

TRADE UNION RESPONSES TO GLOBALIZATION

A review by the Global Union Research Network

Edited by Verena Schmidt

INTERNATIONAL LABOUR OFFICE • GENEVA

GLOBAL UNION RESEARCH NETWORK

Copyright © International Labour Organization 2007
First published 2007

Publications of the International Labour Office enjoy copyright under Protocol 2 of the Universal Copyright Convention. Nevertheless, short excerpts from them may be reproduced without authorization, on condition that the source is indicated. For rights of reproduction or translation, application should be made to the Publications Bureau (Rights and Permissions), International Labour Office, CH-1211 Geneva 22, Switzerland, or by email: pubdroit@ilo.org. The International Labour Office welcomes such applications.

Libraries, institutions and other users registered in the United Kingdom with the Copyright Licensing Agency, 90 Tottenham Court Road, London W1T 4LP [Fax: (+44) (0)20 7631 5500; email: cla@cla.co.uk], in the United States with the Copyright Clearance Center, 222 Rosewood Drive, Danvers, MA 01923 [Fax: (+1) (978) 750 4470; email: info@copyright.com] or in other countries with associated Reproduction Rights Organizations, may make photocopies in accordance with the licences issued to them for this purpose.

V. Schmidt (ed.)

Trade union responses to globalization: A review by the Global Union Research Network
Geneva, International Labour Office, 2007

Globalization, multinational enterprise, workers rights, trade union rights, trade union role, international trade union, developed countries, developing countries
03.02.3

ISBN 978-92-2-119860-4

ILO Cataloguing in Publication Data

The designations employed in ILO publications, which are in conformity with United Nations practice, and the presentation of material therein do not imply the expression of any opinion whatsoever on the part of the International Labour Office concerning the legal status of any country, area or territory or of its authorities, or concerning the delimitation of its frontiers.

The responsibility for opinions expressed in signed articles, studies and other contributions rests solely with their authors, and publication does not constitute an endorsement by the International Labour Office of the opinions expressed in them.

Reference to names of firms and commercial products and processes does not imply their endorsement by the International Labour Office, and any failure to mention a particular firm, commercial product or process is not a sign of disapproval.

ILO publications can be obtained through major booksellers or ILO local offices in many countries, or direct from ILO Publications, International Labour Office, CH-1211 Geneva 22, Switzerland. Catalogues or lists of new publications are available free of charge from the above address or by email: pubvente@ilo.org

Visit our website: www.ilo.org/publns

MIGRATION IN THE GLOBAL ECONOMY: CHALLENGES AND OPPORTUNITIES FOR CARIBBEAN TRADE UNIONS

9

*Ann-Marie Lorde
Research Officer, National Union of Public Workers, Barbados*

Introduction

The migration of people has existed from time immemorial and, with the dawn of the new millennium, migration has become a central issue of concern and debate among national and international policy-makers. It is accepted that migration can be productive for some economies, nevertheless it must be managed to serve as an engine of growth and development, and take place in a manner that fully respects the fundamental rights of all migrant workers.

The increased integration of culture, economies, societies and politics is supporting the present economic global order that is associated with the notion of flows. Whether it be the movement of “capital, data, ideas and people”, the forces driving these migratory flows are many and not easily defined, and they present a series of multifaceted inter-relationships for policy-makers and governments (IOM, 2002). In essence, these increased flows are supporting a world that is rapidly becoming “a single place” (Marfleet, 1998).

By the end of 2000 three per cent of the world’s population (175 million people) were living outside their country of birth or citizenship, with women accounting for an increasing proportion of international migrants, thus feminizing the face of migration (ILO, 2004). Substantial research reveals extensive migration for employment between developed countries where wage differentials are not very large (ILO, 2004).

In recent times there has been growing concern among trade unionists about the impact of international migration on the quality of social services, particularly the delivery of quality social services in developing countries,

including the Caribbean.¹ This issue has been given high priority by organizations such as the ILO and Public Services International (PSI), especially in regard to the migration of health sector workers.

