

La santé, le labour, et la xénophobie : The Historical and Political Machine of North

African Immigration to France

Monica Meeks

Mediterranean Migration Mosaic

Abstract: This report sought to find what role labor plays in helping or hindering immigrants from North Africa adapt to life in France. It takes a primarily historical and political science view to respond to research questions and heavily relies upon in-person interviews as research material. It also examines in which ways health intersects with labor, concluding that the excellent French health care system can often serve as an aid to social integration. In recounting the life experience of a Polish immigrant family, it seeks to explain in what ways the North African experience is typical of all immigrants and in which ways it is particular and unique. Lastly, it examines how xenophobic French attitudes often take a toll on immigrants when they are labeled as scapegoats for economic crisis. Primarily qualitative in nature, this paper examines life histories to draw the conclusion that immigrants in France, and North Africans in particular, have been essentially defined as “workers” in the French public eye above all else. Introduction¹

When this author conducted interviews in France and Morocco with North African migrants, most often displaced due to work, she realized that the themes of work and health were inseparably linked in the phenomenon of immigration. France provides health care to immigrants so that they can continue to work and to build France. Inversely, immigrants stay there even after having reached retirement age so that they do not lose the pensions and social security benefits they have gained from working there.

It is impossible to discuss the role of the immigrant in France without talking about his role as a worker. In the eyes of the French, his contribution of labor serves as his main reason for being in their country. Even though France has long been a receiving country of immigrants, with waves of Belgians, Italians, Spaniards, and many other nationalities arriving since the 19th century, immigration never played a significant role in its national identity. According to French historian Gérard Noiriel, “pedagogic simplification makes a caricature of the presentation of the

¹ Note: Since this essay was originally written in French, any quotes from French academic and scholarly sources have been translated by me. Additionally, I have translated into English all citations and notes of transcribed conversations. For the original French copies of these sources, you can contact me at monica.meeks@gmail.com.

immigrant, making him a foreign body to the nation, an individual who has the right to good republican sentiments because he comes to work *chez nous* and do the dirty work that the French would be obliged to execute themselves if he was not there.”²

In terms of immigrants in the French health care system, the opinion of this population is actually quite positive thanks to *la Couverture Maladie Universelle* (CMU), a feature of their health system that provides free health care for all citizens and residents who earn less than a certain threshold. Because of this allocation, the cost of their treatment is completely paid for by the French government. They highly support coverage and accessibility of health care, partly because the French remain very much attached to the republican values and respect for human rights that were instilled during the French Revolution. According to Dr. Jean-Paul Charpiot, a general practitioner who works in a health clinic serving immigrants, “I think that it’s simply a moral position. Political, moral, and maybe not very economical, in the end.”

But can this excellent health care coverage only be explained by this moral position, or does it also concern the desire to restore and enhance worker productivity? Is there a political and economic goal within this moral goal? According to the French philosopher Michel Foucault, “The sick man, without a doubt, is not capable of working, but if he is placed in the hospital, he becomes a double burden for society.”³ This is true not only for immigrants, but for any working citizen. A sick person cannot be productive, and therefore he cannot contribute to the State. In this political perspective, “medicine becomes a national task.”⁴

The controversial discussion of immigration in France usually does not surround Asians, Italians, or the Portuguese. Even when discussing Eastern Europeans, who make up the newest

² Noiriel, Gérard. *Le creuset français: Histoire de l’immigration, XIXe-XXe siècle*. Éditions du Seuil, Paris, 1988, p. 19.

³ Foucault, Michel. *Naissance de la Clinique*. Presses Universitaires de France, Paris, 1963, p. 18.

⁴ *Ibid.*, p. 19.

wave of immigrants, the same polemic arguments do not become a part of the debate. The main source of controversy surrounds North Africans, specifically people coming from the Maghreb region of Algeria, Tunisia, and Morocco. Since this author had the opportunity to interview Moroccans in France, as well as *in situ* in Morocco, the interviews allow for a deliberation this issue in greater depth.

Therefore, although the interest of this article started with health care, it evolved into a different question: how does labor define the immigrant in France? Does his job integrate him into French society, and if so, how? If France never has had a national identity that validated immigration, how does it justify the presence of the “Other” within its borders? Health care certainly plays a role in this thematic, but it does not give a complete explanation.

The content of this report draws upon qualitative interviews conducted in spring 2013 in southwestern France and in northwestern Morocco. First, the report will tell the story of Ahmed Abadi, long-time patient of Dr. Charpiot, who worked in France for his entire career. Although he is now retired, and although he once dreamed of returning to Morocco, he plans to stay in France for the rest of his life. Next, the report will highlight Polish agricultural workers from Moissac, France. Coming from within the European Union, they serve as a counter-example to the Moroccan immigrants. Lastly, this essay will study Youssef, a Moroccan who had worked in French factories and later decided to return to Morocco because of French xenophobic attitudes. All of the names and identities of the people interviewed are changed to protect their anonymity.⁵ In examining these interviews and life stories, this report seeks to answer the following question: how do the experiences of immigrants (Moroccan in particular) in the French job market explain their role in French society?

⁵ However, the names of Dr. Charpiot and Dr. Guiraud have not been changed, since they did not wish for their identity to stay anonymous.

