’t Sustainable’: Precarious Employment, Stress and Workers’ Health,” \textit{Journal of Law and Psychiatry}, 30 (2007), 311–326; Alice de Wolff, \textit{Employment Insecurity and Health. Literature Review and Environmental Scan}, (Toronto 2008).
\end{itemize}
may in turn lead to higher occupational safety risks. Employment-related mobility – in itself, but also because it contributes to the increase in precarious employment – may also undermine the efficacy of policies designed to protect workers, ensure safe working conditions, and provide workers’ compensation for occupational injury.

Employment-Related Mobility and Mental and Emotional Health

In this section, we examine potential mental and emotional health consequences of employment-related mobility in the context of intra-national Canadian mobility: stress and burnout, depression, substance abuse and other addictions, children’s emotional and mental health, and potential positive impacts.

a. Stress and Burnout

Stress and burnout have been identified as health risks among workers in multiple mobile occupations including flight attendants, offshore oil workers,


truckers,\textsuperscript{78} seafarers,\textsuperscript{79} urban transit workers,\textsuperscript{80} and travelling businesspeople.\textsuperscript{81} Gilgen et al. argue that “[b]oth forced and voluntary migration can be stressful and damaging to health particularly when associated with traumatising events or with unfavourable living conditions in different settings.”\textsuperscript{82} A study of sex trade workers in Halifax, Nova Scotia found that it can be stressful for some sex trade workers to leave their home community to travel to another city or province for work particularly if they have children or if they are attempting to hide the reasons for their mobility from family and friends.\textsuperscript{83} Dimberg et al. looked at the frequency of mental health insurance claims among spouses of frequent business travellers, and found that among both male and female spouses, mental health claims were about 16\% higher than among spouses of non-travellers, and stress-related psychological disorder rates were triple those of non-traveller spouses.\textsuperscript{84}

The isolation and separation from family and community linked to many forms of employment-related mobility appear to be associated with elevated stress levels among many mobile workers and their families.\textsuperscript{85} When families


\textsuperscript{79} David Walters, “Managing Psychosocial Risks at Sea: Globalisation, Precarious Work, and a Failure of Regulation?,” (paper presented at the Third INCO International Conference on Psychosocial Factors at Work, Québec City, QC, 1–4 September 2008).


\textsuperscript{84} Dimberg et al., “Mental Health Insurance Claims Among Spouses of Frequent Business Travellers,” 175–181.

accompany mobile workers to their employment destination, the link between health and place attachment may be an important factor in their experience of stress. The place that a person considers to be home tends to be an important part of one’s identity, and because people form emotional links to a particular site, this “place attachment” has consequences for other aspects of a person’s life. Research from the United Kingdom indicates that most people who move from a rural area to an urban area experience stress in adjusting to the move, at least initially. Conditions of work and the dynamics of work camps and host communities may constrain the development of positive attachments to temporary residences. The potential negative consequences in terms of stress for families are likely to be exacerbated when employment-related mobility is to a site lacking affordable housing, good schools, health care and employment opportunities for women, making it difficult for families to stay together and stressful for those who try to relocate even temporarily closer to work.

b. Depression

The literature on seafarers and offshore oil workers indicates that depression may be an important mental health concern for the spouses of mobile workers who are required to be away from their families for extended periods of time. A Norwegian study of seafarers’ wives found that two per cent suffered from severe depression, a similar rate to that found in the control group; however, this same study concluded that the long weeks of separation may exacerbate existing acute and chronic shore-side problems. Isay found that the spouses of submariners had a high incidence of depression when their husbands left, and when they returned from extended sea duty. This finding was echoed in the work of Morrice et al. in their study of Scottish spouses of offshore oil


workers. They note that while many of these wives coped very well with their husbands’ absence, about ten per cent had symptoms that merited psychiatric intervention, including depression. The authors termed the combination of distress and behavioural changes, “Intermittent Husband Syndrome.” Cooper and Sloan found similar results in their study of spouses of commercial air crew. However, more recent research on the effects of offshore oil and gas commute work on wives found most had adapted well to the intermittent presence of their spouses and some found it increased their independence.