The Caribbean is presently witnessing with a measure of concern the migration of health-care workers, particularly caregivers. In Barbados, for example, its nurses are migrating to the United States and the United Kingdom. Of interest, however, is the fact that a large number of nurses contemplating migration are considering the United States because of the information being provided by American recruitment agencies visiting the islands. An area that is in need of further study is the migration of nurses to the United Kingdom who are then migrating to Saudi Arabia and Australia.

To add to the discourse this paper will examine the issue of migration in the health sector within the Caribbean at two levels: the notion of migratory flows from a Caribbean perspective; and the exploitation of migrant labour. In considering these issues this paper will also seek to identify some of the concerns that the Caribbean Public Sector Unions (CPSU) will need to address, specifically in light of Chapter 3 of the 2001 Revised Treaty of Chaguaramas Establishing the Caribbean Community including the CARICOM Single Market and Economy (CSME) which covers the “Establishment, Services, Capital and Movement of Community Nationals” (www.caricom.org).

One may argue that the CPSU are representative of the various faces of Caribbean public services, and thus must ensure that the rights of all workers, including migrant workers – regular or irregular – are safeguarded, and that decent work for all is promoted. The CPSU, therefore, have a pivotal role to play in the crystallization of the CSME which is being driven by the World Trade Organization (WTO) Agreement on Trade in Services (Mode 4) (www.wto.org). Concerns identified as affecting the issue of migrant workers are therefore central to developing a CPSU response to regional and international migrant flows, and must be considered in the light of globalization.

Migration flows

Migration is a systematic process that is influenced by a combination of macro-economic and political forces as well as by “micro-level social networks, the formation of communities and interpersonal exchanges of information and remittances” (Simmons, 1998). One may argue that the high levels of remittances to the Caribbean, particularly Jamaica, have aided the development

¹ Interviews were conducted during 2003 with five female health sector workers in the Bahamas, 15 in Barbados, two in Guyana, one in Dominica and two in Dutch St Maarten. The leaders of the CPSU trade unions from Bermuda, Jamaica and Guyana were interviewed in 2004.

of Caribbean societies, however, there still remains the need to weigh the value of remittances against the loss of the “best brains” from Caribbean societies.

Within the Caribbean migration is nothing new. Historically, it has played a central role in the development and structure of the region, and has been shaped in the main by colonialism. The Caribbean has been more deeply influenced and affected by international migration than any other region in the world, responding to economic and political developments of the islands and the various shifts in migration policies in receiving countries including the United Kingdom, United States and Canada (IOM, 2001). This long history of labour migration from the Caribbean has varied significantly in numbers, characteristics, duration of stay abroad and frequency of return. It would therefore be noteworthy to consider migration in the context of the debate on trade unions and their role in the globalization process as it relates to shifting opportunities for low-skilled workers, skilled workers, professionals and civil servants, with civil servants being included in the category of professionals.

Extra-regional migration has been the dominant form of migration in the region; however, there exists an intra-regional network that has developed significantly in the last 50 years. Also to be considered is the element of circulatory migration which is increasingly changing the phenomenon of “brain drain” into that of “brain exchange” (IOM, 2001). Historically, Caribbean migrant workers have crossed borders intra-regionally and extra-regionally through one of three channels:

- permanent migration – primarily for family unification and for highly skilled workers to market their skills;
- temporary migration for all types of employment – primarily for guest workers who fill vacant jobs that persist, for example in the area of nursing; and
- temporary migration for time-bound employment – primarily for seasonal migrants in farm labour programmes and construction (ILO, 2004).

The key factors that are driving these facets of migration can be classified as pull factors, as in the case of the Bahamas, where tourism has stimulated the demand for foreign labour; and push factors, as in Jamaica, where high unemployment levels are increasing pressures to seek employment outside of Jamaica; and inter-country networks based on family, culture and history.

