

BRITAIN'S PERCEPTION ABOUT IMMIGRATION

- :: MEASURING MIGRATION
- :: IMPACT OF MIGRATION ON THE LABOUR MARKET
- :: RECRUITMENT AND INTEGRATION WITHIN THE NHS

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INTRODUCTION

Despite Britain's colonial history, the concept of migration has become very popular and subsequently disputed in the last 2 years.

Political and social movements heavily campaigned and have risen on the back of June 2016's referendum (Gov.uk, 2016; Asthana and Stewart, 2018), becoming a source of divisiveness, xenophobia and racism (Burnett, 2016), breaking any shape of national unity, allowing for political (far right) characters such as Katie Hopkins, Paul Golding, Jayda Fransen, Nigel Farage or Boris Johnson to stand up, incite and aggravate the topic further.

Research shows that hate crime grew in 10 police forces, including the Metropolitan Police, by more than 50% following the controversial referendum (Sweney and Plunkett, 2016; Cadwalladr and Townsend, 2018) and it manifested through multiple series of indictable offences such as assaults, criminal damages and arson, aggravated by hate motives of which victims were EEA nationals residing in UK (BBC, 2017).

The Government timed the period of volatility and confusion generated by Brexit and Article 50 (2016 - onwards), with a period of austerity measures and cuts to the public sector (Mason and Asthana, 2017) (2010 - onwards), effectively forcing the Police to cope with more crime, more budgetary cuts and fewer resources.

The main argument behind the Brexit public debate was the politically-right-driven desire to "control the immigration" (Moore and G. Ramsay, 2017).

Without assessing whether the UK was unable to control its immigration as a result of being a member of the EU, or because of the Home Office, relevant Cabinet Ministers and Civil Service inefficiencies, this paper looks at the the definition of migration, how accurately it can be measured and the impact of migration in the UK labour market.

CHALLENGES AROUND MEASURING MIGRATION

There is no one definition for the term 'migrant', different UK institutions have different definitions. This discrepancy between the definitions enables speculators to use the interpretation which suits best their causes.

It is a fact that the Home Office, which is a ministerial department of Her Majesty's Government of the United Kingdom, whom is responsible for immigration, security and law and order, does not have the infrastructure, nor the systems in place to capture accurate information about who is arriving and leaving the UK, despite having a protected geographical location. It therefore

defaults on a variety of data sources attempting to measure immigration using statistical methods.

Labour Force Survey ('LFS') and Annual Population Survey ('APS') are defining a 'migrant' as any UK resident who was born overseas and resides in the UK. The major weakness in this definition lies in the assumption that no foreign-born UK resident became a British citizen and secondarily the definition does not factor in the length of stay.

In the context of National Insurance numbers (NINo), which are issued by the Home Office, 'migrant' is defined as any individual who is a foreign national at the time of requesting a national insurance number. This interpretation also assumes migrants will never acquire British nationality, it is self-reported information, therefore questionable and also disregards the length of time between when the individual requested a NINo and the date of the most recent report. The National Insurance information also does not take into account if the individual still resides in the UK.

Office of National Statistics (ONS) uses the United Nations (UN) definition of migrant and it refers to the individual remaining outside their home country for more than 12 months. The source of information is from the International Passenger Survey (IPS) which is an imperfect data source. This information is often used by policy makers, it is also self-reported and it relies on respondent's intentions, not facts. Another limitation of the ONS information is that it does not include individuals who have moved into the UK within the last 12 months.

The assumptions and limitations used within the above 3 mechanics have the potential to invalidate or at least question the accuracy of the statistics, implicitly to question any decisions made whilst using figures from the above sources (Anderson and Blinder, 2017).

Using the above, some indicators have been produced showing at the beginning of 2017, 2.4m EEA nationals were employed in the labour UK market, primarily attributed to increases in the number of accession workers, originating from A8 countries (Czech Republic, Estonia, Hungary, Latvia, Lithuania, Poland, Slovakia, Slovenia, Malta, Cyprus), Malta and Cyprus; whilst 3.7m UK nationals are resigning in the EU (LFS, 2017).