c. Substance Abuse and Other Addictions

Addictions of various types, including increased alcohol consumption, illicit drug consumption, and gambling, have been linked to certain types of employment-related mobility, although it is not clear to what extent people engaging in some types of mobile jobs are already predisposed to substance use and other addictions, and to what extent the mobility and the work are causal factors. However, high levels of substance abuse have been found among many types of mobile workers including long-distance truckers, urban transit workers, and offshore oil workers, and are associated with high levels of mobility generally. High rates of alcohol use have also been noted among Mexican migrant workers in the United States, and have been linked to fatal motor vehicle accidents among this group. Research in Alberta and in

northern Canada has found that working at a remote site and being required to travel as part of one's job are linked to high levels of alcohol consumption.\textsuperscript{99}

d. Children's Mental and Emotional Health
The research on children's emotional health and their parents' employment-related mobility is quite complex, and varies greatly according to whether or not children accompany their parents to their employment destination. Many studies have suggested negative consequences for children whose parents are absent for employment for extended periods of time. Much research has focused on the impact that mothers' employment-related absence has on children's behaviour in school and academic achievement.\textsuperscript{100} Research has found that the children of mothers who work non-standard hours, such as night shifts, are less well-prepared for school.\textsuperscript{101} A Canadian study found that children whose fathers were absent for long periods in military service performed less well in school.\textsuperscript{102} Studies in South Africa and the United States found that children of migrant labourers had poorer academic performance than children whose fathers were at home,\textsuperscript{103} and a study of male Scottish offshore oil workers found high levels of behaviour problems among their children.\textsuperscript{104} Fowler and Etchegary's study of two rural fishing communities in


\textsuperscript{101} Wen Jui Han, "Maternal Nonstandard Work Schedules and Child Outcomes," \textit{Child Development}, 76 (2005), 137–156.


\textsuperscript{104} Morrice \textit{et al.}, "Oil Wives and Intermittent Husbands," 479–483.
Newfoundland and Labrador found that participants reported that children’s emotional well-being was negatively affected when one or both parents travelled to other provinces in Canada for work.\textsuperscript{105}

Overall, however, there is no clear consensus on the effect of parental employment-related absence on children. A Mexican study examining the adolescent children of fathers who regularly migrated away for work for extended periods found that factors such as poverty, lack of education and occupational opportunities are more predictive of poor mental health than paternal absence, and that the presence of a culture of migration in communities of origin seemed to be protective of the health of these children.\textsuperscript{106} Similarly, Mauthner et al.’s study of children of offshore oil workers found that, while children often had some difficulties adjusting to their fathers’ continuous departures, for the most part they adapted to the schedule and enjoyed the extended period of time when their fathers were at home during onshore time.\textsuperscript{107}

Children sometimes accompany their parents to the employment destination. Certain studies, particularly those conducted on military families, have indicated that there can be benefits for children of frequent relocation if there is adequate preparation and support.\textsuperscript{108} Jensen et al. demonstrated that although the common perception is that psychopathologies are more prevalent among military children, in fact they are no higher than in the population as a whole.\textsuperscript{109} However, a considerable body of research indicates that frequent mobility is associated with a number of emotional and behavioural problems, including academic problems and misbehaviour at school,\textsuperscript{110} sexually


\textsuperscript{106} Aguilera, “Business Travel and Mobile Workers,” 1109–1116.

\textsuperscript{107} Mauthner et al., “My Dad Hangs Out of Helicopter Doors and Takes Pictures of Oil Platforms,” 133–162.


promiscuous behaviour,\textsuperscript{111} drug use,\textsuperscript{112} and criminal activities such as vandalism and theft.\textsuperscript{113} These problems might be particularly acute in situations where children move with their families on a seasonal basis to work in fish processing, agriculture or construction – disrupting their school lives and friendship networks.

