

Migration

The example of migrant nurses in Britain stands synonymous for other groups of migrant workers in other Western countries. The analysis of the motivation, integration and contribution of internationally qualified nurses to the health sector presented in this book is based on well established and internationally recognised concepts, making some of the findings accessible and equally transferable to other employment settings.

Migrant nurses are one example of international migration and steadily increasing numbers of migrants filling jobs that are not filled by indigenous citizens, often for less pay and under worse working conditions they express a global change in people's mobility. Some of these workers come as seasonal labourers to work on farms and in factories, whereas others are highly skilled Information Technology professionals, researchers or consultants who work as part of multi-national companies, symbolising increasing globalisation.

Sentiments towards migrants are split with highly skilled professionals receiving little criticism and other, less well qualified migrants being viewed as a threat: *'Today, we are being swamped by people arriving illegally from a multitude of countries and cultures, who care nothing for Britain, our traditions or our way of life'* wrote Littlejohn in The Sun on 9 May 2003. It was suggested that *'immigrants who wish to become British citizens will have to take courses in modern family life and be taught about tolerance of different*

ethnic groups, unmarried couples and homosexuals'¹. Hardly a week goes by without some comment in the press on migrants reflecting a dynamic debate surrounding international migration and integration, highlighting a desire to control people-flows by distinguishing between the '*wanted*' and '*unwanted*'. However, such public perceptions, which are not exclusive to Britain stray far from the facts on worldwide migration and the contribution that migrants are making to the economy and civil society².

Often the terminology surrounding migration, such as 'migrants', 'immigrants', 'asylum seekers' and 'foreigners' is used very lightly, not just by the general public, but also in professional contexts and publications. Recognising that there are overlaps and sometimes blurred boundaries, it is nevertheless paramount to set out some of the definitions at the beginning of this book.

The TUC³ distinguishes between *migrants* who came to Britain for the purpose of work; *immigrants* who came to settle and may become citizens and *refugees* who have sought and were granted asylum in Britain on grounds of fear of persecution. While their applications are considered, in Britain by the Home Office, refugees are referred to as *asylum seekers*.

Another distinction is that of *voluntary migration* for economic- or family-related reasons and *forced migration* when asylum seekers are forced to leave their home countries for fear of their safety.

Then there are *undocumented* and *irregular migrants* who may work illegally in the 'grey' economy and move around illegally. They place themselves at great risk and are frequently abused as cheap labourers by being paid less than the National Minimum wage, having deductions for accommodation or transport made from their pay and being subjected to long working days in poor, unregulated working conditions.

The term *migrant workers* is therefore often very loosely defined and there is no one agreed definition, some refer to migrant workers as those who entered the country within the last five years and whose migration is economically motivated. Some migrant workers may only stay for a few months and return again at a later stage, thus becoming *seasonal migrants*. In many countries there are also significant people flows as a result of internal migration with people moving within international boundaries from one part of a country to another in search for jobs and economic gain. It also has to be recognised that none of these categories are clear-cut and people can belong to different or more than one category.

In this book the term *migrant nurse* is used interchangeably with *internationally qualified nurse*, regardless of their motive for migration and regardless of the time of their arrival in the country. It is acknowledged that the term 'internationally qualified' may be less politically laden, however these nurses are clearly participants in today's international migration process. In the case of internationally qualified migrant nurses, the majority are directly recruited through agencies from their countries of origin, such as the

Philippines, Africa or India and numbers in Britain have been steadily increasing over the last five years. Yet a second group of internationally qualified nurses migrates independently of agency recruitment and often comes for non-work related reasons, such as joining their family, getting married, studying for a degree or to seek asylum. As will be outlined in the course of this book, their access to work and integration into the workplace differs from the first group, as they do not enjoy the security of having come to Britain as part of a larger cohort of migrant nurses.

Migration into Britain in context

Until recently migrants were seen as being male with women as dependent spouses⁴. In Britain this led the Immigration Appellate Authority to develop Asylum Gender Guidelines⁵, intended to ensure that the gender of asylum seekers does not prejudice their application.

Within the British context migration has to be viewed within a wider perspective of her unique historical links to other countries and her imperial past with waves of migrants and immigrants from Asia, Africa and the West Indies⁶. Historically, after the Suez crisis in 1956, Britain had to come to terms with a postcolonial world⁷, as a result of which Britain's migrant labour experience was partially characterised by Commonwealth citizens setting up their home in Britain as they had, until 1967, a right to live here. Therefore Britain's migrant labour experience differs from the rest of Western Europe as Commonwealth citizens, as a result of their legal status, were more privileged than for example Turks and Greeks who immigrated to Germany as

'guestworkers'. During the 1950s and 1960s Commonwealth citizens contributed to Britain's economy by filling socially undesirable jobs and the rebuilding of war-shattered Britain created a demand for labour that was met through immigration from the Indian subcontinent and the Caribbean. This demand for workers was also particularly acute in the National Health Service (NHS), with Indian doctors being actively recruited in the 1950s⁸ and large numbers of nurses coming from the Caribbean in the 1950s and 1960s - a phenomenon that continues to date. Yet, the effects of immigration and integration into Britain have been and are currently probably more than ever the subject of fierce debate⁹.