Over the years migration from the Caribbean to the United States and Canada consisted mainly of low-skilled workers who worked in farm labour programmes. In recent times skilled workers have been sought in the areas of construction, the hotel industry and nursing.

Skilled workers and professionals migrate for reasons such as better pay, better facilities and more opportunities for upward mobility. There is the argument that the resultant impact of the migration of these skilled and professional people is one of brain drain. As skilled workers and professionals migrate, especially in the health sector, a void is created leading to concerns of increased workloads, reduced contributions to social protection benefits, loss of mentorship to young workers and a reduction in the membership base of the trade union movement. However, within the region it is unclear whether this is now transforming from brain drain to brain exchange or brain gain in the Caribbean due to intra-regional mobility of labour and return migrants.

A situation of brain exchange is now developing in Jamaica through the successful Return of Qualified Nationals Programme. Increasing numbers of qualified professionals are returning home to reintegrate into Jamaican society and contribute to the development of their country. In contrast, Barbados and Dutch St Maarten witnessed a number of health-care workers leave their island homes as unskilled workers to return as trained professionals in nursing and other areas of medical care.

Members of this group exhibit two distinct characteristics of migration – returning nationals and that of circulatory migration. As returning nationals they state unequivocally that they have no intention of migrating again, thus exhibiting the concept of “brain gain” and “value-added brain”. As circulatory migrants, they work sessionally at home and in their former adopted homes where many have established families and networks.

Migration of labour is, by its very nature, a trans-border phenomenon, tending to be more complex than trade or capital mobility (WTO, 2003). Today, Caribbean countries are points of origin, destination and transit for migrants. In recent years there has been growing concern about increased undocumented and irregular migration, with the flow of migrants being on the increase from the Caribbean to North America (IOM, 2001).

With the arrival of an integrated world economy there are profound implications for the socio-political structure of the Caribbean, where both labour and capital now circulate with increased freedom (Marfleet, 1998). However, with free movement of labour, migration appears to have been excluded from the process, with migrant workers being subject to the rules that promote the free movement of capital, goods, services and the integration of international business. Under the Revised Treaty of Chaguaramas, Chapter 3 speaks specifically to “Cross border employment of natural resources, human resources, capital technology and management capabilities for the production of goods and services on a sustained basis,” (CSME Unit, 2004) where labour is limited to skilled workers (who must show verification of their skills), University of the West Indies graduates, journalists, musicians and cultural

workers. These rules restrict the movement of labour and the exercising of labour rights, with migrant labour being viewed as a factor of production (ILO, 2002) – thus lending credence to the argument that population movements are a part of a notionally more fluid world of capital and information flows, and revealing starkly the ways in which new obstacles to free movement are being erected.

This is in sharp contrast to the movement of labour in colonial times, from the late seventeenth century until the 1960s. Colonial subjects emigrated to the “mother country” and inter-colonially as itinerant civil servants and as artisans with a view to bettering themselves. Colonial masters also immigrated to the Caribbean colonies as administrators, teachers and managers. This lends support to the view that Caribbean people were freer to move under colonial flags than they are now that a legal framework (Revised Treaty of Chaguaramas, 2001) governing the free movement of labour is being established.

Regarding the regulation of the temporary flow of migrants overseas there exists within the region a number of regulatory bilateral agreements with Canada and the United Kingdom. Within these agreements there are clauses that regulate the return of workers once their contract is completed. An example of such an agreement is the Canadian Farm Labour Programme between Barbados and Canada. In supporting the exchange programmes between Barbados and Canada there is a pre-departure preparation programme for temporary migrants, where nationals are prepared for their temporary integration into the Canadian labour market.

For the flow of migrant workers to Barbados there is a regulatory framework in place. Added to this Barbados is signatory to ILO Convention 97 (Migration for Employment Convention (Revised), 1949). Migrant workers are also protected under the Constitution of Barbados regarding protection of their fundamental rights and freedoms, including against forced labour and discrimination; they are to be treated no less favourably than citizens. Regarding the recruitment of migrant workers, there are short-term work permits not exceeding six months and long-term work permits which are also granted for specified periods. Immigrant visas for indefinite stays are also issued in special cases.