\textit{e. Positive Mental/Emotional Health Consequences}

The large majority of studies indicate that employment-related mobility is associated with negative effects on mental and emotional health, but some studies have indicated very few negative or even positive effects of certain types of employment-related mobility.\textsuperscript{114} This may be particularly the case for highly paid professionals, such as travelling business people and locum physicians. Locum physicians work in multiple worksites, \textit{substituting} for other physicians who are absent for a period of time. Alonzo and Simon studied locum physicians in a large American city, and found that they tended to be quite satisfied with their work, and appreciated the flexibility that it offered.\textsuperscript{115} The authors argue that the higher levels of pay, human capital, and autonomy protect such \textit{gold collar} workers from the negative aspects of their work. It may also be that certain types of individuals or personalities prefer work that does not require the responsibility of an office, and enjoy the variation in the work sites. The links to positive mental health may also not hold in rural regions of Canada, where more extensive travel might be required, and where attachment to rural place may be strong. Borg and Kristensen studied Danish travelling salespeople, and found that the number of kilometres travelled and the number of nights away from home were not associated with poorer mental


\textsuperscript{115} Alonzo and Simon, "Have Stethoscope, Will Travel," 635–654.
Nevertheless, the authors caution that the salespeople spent only about two nights per month away from home.

**Employment-Related Mobility and Social Health**

Social health is a term used to refer to the health of one’s social relationships. Donatelle and Thompson define social health as “the part of psychosocial health dealing with our interactions with others on an individual and group basis, our ability to use – and to provide – social resources and support in time of need, and our ability to adapt to a variety of social situations.”

Employment-related mobility has the potential to affect the social health of mobile workers and their families in a number of ways. In this section we discuss potential impacts of employment-related mobility on spousal relationships and on the availability of social support for the extended family.

### a. Spousal Relationships

Research on how employment-related mobility affects spousal relationships has produced contradictory results. Many mobile occupations (including trades occupations such as trucking, offshore oil work, and construction, as well as business travellers) are male-dominated, and so employment-related mobility is strongly connected to the periodic absence of male partners/fathers, with female partners sometimes left with sole responsibility for the household, children, and/or other dependents for extended periods of time. Many researchers have found that both mobile workers and their spouses identified these lengthy absences and the non-standard work hours associated with employment-related mobility as a significant strain on their relationships. However, some other studies have found that spouses may adjust well to the extended absences of their mobile partners. Shrimpton and Storey, for example, studied spouses of periodically-absent workers and concluded that such work “can be largely positive for many families and have some positive advantages for most.” In addition, there is some research indicating that for female mobile workers, the independence and income provided by


employment-related mobility may improve spousal relationships by enabling women to alter the gendered power relations within their families.\textsuperscript{121}

\textit{b. Loss of Social Support for Extended Family}

Employment-related mobility may also impact the social health of elderly relatives of mobile workers who are left behind when younger adults leave the community (for shorter or longer periods) for work. For example, Canadian research has indicated that the loss of social support for older parents and relatives is an important consequence of employment-related mobility. Botting studied the impacts of out-migration on the health and well-being of middle-aged women in rural Newfoundland.\textsuperscript{122} She found that these “mothers who stay(ed) behind” lost a great deal of their social support with the out-migration of their adult children. This loss of support was a key focus of these women’s lives, with a negative effect on their emotional health and on their ability to cope with challenges such as poverty, age-related health concerns, and the health problems of their partners. Similarly, King and Vullnetari use the term “the ‘orphan pensioners’ syndrome” to describe the “sense of depression and abandonment” felt by elderly Albanian men and women who had lost the social support of their adult children after they migrated away for work.\textsuperscript{123}

The social health of younger adults in declining rural communities may also be affected by the employment-related absence of friends and family who make up their social support base. One study of young women living in Newfoundland and Labrador communities with high levels of employment-related mobility found that family and friend relationships within the community were very important to the women’s emotional well-being.\textsuperscript{124} The women in this study talked about the difficulty of coping with the loss of relationships with those who had migrated away, either on a permanent or a temporary basis. This study and others point to the links between social and emotional health.