Statistics show a descendent influx trend of migrants, whereby in 2016 approximately 250,000 EEA nationals moved into the UK, making an overall inbound net migration of 133,000, from which 39% were initiated by EU14 nationals, 20% by A8 nationals and 41% by A2 (Bulgaria, Romania) nationals. The increased number of the latter category can be justified by the work restrictions previously applied by Home Office on the A2 category between 2007 and 2014 (ONS, 2017).

The differences between the NINo and the OSN calculation methodology are substantial since NINo measure immigration based only on the nationality at the NI registration point in time,

assuming their nationality status will never change, whilst OSN only takes into account EEA nationals who have lived in the UK for at least 12 months (ONS, 2016).

HM Revenues and Customs have also released their statistics indicating that in 2014, 2.54m EEA nationals were recorded by HMRC as having been employed at some point during the year. However, the HMRC figures are contradicting LFS' estimate of 1.8m (HMRC, 2016).

Apart from the above, there are other examples causing confusion around the definition of 'migrant', where the concept is being conflated with ethnic or religious minorities and asylum seekers, as documented by Saggart and Dren (2001), Crawley (2009) and Beurin et al. (2006).

These errors around the interpretation of the word 'migrant' would put under question the government's decision to bring immigration under the spotlight through June 2016's referendum, without clearly defining first who qualifies as a migrant and provide relevant statistics (Vargas-Silva, 2017).

According to LFS, between 1993 and 2015, there was an increase in the number of foreign born nationals, of working age, migrating into UK, from 3m to 7m. However, LFS excludes short term migrants who have been a resident in their households for less than 6 months (Dustmann et al, 2010). Additionally, LFS' survey methodology excludes dwellings such as communal establishments and halls of residence, excluding overseas students, asylum seekers and other migrant profiles who may play different roles in the economy.

According to LFS, 10.7% of all UK residents in employment are foreign nationals and between 2002 and 2015 there was an increase in the share of foreign-born workers, particularly in low skilled occupations, from 8.5% to 36% in process operations and a peak of 42% in process plant occupations (LFS, 2015).

However, the general LFS limitations also apply to the above, making the percentages likely to be higher and also include migrants who moved into the UK in the last 12 months, working students, asylum seekers or labourers operating outside HMRC's coverage.

Low skilled occupations such as labouring, cleaning, food preparation, hospitality, process and plant occupation form circa 5% from the total occupational share within the UK job market (LFS, 2015), means that foreign born nationals bear an enormous responsibility of fulfilling an average 36% from the total UK low skilled jobs and around 2.5% from the total UK jobs (Rienzo, 2017).

Research around migration requires various assumptions about the characteristics of migrants including their level of skills, age distribution and family composition. Gott and Johnston (2002) highlighted within the 1999-2000 financial year that a positive net fiscal contribution of GBP +2.5bn was generated exclusively by migrants.

Other studies released by Institute for Public Policy Research (IPPR) show that between 2003 and 2004 migrants generated a negative GDP contribution of GDP -0.4bn.

Skiskandarajah et al (2005) introduced the concept of NAFI (Net Annual Fiscal Contribution) which during 1999-2000 was 1.06, higher than the NAFI specific to UK-born nationals of only 1.01. For the period 2003-2004, the migrant NAFI value was 0.99. However the NAFI value for UK-born nationals was even lower at 0.88, suggesting overall migrants still had a positive impact on the economy, compared to the contribution brought by UK nationals (Vargas-Silva, 2017).

HMRC also released reports showing that for the 2013-2014 fiscal period, migrants brought a net fiscal contribution of GBP +2.54bn to the UK economy, which also raises questions about the transparency and accuracy of the formulae applied, making evident that a national uniform and consistent key performance indicator was required.

The office for Budget Responsibility (OBR, 2016) provided forecasts for the net government borrowing and the debt as a percentage of GDP, under various scenarios of net migration. The findings show the government budget surplus would be higher under a high migration scenario and lower in the low migration scenario as a result of migrants being more willing to work and less likely to rely on social services than the average UK-born national (Vargas-Silva, 2017).

According to OECD (Organisation for Economic Co-operation and Development) (2013), the effects of migration on the UK had a positive impact of 0.46% of GDP and it was more positive than the effects of migration in 16 other OECD countries.