With respect to rights, benefits and social protection, regular migrant workers, though not family members accompanying them, receive the same benefits as nationals; irregular migrants on the other hand are only entitled to social benefits that include medical care, sickness benefit, old age benefit, maternity benefit, invalidity benefit and survivors benefit. Under national insurance legislation illegally employed migrants are insurable by the National Insurance Scheme (*The Barbados Advocate*, 12 October 2004). Nevertheless, these illegally employed migrants are disadvantaged, since deductions are made from their pay but not forwarded to the National Insurance Office (i.e. they are

kept by the employer) and in the event of retirement, illness, death or unemployment these workers' families cannot claim any social security benefits.

By contrast, the Bahamas presently has no bilateral agreements in place concerning migrant workers, at least not in the traditional sense. However, the islands have for many years hosted migrant workers who entered the islands legally or illegally in search of work and a better standard of living for themselves and their families. The Bahamas, having ratified ILO Convention 97, passed legislation in 2001 to protect the rights of all workers within their borders regardless of their immigration status.

When the Bermudian situation is examined the island does not appear to have any major concerns regarding irregular migrant labour. Bermuda is an overseas territory of the United Kingdom and, until permission is given to become a full member of the Caribbean Community (CARICOM), it remains an associate member. As such the Public Service Union (PSU) is of the view that Bermuda's status as an overseas territory excludes it from issues surrounding illegal migrants. The PSU suggests that its migrant labour comes through the normal regulatory channels of immigration. An immigration policy is in place which ensures that all persons entering Bermuda to work are issued with a work permit. However, the PSU is of the opinion that once Bermuda becomes part of CARICOM then the question of open borders for CARICOM nationals may introduce the issue of irregular migrants.

The Caribbean context

There are four pillars that are key supports to any society's wealth and development – health, sanitation services, education and transportation/communication, with health being the most important.

Health-care workers are choosing to migrate; their reasons include remuneration, working conditions, lack of upward mobility and the opportunity that exists abroad for personal and professional development. Remuneration, although tabled as a motivating factor for some nurses choosing to migrate, can become a negative as working conditions in the receiving country may not be ideal. Some nurses indicate that promises made before they left their home country have not materialized in the receiving country, and that to compensate they need to work two jobs to sustain an adequate standard of living. Consideration must also be given to those health-care workers who choose to migrate for the experience of working in another country and return as a "value added" health-care worker.

For those health-care workers who do not migrate there is an increased workload. This is complicated by the fact that experienced personnel are leaving and the inexperienced workers who remain have very few qualified

co-workers to help train and mentor them. This reality opens governments to malpractice lawsuits when serious mistakes occur. This begs the question, how ready is the region for the litigious habits of developed societies? Caribbean governments must take action to examine what is causing job dissatisfaction in this area, with a view to rectifying deficiencies, especially regarding the retention of nursing personnel in the 35 and older age group to allow for the mentoring and training process of the younger workers.

At present, Guyana is witnessing an exodus of labour, especially the highly skilled and professionals. It is questionable whether the rate at which Guyana can train and educate its workforce to deliver quality health can match the rate at which its most experienced and qualified are migrating. The Government is of the view that these workers can continue to leave and they will just train more. This view concerns the labour movement of Guyana not only because of the loss in membership, but also because it is the experienced and well-trained workers who are leaving. The reality is that Guyana is experiencing a brain drain.