\textsuperscript{122} Botting, \textit{Restructuring, Out-Migration, and the Health and Well-Being of Mothers Who Stay Behind}.


\textsuperscript{124} Martin and Jackson, "Young Women in Coastal Newfoundland and Labrador Talk About Their Social Relationships and Health," 61–77.
Employment-Related Mobility and Community Well-Being

Community well-being is a broad concept that includes physical, psychological, social, and economic dimensions. The World Health Organization’s definition of a healthy community is “one that is continually creating and improving those physical and social environments and expanding those community resources which enable people to support each other in performing all the functions of life and in developing their maximum potential.”

Employment-related mobility can affect the well-being of communities both in home regions and host regions. Below, we examine four potentially important aspects of employment-related mobility relevant to the well-being of home communities: remittances, rural out-migration, changes in social capital and social cohesion, and availability of and access to health services.

Home Communities

a. Remittances

Research indicates that home communities, provinces, and countries often benefit economically from remittances from mobile workers, and such remittances tend to reach poorer areas in the home countries. Intra-national remittances are less well-studied and less visible than international remittances, but both kinds of remittances tend to be used for immediate consumption to a greater degree than for investment or community development. Remittances may directly fund mobility, encourage a culture of


126. Ramsey and Smit, “Rural Community Well-Being,” 369 citing Monique Bégin, Our Environment, Our Health: Healthy Ecosystems, Healthy Communities, Healthy Workplaces (Toronto 1993), 41.


migration, and contribute to consumption gaps between families of mobile workers and those of people working locally. With employment-related mobility, the flow of goods is generally assumed to occur from the worker back to the family and home community, but some goods, particularly food, flow from families to workers and from rural to urban areas.

b. Rural Out-Migration and Well-Being
Employment-related mobility is strongly connected to rural out-migration. Many rural communities throughout Canada and the world are decreasing in population every year as young people migrate to find work in other parts of the region, the country and the world. For example, Corbett’s study of a rural Nova Scotian community found that over 70 per cent of the population born in the area had moved away. Coasts Under Stress, a multidisciplinary research project conducted from 2000–2005, showed that out-migration had extensive impacts on community well-being on both the east and west coasts of Canada, including reduced community services and a loss of social cohesion.

Many studies in Canada and elsewhere have shown that out-migration is linked to increasing regional and rural/urban inequality. American research has shown how the out-migration of educated and skilled workers...
from economically depressed regions can generate “poverty catchments,” or regions with very high rates of poverty.\textsuperscript{137} Sinclair and Felt write that it is “not that migration causes regional inequality, but that it reflects a complex process through which those with the most resources and the most innovative capacities congregate at the developed core and help to keep the core economically ahead.”\textsuperscript{138}

c. Changes in Social Capital and Social Cohesion

Changes in social capital may be an important community consequence of employment-related mobility. Fowler and Etchegary define social capital as “the prevailing features of social organizations including networks, norms, and social trust that facilitate coordination and cooperation for mutual benefit, and also serve as vital resources for individual health and wellness.”\textsuperscript{139} The authors studied two rural Newfoundland communities where employment-related mobility increased after the codfish moratorium in the 1990s. They found that in one community:

the emerging competition for scarce employment opportunities and developing economic status disparities served to adversely affect the greater environment of cohesion and mutual trust which compromised the quality (and perhaps the effectiveness) of social interactions occurring within the community.\textsuperscript{140}

The second community, with less employment-related mobility, was able to maintain higher levels of social and economic well-being, as well as better overall health status among its residents. The authors suggest that “when individuals’ primary concern is to ensure the well-being of themselves and their immediate families during crisis, broader community concern might well be compromised, even in areas traditionally high in social capital.”\textsuperscript{141}

Community well-being can have consequences for individual health,\textsuperscript{142} although the exact nature of the relationship between social cohesion and health is far from clear. Numerous studies from North America and the United Kingdom demonstrate that neighbourhood cohesion is associated with improved health.\textsuperscript{143} Other studies, however, have questioned the
simplicity of this link, indicating that individual and household factors are much more important than neighbourhood cohesion, and even indicating that higher levels of social cohesion can be associated with poor health in certain circumstances. There may also be a circular relationship between employment-related mobility, social cohesion, and health, since those who live in areas of increased social cohesion may be less likely to migrate.