Despite this seemingly generosity towards immigrants, Crewe and Kothari point out, that many people from formerly colonised countries who came to Britain in the hope of finding a modern, civilised and progressive place to live were disappointed with the working conditions they found¹⁰. Despite the demand for labour, Black and Asian workers were treated as 'second-class' employees with open discrimination being common practice in management approaches during the post World War II period. Even though immigration to Britain was partially triggered by labour shortage, the economic upheaval of the 1970s led to the perception that 'they' came here to take 'our' jobs, an attitude that persists to this day¹¹. Britain's history of colonial domination and migration affects people's attitudes towards migrants and the migrants' subsequent integration at their place of employment, as the example of Asian and Afro-Caribbean workers shows¹².

However, the question remains to what extent these nurses have truly integrated and to what extent they were encouraged to develop their careers. It is reported that the typical Health Care Assistant, providing a backbone to the NHS, yet being relatively unqualified is 40-50 years old and of Asian or Afro-Caribbean origin. This implies that many nurses who migrated to Britain are filling vacancies and are stuck in low skilled, low paid grades. So, to what extent have integration strategies, equal opportunities policies and diversity management techniques really had an impact on the role and perception of migrant nurses? How have things changed from Mary Seacole's days?

*'Mary Seacole was born in Jamaica, where she learned nursing skills from her mother, who kept a boarding house for invalid soldiers. Mary came to Britain in 1845, where she applied to the War Office to offer her services as a nurse to British troops engaged in the Crimean War. However, she was turned down because of colour prejudice. Mary was not discouraged by this and funded her own trip to the Crimea, where she set to nursing the sick and wounded. She also started her own shop, selling medicines. Mary became a favourite with soldiers, one of whom wrote in his memoirs "she was a wonderful woman". After the war, Mary returned to Britain in poor health, but her predicament was brought to public attention by a letter to The Times. A benefit was held for her in the Royal Surrey Gardens, which lasted for four days, and Mary was able to live well thereafter. Mary died on 14th May 1881, in London.'*¹³

Currently, as a result of international migration a substantial number of health care workers are non-UK qualified or were not born in the UK: 31% of doctors and 13% of nurses in the NHS are now non-UK born¹⁴. Some of these came in the 1960s and 70s and had or have later gained British citizenship. In addition there are also around 30,000 non-British nurses working in the NHS, who have no citizenship rights and rely on work permits.

As part of the wider business case for immigration, the economic argument that younger migrant workers can contribute too redress the 'pensions' gap has been developed. The report published by Lord Taverne QC¹⁵ estimates that by 2050 48.5% of the British population will be sixty-five years or older. Furthermore, the UK Home Office admits that in 1999/2000 migrants have made a net fiscal contribution of about £2.5 billion to the economy, thereby contributing more in taxes than they have received in benefits and state services.

While much of what is said in this book equally applies to employees and nurses in general or Black and Minority Ethnic nurses specifically, it uses the examples of migrant nurses who have crossed internationally recognised borders to get to Britain with refugee nurses being one sub-group of international migrants. The next section provides an introduction to the particular situation of refugees.

The worlds' refugees

Britain has historically also offered sanctuary to people groups in crisis: since the late 18th century the refugees fleeing to Britain have included Jews, Ugandan Asians, Vietnamese, Zairians and recently Yugoslavs¹⁶. Yet, Britain's response to refugees has seen a changing perception of asylum seekers over the past fifteen years. Until the early 1980s they were seen as brave people, fleeing persecution. In the mid 1980s it was with the arrival of young Tamil men from Sri Lanka seeking asylum from persecution that an attitude of 'bogus' refugees started. Unlike other European countries, the Tamils were hardly ever given asylum in Britain¹⁷. Single young men from South Asia were the people against whom UK immigration control was targeted, as there was a culture of disbelief that they were 'genuine' refugees. Such attitudes were informed by a lack of understanding of economic and political instabilities as a result of endemic ethnic persecution. Kurdish, Somali, Kosovan and Albanian asylum seekers were subsequently classified as 'bogus' and deterred from coming to Britain.