In Dominica the situation is slightly different. In August 2004 the Government did not agree with the union that there was a shortage of nurses. The Government pointed out that of the 375 nurses working at the country's main hospital only 55 had migrated to the United Kingdom. In the Government's opinion this was an indication that they were training the best nurses in the region. However, the Government did point out that to alleviate the problems of nurses migrating they had increased the age of retirement for nurses from 55 years of age to 60 years of age. Also, included in the cost of the training programme initiated for registered nurse training is a fee to offset the cost of training in the event that trained personnel migrate (*Guyana Chronicle*, 28th August 2004).

For Barbados migration is viewed as being normal; reports indicate that among the Caribbean countries, Barbados has been the leading exporter of labour for the past 170 years (*The Daily Nation*, 7 July 2004). It is opined that too many assumptions are being made about the impact of migration on the delivery of health services, with the migration of nursing personnel in the 1960s and 1970s being more critical than it is now. Health care was at a critical turning point with the Queen Elizabeth Hospital (QEH) opening and coming on stream in 1964. Between 1959 and 1966 213 staff nurses left Barbados and there were only 100 graduates. Not enough trained personnel were available to replace the ones who had migrated.

During an interview with the Chief Nursing Officer of Barbados the following figures were made available on nurses migrating from Barbados between 1998 and 2003:² 1998 – 16, 1999 – 22, 2000 – 61, 2001 – 31 and 2002 – 45.

² Interview with the Chief Nursing Officer Barbados conducted on 10 November 2003.

In his opinion the figures have remained fairly constant, with the numbers being highest in 2000 when an entire graduating class migrated from Barbados because there were no available positions for them to fill. This occurred due to the fact that Barbados is a small island with one general hospital, which is an acute care institution and a teaching hospital, and one psychiatric hospital. These health-care institutions can only employ a certain number of nurses at any given time.

In examining the migration register for Barbados health-care personnel, it reveals that it is young workers who are leaving. One may argue that this is understandable since their upward mobility would be a challenge due to the limited number of available positions in the local hierarchy, compared with the perceived unlimited opportunities abroad to develop personally and professionally.

In Barbados tertiary level education and below is free and it has been suggested that nurses who benefit from free training should give it back in labour, i.e. that they should be “bonded”. This suggestion has met with some disagreement. The argument being tabled is that there is only one general hospital and it is a teaching hospital, hence it can only accommodate a certain number of nurses. As well, the remittances (BDS\$630 per month per student) paid to these students over the three years is not significant.

The Chief Nursing Officer also argued that it is not right to bond good workers who are receiving a salary, as in his view this is discriminatory since many skilled workers or university graduates leave Barbados as soon as they complete their studies, and they are not bonded. There is the recommendation, however, that it should be mandatory for the receiving countries to pay a recruitment fee or similar, towards the costs associated with educating and training these nurses.

In examining this recommendation, there are two elements that must be considered. Firstly, Barbados is also a receiving country, and as such the ability to compensate the sending country for its health-care workers comes into the equation. Secondly, when compensation is received, how can the Health Care Ministry guarantee this compensation will be channelled back into further training?

With respect to inward migration to Barbados, nursing personnel coming to work on the island are treated no less favourably than local nurses. What they do report is that the salary they receive is higher than they expected, but this is offset by the high cost of living on the island. This has resulted in them saving less than they had anticipated. There is also the observation that needs further examination that nurses coming to Barbados use the island as a stepping stone to migrate to the United States to continue their careers as nurses.

Added to this is the cultural barrier that appears to be given less attention. Nurses interviewed point out that migrant nurses are challenged by the dialect

and cultural practices of the locals. There is also a language barrier when nurses are recruited who do not have English as their first language – this is cause for concern especially when crucial information is being taken from patients.

The concern has been raised by the Ministry responsible for nursing, the nursing fraternity, trade unions and the nursing school that when nurses choose to migrate, the Government should ensure that the conditions they go to should be no less favourable than those they currently work under. Recognizing that one cannot tell people not to migrate to what they deem to be better working conditions, the Government needs to ascertain what is causing the job dissatisfaction. One suggestion is to implement an exit survey, which should provide a consensus on the root causes and some suggested solutions. Furthermore, policies should not be implemented if there is no consensus on what the nurses want. Moreover, deciding which policies to implement should be carried out with the input of nursing personnel.