**d. Availability of and Access to Health Services**

Research indicates that employment-related mobility may affect the availability of health and other services in home communities, as well as workers’ and families’ access to those services. Healthcare professionals in Canada tend to be more intra-nationally mobile than the general Canadian workforce. When health professionals migrate frequently, the quality of health services in a community may be affected. Audas et al. explain that many rural communities in Newfoundland and Labrador depend on provisionally-licensed physicians from other countries, yet once these physicians become fully-licensed, they tend to leave the province for other parts of Canada and the United States of America. In fact, the researchers found that only 20 per cent of Neighbourhood Social Cohesion, and Adolescent Health in Canada,” *Social Science and Medicine*, 65 (2007), 2004–2017; Sandra Echeverría, Ana V. ez-Roux, Steven Shea, Luisa Borrell, and Sharon Jackson, “Associations of Neighbourhood Problems and Neighbourhood Social Cohesion With Mental Health and Health Behaviors: The Multi-Ethnic Study of Atherosclerosis,” *Health and Place*, 14 (2008), 853–865; Rovert Pampalon, Denis Hamel, Maria De Koninck, and Marie Jeanne Disant, “Perception of Place and Health: Differences Between Neighbourhoods in the Québec City Region,” *Social Science & Medicine*, 65 (2008), 95–111; Alison Parkes and Ade Kearns, “The Multi-Dimensional Neighbourhood and Health: a Cross-Sectional Analysis of the Scottish Household Survey, 2001,” *Health and Place*, 12 (2006), 1-18; Mai Stafford, Mel Bartley, Amanda Sacker, and Michael Marmot, “Measuring the Social Environment: Social Cohesion and Material Deprivation in English and Scottish Neighbourhoods,” *Environment & Planning A*, 35 (2003), 1459–1475; Mai Stafford, Steven Cummins, S. Macintyre, Anne Ellaway, and Michael Marmot, “Gender Differences in the Associations Between Health and Neighbourhood Environment,” *Social Science and Medicine*, 60 (2005), 1681–1692.


of provisionally-licensed physicians remained in Newfoundland and Labrador for five years. Intra-national recruitment and incentive programs introduced by employers in host areas may endanger the retention of skilled and professional labour, including health professionals, in home regions.149

Host Communities

The following section focuses on two potentially important impacts of employment-related mobility on host community well-being: changes in social capital and social cohesion and changes in availability of and access to health services.

a. Changes in Social Capital and Social Cohesion

We found little research that directly examined the results of repeated intra-national employment-related mobility on Canadian host communities, although there is some literature on the effects of more permanent in-migration.150 Media coverage of boomtowns such as Fort McMurray, Alberta, has often pointed towards multiple negative consequences associated with the loss of social cohesion in such communities.151 A significant body of American studies has examined large-scale employment-related mobility and how it affects such boomtowns. For example, Freudenberg found that young people in American boomtowns “have significantly lower evaluations of their community, more negative attitudes toward growth, lower levels of satisfaction, and higher levels of alienation.”152 Other research has also found indicators of decreased well-being in boomtowns,153 and has linked the rapid growth of


these communities with social problems, social isolation, and loss of social capital, a sense of community and social cohesion. Foulkes and Newbold explain that “high mobility also makes it difficult to provide critical social services as clients continually move in and out of jurisdictions, and it may disrupt social capital in communities.” However, other studies have found that boomtowns eventually experience a “social rebound,” when the initial negative consequences of boomtowns improve after the initial boom has slowed down.

b. Availability of and Access to Health Services

Literature on employment-related mobility and health indicates that availability of and access to health and social services may be negatively affected in host communities. Where employers rely on existing adjacent or nearby communities to provide access to health and other services, employment-related mobility can create major challenges.