Within the international scope of forced migration figures of asylum seekers in Europe and indeed in Britain are comparatively insignificant: international refugee data show the highest numbers of displaced persons come from the Middle East¹⁸ and in 2001 over three million people were forcibly displaced within Africa. For example, Tanzania hosted half a million refugees from the Great Lakes region and Sudan 370,000. In comparison, based on ICRC reports in 2001 the whole of Europe only hosted 960,500 refugees with nearly half of these displaced from Yugoslavia. Out of these Britain had received

67,700 applications for asylum and Germany nearly twice that number. The ICRC figures on refugee migration correspond with those published by UNHCR¹⁹ and those published by the UK Home Office²⁰. In 2005 Refugees International estimates the number of displaced in Darfur to be 700,000 and out of these approximately 180,000 have crossed the international border into neighbouring Chad²¹. Thus with most people fleeing to neighbouring countries, some of the poorest countries are hosting the bulk of refugees.

However, there has been a rise in the number of asylum applications to Britain since the 1990s²², indicative of the rising numbers of independent migrants. In 2000 the total number of asylum seekers in Britain rose to 80,315 and in 2002 to over 100,000 with the main applicant nationalities coming from the Federal Republic of Yugoslavia, Iraq, Iran, Sri Lanka and Afghanistan. Over recent years the number of asylum related grants of settlement has been going down. The Control of Immigration Statistics for 2003 show a 30% decrease compared to the previous year²³. In 2003 the Home Office received 46,130 asylum appeals, 11% fewer than in 2002 and one in five (20%) appeals were granted, compared with 22% in 2002.

On the 22 February 2005 the BBC News reported the following update on the UK's asylum figures: Some 34,000 people sought asylum in the UK in 2004 compared with 49,000 in 2003. The figure represents a 60% fall in asylum applications since a high of 84,130 cases in 2002 - a record 7,000 arrivals a month. Figures for the first quarter of 2005 show that the number of applicants, excluding dependents, fell by 17% compared to the previous three

months. In 2005, the top three nationalities seeking asylum were Iranian, Iraqi and Somali people. Of the cases considered during the quarter, some 6% were granted asylum and a further 10% were allowed humanitarian protection or discretionary leave with 84% being refused²⁴. Separate figures from the UN's refugee agency are expected to show this is in line with continued falls in asylum arrivals across Europe.

The Home Office and refugee organisations estimate that over half of the international migrants coming to the UK settle in London²⁵. The total number of refugees who have entered Britain over the last 15 years and are now living in London is estimated to be between 240,000 and 280,000, but there are no reliable, published sources for this²⁶. Efforts to stem people-flows into Britain and to address what is commonly called the 'asylum and immigration crisis' have culminated in the White Paper 'Secure Borders, Safe Haven'²⁷, which led to the 2002 Nationality, Immigration and Asylum Bill²⁸. Asylum seekers might possess professional skills, which are sought after in Britain, yet these are not taken into consideration when processing their claims²⁹. With Europe tightening immigration controls and visa constraints, it has become virtually impossible for someone fleeing for safety to reach Britain legally even though they might comply with the 1951 Geneva Convention³⁰. The involvement of paid middle-men is therefore common practice which can lead to further endangerment and abuse of individuals who are already vulnerable.

The Home Office sets out aims of what an integration strategy of asylum seekers and refugees into British society should achieve, namely:

- To include refugees as equal members of society
- To help refugees develop their potential and contribute to the cultural and economic life of the country
- To set out a clear framework to support the integration process across the UK
- To facilitate access to the support necessary for the integration of refugees nationally and regionally

However, despite providing a policy of immigration, the government fails to provide a clearer definition of what is understood by 'integration'. In relation to refugees the Home Office describes integration as follows:

*'Recognised refugees are entitled to the same social and economic rights as UK citizens and have full access to medical treatment, education, housing and employment. Recognised refugees have an obligation to conform to the laws of their country of refuge.'*³¹

With a lack of definition of the deeper meaning of 'integration' this statement refers to the refugees' access to basic services and their responsibility to obey the rules of the land. The government further acknowledges that employment is a key factor in their integration³². Some research has been undertaken to look at the skills that migrants in general may have to offer and the barriers they face when trying to integrate into employment³³ and the National Refugee Integration Forum looks at all aspects of how refugees integrate into British society.

Eastmond draws on the example of Chilean refugees in the United States of America and points out that female migrants experienced greater self-reliance and confidence as a result of employment. In comparison the men felt that with the loss of social and political networks work had lost some of its deeper meaning³⁴. Eastmond describes how these men find themselves in the paradox with *'the torment of remembering and the fear of forgetting'*. This shows that migration and employment has an immense impact on personal and work-related identities as individuals lose their familiar points of reference and need to establish new ones as part of the integration process. Migration leads to changes in childcare arrangements, kinship and community support and gaining access to employment can affect men and women in different ways, depending on their skills and culture of origin.

Against the backdrop of the current policy debates and historic cases of migration, this book questions the validity of the one-sided public opinions about migrants and integration by scrutinising personal perspectives of living and working in another country. It looks at how facets of individual- and work-related identities, their interface with motivation and the management of diversity act as contributors for migrants to make a positive contribution.

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