In conclusion, evidence shows there is not enough clarity as to when one becomes a 'migrant' and when this status changes. Each definition of the concept of migration relies on major assumptions which once questioned, would invalidate the statistical output. That being said, if looking from the industry perspective (a bottom-up approach, rather than a top down), evidence shows foreign-born nationals are offering a substantial variety of skills, particularly in raw processing, food, plant operation, hospitality and other industries, which are vital both for the economy but also for the development of other sectors within the UK economy.

RECRUITMENT AND INTEGRATION OF EEA NATIONALS WITHIN NHS

This paper will look at the challenges and potential mitigation measures, in terms of recruitment of foreign nationals and their integration within the national health sector.

National Health Service (NHS) employs 1.2m staff across the UK from which 62,000 (5.6% from all staff) are EU nationals working for NHS England and 12.5% are overseas nationals working for NHS UK wide (Moore and Ramsay, 2017; Gosquared, 2017).

The first analysis shows NHS is relying on 12.5% on overseas staff whilst according to LFS (2015) 10.7% of total UK employment is supported by EU nationals. The findings suggest NHS relies more on foreign born nationals than it relies on UK citizens.

It is widely acknowledged that the NHS is struggling to recruit and retain permanent staff. In 2014, there was a shortfall of 6% (50,000 full-time roles) between the number of staff required by providers of healthcare services and the number in posts (A. Morse, 2016). Social care also struggles with a vacancy rate of 5.5% rising to 7.8% in domiciliary services. In addition, a high turnover of 25% makes NHS release 300,000 employees every year (Skills for care, 2015).

Despite the increased migration into Britain recorded between 2004 and 2015, during 2015 ONS reported a decrease within the net migration from EEA countries from 184,000 to 133,000 which can be justified by the pre-referendum talks, followed by the Brexit campaigns (Vargas-Silva, 2017).

Evidence shows that NHS already had several staffing challenges, even prior to June 2016, when the employer was releasing from duty more staff every year than the net number of EEA nationals migrating into the UK. It appears the Brexit developments have had more substantial negative effects, making it even more difficult for NHS to recover.

Having worked under the EU umbrella for the last few decades, NHS was well integrated within the international standards and bodies such as the European Centre for Disease Prevention and Control, European Medicines Agency, Medicines and Healthcare products Regulatory Agency and other entities facilitating access to knowledge, continuing to benefit NHS if Brexit does not change the relationship and the role these institutions fulfil. In terms of recruitment and access to resources, the freedom of access of EEA nationals and the ability to recognise international degrees using NARIC UK service enabled virtually any overseas national to travel to the UK to apply for NHS roles (BC113).

However, the government's failure to offer a clear pathway for the next 10 years in terms of freedom of travel, not only leads to a decrease of influx of EU nationals, but it threatens health service providers with having even less resources available.

Statistics show that 41% of all NHS trusts increased their concerns about the negative effects of Brexit, whilst 20% of the incidents reported within NHS trusts refer to bullying and harassment and are linked to racism and xenophobia. Furthermore, in the light of the ongoing instability of what is going to happen to EEA nationals within the UK, a decrease was recorded in terms of the number of NHS trusts effectively seeking to recruit from the EU, from 49% in 2016 down to 35% in 2017 (NHS Employers, 2017).

Despite the resourcing pressures and challenges, NHS attempts to overcome these through substituting permanent with contract roles and outsourcing through hundreds of smaller recruitment agencies including Capita, Reed and many others (Greater London - NHS

Employers, 2018). The short term positive effect consists of fulfilling some of the resourcing shortfalls, in the detriment of higher premium rates which must reward both the staff and the intermediating recruitment agencies involved.

Statistics do not provide details about cultural or otherwise integration issues. Evidence shows that NHS is a very diverse environment where integration takes place based on skills and competencies which are well regulated within the UK market (House of Commons, 2018).

In conclusion, the public health sector has already suffered from resource stretching, even before June 2016 (Mason and Asthana, 2017), and it is expected to continue to dip, unless clarity is provided from the central government in terms of freedom of travel within the next 10 years.

NHS trusts must also be provided with a vision and confidence to enable them to plan realistically with both international recruitment strategies, which should be aligned with Home Office immigration mechanisms, but also to restructure national recruitment campaigns to stimulate UK born nationals to embark on a career with National Health Service.

In terms of integration there is no evidence that the social and cultural characteristics of foreign born nationals, would pose any risks in terms of staffing within NHS.

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