Employment-related mobility may also affect access to a regular health care site. For example, Fowler et al. analyzed data from the National Health Interview Survey of Child Health in the United States of America from 1988, which surveyed 17,110 American children and their families. The authors found that children who had moved more than twice in their lives were three


\[ \text{154. Krannich and Greider, “Personal Well-Being in Rapid Growth and Stable Communities,” 541–552.} \]


times more likely to lack a family physician or regular health care site. In Fort McMurray, a host community for many oil sands workers and their families, Sauvé reported in 2007 that 44 per cent of the population had no family physician.159

Similarly, employment-related mobility may be linked to increased dependence on emergency room services for health care. Fowler et al.’s above-mentioned study found that children who had moved more than twice were approximately 1.6 times more likely to be brought to emergency rooms for health care when ill than were children who had never moved.160 Gilgen et al. found that those who had recently moved to a large Swiss city, both from elsewhere in the country as well as from international destinations, depended more on out-patient departments for health care than on family physicians.161

Finally, provincial policies on health care insurance and workers’ compensation may affect availability of and access to health services in host communities. For example, routine health exams are not covered by provincial health care insurance (Medicare) for Canadians outside their home province. As well, Medicare plans vary between provinces, with different regulations for eligibility and access to benefits, and an individual is not permitted to obtain coverage in multiple jurisdictions.162 A worker who travels from one province to another will have to be aware of the sometimes complex differences between Medicare systems and will have to figure out how to juggle these different plans in order to best address their family’s health care needs. For example, Alberta’s regulations stipulate that if an individual’s dependents remain in another province, health care coverage for both the individual and the family must be maintained in the other province not in Alberta. This means that inter-provincial migrant workers may not be eligible for the Alberta Health Care Insurance Plan if their dependents remain in the home province.163

Conclusion

Our examination of multiple bodies of literature relevant to understanding the relationship between employment-related mobility and health indicates

163. Newfoundland and Labrador Medical Care Plan; Alberta Health and Wellness, Alberta Health Care Insurance Plan.
that employment-related mobility takes different forms and that each of these has a number of characteristics that can negatively or positively affect the health of workers, their families as well as the host and home communities. Our overview also indicates that research on short-term, repetitive, intra-national employment-related mobility and its health consequences is scarce in Canada and elsewhere. The research that does exist has tended to focus on daily commuting and permanent migration, certain occupational sectors, and on either individual, family or community-level effects. Daily commuting, semi-permanent interprovincial out- and in-migration, and international migration have been studied in Canada and elsewhere. There is research on particular industrial sectors associated with different types of employment-related mobility such as the offshore oil and gas sector and tree-planting. There is a growing body of research on work in mobile workplaces such as


fisheries, seafaring, trucking, and the airline industry. Some researchers have looked at specific types of work that frequently take place in multiple work sites including temporary placement agencies, the sex trade, home care work, and locum physicians. Other research has examined workers involved in routine travel – although such research focuses much more often on gold collar workers such as travelling businesspeople, or salespeople, than on tradesworkers (such as construction workers) or caring professionals (such as public health nurses and home care workers).

There is, however, relatively little comprehensive research on the health consequences of employment-related mobility for workers who regularly commute intra-nationally, those for their families, and also very little on the consequences of employment-related mobility for social health in home and host communities. Furthermore, in research on mobile workplaces, multiple worksites, or routine work-related travel, the consequences of mobility itself on health are rarely the focus and the research that exists generally does not incorporate insights from class and gender analysis. It also does not systemically and critically link the human and social costs associated with employment-related mobility to neo-liberalism and the pursuit of profit.