Migration occurs for many reasons and in varied ways but one of its least desirable aspects is trafficking for purposes of labour exploitation. Policy-makers in the Caribbean are becoming aware of the gravity of this activity but “information” is mainly in the form of anecdotes and information received from health-care personnel during union meetings. The data the CPSU have accumulated on this issue has been lacking; these organizations have not viewed it as of concern and or seen any urgency to collate such information. Therefore, at present there is very little systematic evidence and no documented case studies on the issue, and such paucity of information needs to be rectified.

Nevertheless, health-care providers in Barbados are gravely concerned with this issue, considering the fact that irregular migrants receive the same health care as citizens, the only difference being they are required to pay for medication. Since some of these people cannot afford to pay for medication the rules are bent to accommodate them and preserve the good health of the wider society. It is suggested that this has placed a strain on the available resources of the polyclinics and is leading to continuing increases in government finance to the health-care system. This lends support to the argument that the health-care system’s need for funds appears to be insatiable, with the cost of delivery outstripping its ability to recoup the many injections of finance it receives.

Another concern tabled was the likely impact of migration not only on communicable diseases, but also on the instances of HIV/AIDS and the related delivery of health care in our societies.

The situation and consequences

The effects of labour migration in the Caribbean have been mixed. There are those who choose to migrate for the experience and to return home as

value-added personnel. Then there are those who choose to migrate in search of greater opportunities at the expense of destroying familial relations.

The CPSU need to develop strategic partnerships not only across the region but internationally as well, with a view to protecting Caribbean workers as they move across borders. There is a need for cross-border cooperation to ensure that not only the human rights of migrant workers are protected but also that they work in decent and humane working conditions. Interviews often revealed instances where workers who choose to migrate were too embarrassed to return home, instead choosing to continue working abroad under substandard conditions of service and being treated like second-class citizens. One nurse stated that a co-worker whom she would consider to be a good friend had migrated with the understanding that she would be working as a nurse, but was in fact working as a nursing aid.

There is a need to provide a measure of empowerment to migrant workers, to give them a voice on the one hand and to eliminate any negative reactions of society on the other. This came into focus in Barbados in July 2004. Workers from Guyana and St Vincent were accused of coming and taking the jobs of local Barbadians. Members of the public had to be urged not to stir up or incite fear and xenophobia. Reassurance was also given to migrant workers that their rights would be protected while in Barbados (*The Daily Nation*, 7 July 2004). Such empowerment and the elimination of negative reactions can be successfully achieved through the CPSU by way of education programmes that are strategically planned and delivered.

In order to augment the positive and minimize the negative aspects of migration, the CPSU need to return to basics. These include working towards economic improvement for their members, social transformation for the labouring classes and promoting the democratic interests of its members. By focusing on the basics the CSPU will help transform the challenges of immigration into positive developments for both receiving and sending countries.

Recommendations

One important way the wealth of any society is gauged is principally by the delivery of and access to a quality health-care system. To retain nursing personnel they must be provided with adequate terms and conditions of service and reasonable remuneration – the provision of not only a decent wage but also an adequate living wage for all health workers. Other forms of compensation should also be considered, such as bilateral agreements that lead to cross-fertilization of ideas where those workers skilled in areas not available in the Caribbean would provide the training to local health-care workers and the workers who migrate would seek to enhance their skills. Also, noting that

each ethnic group carries its own health-care problems these migrant health-care workers would also be able to transfer a measure of knowledge.

The concerns tabled here highlight the need to carry out greater research into the extent and impact that migration and Caribbean migration policies are having on the loss and retention of labour – unskilled, skilled and professional – and on matching the skills needed to the demands for labour. This reflects the growing concern about the loss of skilled personnel, particularly health sector workers, and the need for governments to fill the labour shortage gap (IOM, 2002). In addition, there is the need to study whether or not managed migration can counterbalance the expected impact of ageing on Caribbean societies.