170. Walters, "Managing Psychosocial Risks at Sea."


The forces that have been contributing to employment-related mobility in Canada include demographic, socio-economic and policy changes. Canada’s aging population is also a factor in that it is adding to existing and anticipated labour shortages and to efforts to recruit workers from other regions and provinces, as well as outside the country.\textsuperscript{176} The shortage of affordable housing (partially policy-driven), coupled with relatively stagnant real wages, is encouraging young families to look for cheaper housing outside of large urban centres.\textsuperscript{177} In terms of inter-provincial and international employment-related mobility, Alberta’s robust economy has, in the past decade, attracted tens of thousands of Canadian, and increasingly also foreign, workers.\textsuperscript{178} Mobility has also been encouraged by labour shortages in agriculture, the expansion of industry and services in parts of the Canadian north, restructuring of industry and government from company towns to turn-key operations and labour camps and towards increased subcontracting, the regionalization of services, and a greater reliance on temporary workers - all linked to efforts to increase profits. Economic decline in other regions (such as the collapse of the fisheries in Atlantic Canada in the 1990s),\textsuperscript{179} and the more recent recession-induced crises in Canada’s forestry and manufacturing sectors have also pushed workers into jobs requiring short or longer commutes to work.

At the policy level, provincial and territorial governments are introducing new labour mobility legislation designed to further boost employment-related mobility among professionals, semi-professionals and tradespeople in response to modifications to the Canadian Agreement on Internal Trade.\textsuperscript{180} In its 2007 Budget Plan, the federal government presented the Temporary Foreign Worker Program as its, “principal tool to help employers meet immediate skill requirements when qualified Canadian workers cannot be found.”\textsuperscript{181} These policy changes and statements are only the most recent example of a series of


\textsuperscript{178} De Guerre, \textit{Temporary Foreign Workers in Alberta’s Oil Sector}; Hiller, \textit{Second Promised Land}.

\textsuperscript{179} Ommer and Coasts Under Stress Team, \textit{Coasts Under Stress}.


reforms that have encouraged employment-related mobility both directly, by introducing new mobility legislation, and indirectly through a range of social and economic policies that have weakened the welfare system and put pressure on people to obtain jobs wherever they can be found. These neoliberal reforms, introduced over the last three decades, have been guided by a set of ideas and practices emphasizing the role of the market in the organization of social, economic, and political life.\textsuperscript{182} Examples include policies encouraging trade liberalization, public-private partnerships, the trimming and targeting of the public provision of social welfare, and an emphasis on individual and familial responsibility.\textsuperscript{183} This regime change has not necessarily meant less government (except rhetorically), but has shifted what governments and related agencies do and is linked, in part, to a change in responsibility across governments (federal to provincial and provincial to municipal) and from government to industry and civil society.\textsuperscript{184} The changes have also fuelled industrial restructuring and employment volatility and made paid work and private investment critical to the survival of households and communities within Canada and beyond.

Our overview of the literature suggests that further research is needed to document the diverse and changing scope of employment-related mobility in Canada during the neoliberal era and to map the pathways through which different types of employment-related mobility, involving different kinds of workers and work situations, affect health – both positively and negatively. We need to know more about how such factors as class, gender, age, ethnicity, and ability intersect to shape the relationship between employment-related mobility and the physical, mental, emotional, and social health of workers and their families. We also need to conduct more research on both urban and rural home and host communities, and on how employment-related mobility is affecting community-level formal and informal supports and services. By conducting research that analyzes how employment-related mobility affects individuals, families and communities, we will be able to gain a better appreciation of the complexity of employment-related mobility, and the types of problem areas that need to be addressed by programmes and policies.


Development of this review essay was supported by the Canadian Institutes for Health Research (CIHR) – funded Atlantic Networks for Prevention Research (ANPR, www.anpr.dal.ca), grant number CDA-66153. We would also like to acknowledge the substantial contribution of Amanda Butt of SafetyNet to formatting the document and references.