Another area that needs consideration is how to attract those people who have raised a family, have a desire to enter nursing, are young enough to start a new career and are now willing to enter the workforce as caregivers. Moreover, the perception of nursing as one of changing bedpans and other menial tasks needs to be changed. Ways of attracting more men into the profession of nursing should also be considered.

There is also the need to examine the issue of increased remittances to the Caribbean. Such an examination must be considered in conjunction with the increased numbers of retirees who are now returning home and therefore increased remittances may actually be in the form of pensions or other social security benefits accruing to the Caribbean baby boomers, who would have migrated in the 1950s and 1960s to the United Kingdom, Canada and the United States and who now fall into the category of returning nationals.

Remittances are not appropriate compensation for taking the best brains, especially the health-care workers of the Caribbean. When there is large-scale exodus from a country, as in the case of Guyana, policies to tackle the brain drain in the sending country may not adequately deal with the root cause of the problems. Receiving countries and sending countries need to consider development policies that are purposeful; that place greater emphasis on temporary movement, with incentives to return home, and on remedying the institutional failures that cause both skilled and unskilled workers to leave their homes for greener pastures. Such integrated policy measures could provide for better development in the sending countries whilst at the same time help receiving countries with their labour shortages.

The CPSU need to initiate dialogue and develop research with a view to tabling policy on migration as it regards shifting opportunities for low-skilled, skilled and professional workers, on matching needed skills to the demand for labour and on the impact of ageing on Caribbean societies.

One final recommendation would be the examination of the concept of managed migration for the Caribbean. This has been defined by the Caribbean Community in 2005 as “a regional strategy for retaining adequate numbers of

competent nursing personnel to deliver adequate health-care programmes and services to Caribbean nationals”. This strategy should be examined in the context of, and from the perspective of, the CPSU who have a key role in ensuring that workers have a right to choose where they wish to work and live and that this right is respected. Consideration must also be given to what may be viewed as the expected counterbalance to be achieved through this strategy where improved terms and conditions of service, value and recognition for the work of health-care workers are recognized.

References

- The Barbados Advocate*. 2004. “NIS benefits for all”, 12 Oct.
- The Daily Nation*. 2004. “Migrant workers in check”, 7 Jul.
- Guyana Chronicle*. 2004. “Dominica nurses migrating”, 28 Aug.
- ILO (International Labour Organization). 2002. “Migrant workers”, in *Labour Education*, No. 129, 2002/4 (Geneva).
- . 2004. *Towards a fair deal for migrant workers in the global economy*, Report VI submitted to the International Labour Conference, 92nd Session, Geneva, 2004 (Geneva).
- IOM (International Organization for Migration). 2001. Background paper to the International migration policy seminar for the Caribbean, Kingston, Jamaica, 28 May–1 Jun.
- . 2002. *Report and Conclusions*, Follow-up Seminar to the International migration policy seminar for the Caribbean, Santo Domingo, Dominican Republic, 28–31 Oct.
- Marfleet, P. 1998. “Migration and the refugee experience”, in R. Kiely and P. Marfleet (eds): *Globalization and the Third World* (London and New York, Routledge).
- OECD (Organisation for Economic Co-operation and Development). 2002. *Service providers on the move: A closer look at labour mobility and the GATS* [TD/FC/WP (2001) 26/Final] (Paris).
- PSI (Public Services International). 2004. *Women and international migration in the health sector*, Final Report of Public Services International Participatory Action Research 2003.
- Simmons, A.B. 1998. “NAFTA, international migration and labour rights”, in *Labour, Capital and Society/Travail, Capital et Société*, Vol. 31, Nos. 1 & 2, Apr.–Nov.
- WTO (World Trade Organization). 2003. *Labour mobility and the WTO: Liberalising temporary movement*, Global Economic Prospects 2004 (Geneva).