II. Brief history of North African immigration in France

North Africans currently make up approximately 30% of the foreign and immigrant population in France.⁶ This group, called *Maghrebins* in French, come from the northwest part of Africa – specifically Morocco, Algeria, and Tunisia – which constitutes a former French colonial zone. Their population is high in France in general, as well as in the Midi-Pyrenees region in the southwest, where Toulouse is located. Moroccans alone make up 20% of foreigners in this area.⁷

Morocco, Algeria, and Tunisia have three different histories in relation to that of France. However, despite each country's different history, the Maghreb is unified as a region by the Arabic language, by Islam, and by a similar culture. Although this paper's research focused on Morocco specifically, one could use their example to speak more generally about North Africans in France.

Why are North Africans in France in the first place? After World War II, France experienced a period of rapid economic growth called *Les Trente Glorieuses*, or The Glorious Thirty. During this postwar boom, France needed manual labor to complete its numerous development projects in several different industries, notably agriculture, mining, and construction. The labor force of the existing French population was not sufficient. Thus, the country turned its attention towards the Maghreb, constructing guest worker agreements with several different countries. The accords between France and Morocco, for example, were effectuated in 1963, seven years after Morocco achieved independence in 1956. Algerians did not even need visas to work in France before 1962, since they were judicially French citizens at

⁶ Milza, Olivier. *Les Français devant l'Immigration*. Questions au XXe siècle : Éditions Complexe, p. 105.

⁷ Teulières, Laure. *Histoire des Immigrations en Midi-Pyrénées, XIXe-XXe siècles*. Nouvelles Éditions Loubatières, Toulouse, 2010, p.123.

that time. This wave of North African immigration was in full force from 1967 to 1972. In 1970, 174,000 immigrants arrived in France, compared with 65,000 in 1956.⁸

This economically prosperous period was abruptly ended by the oil crisis in 1973 which shocked the entire European economy. Many native French citizens found themselves unemployed. The resulting financial instability led to sentiments of xenophobia and to the search for a scapegoat. As Noiriel explains, “Very often, in countries of high immigration, the method of escaping unemployment is to accept the demeaning jobs that people had left to immigrants during periods of prosperity.”⁹ Even if immigrants work in extremely menial positions that native French citizens would never want, they become competitors for the same low-skilled jobs during periods of economic crisis. This financial insecurity profoundly changed the popular political opinion on immigration. In 1974, President Valéry Giscard d’Estaing closed French borders to immigration. Finding work in France became much more logistically difficult for immigrants in general and for North Africans in particular.

The cessation of labor accords created a paradox. The immigrants who came to France on guest worker agreements were never expected to be permanent: a farm laborer, for example, could work for six months in France during peak agricultural season and then return home to Morocco. However, when the legislation stopped, so did the circulation, resulting in a more permanent and regular immigrant presence in France. If the Moroccan worker returned home, he would risk losing his job, the benefits that he had earned abroad, and the possibility of return. Additionally, his standard of living and level of wealth were relatively higher in France. As Zakya Daoud describes, “Even if he lives precariously in Europe, compared to his village life, a minimum European wage quickly becomes an indicator of wealth – and that is the status that the

⁸ Milza, Oliver, p. 105.

⁹ Noiriel, Gérard, p. 270.

helpless, sick, aging emigrant wants to preserve.”¹⁰ The North African laborer could tolerate menial French jobs because those very jobs still made him rich and important in his home country.

The increasingly permanent immigration trend sparked the need for family reunification legislation. This period, which began in the 1970s and lasted up until the 1990s, reunited wives and children with their husbands and fathers who had come to work in France during the Glorious Thirty. The number of reunited families coming from the Maghreb, as well as elsewhere, peaked in 1991 with 40,000 migrants.¹¹

As the North African presence became more structural and more prominent, so did the xenophobia towards this group on the part of native French citizens. As the French sociologist Pierre Bourdieu writes, “The current intolerance can be explained by the end of temporary migration and the consciousness by the old immigrants of the definitive nature of their installation in France.”¹²

This brief history of North African immigration in France provides a context in which to comprehend the individual life stories in this paper. Their history is one of economic necessity, of post-colonialism, and of France’s rejection of a situation that they themselves created.

¹⁰ Daoud, Zakya. *Marocains : Les Deux Rives*. Les Éditions de l’Atelier, CCFD, Paris, 1997, p. 64.

¹¹ De Haas, Hein. “Morocco’s migration transition: trends, determinants, and future scenarios.” *Global Migration Perspectives*, n° 28, avril 2005.

¹² Bourdieu, Pierre, 1987. Cited by Noiriel, Gérard, p. 49.

II. Ahmed: Moroccan industrial worker installed in France

On February 20, 2013, a small group of professors and students went to an apartment in Toulouse's Bagatelle neighborhood, which is known for its immigrant community. They were welcomed by Fatima, the daughter of the interviewee, Ahmed. The famous Moroccan hospitality was instantly perceptible as she offered her guests mint tea, cashews, and dried fruits. After introductions, her father began to tell us his life story. Since he never learned to speak French fluently, his daughter helped translate, as she could speak English, French, and Arabic.

Ahmed was born in a small Moroccan village that he described as "really far out in the country." His family lived near to an American military base that was constructed when he was 13 years old. When he reached the age at which he could work, he served at the base as a cleaning person (making the beds for the soldiers, for example). At the time, everyone spoke of going to France, since the Glorious Thirty were beginning and work was abundant there. Therefore, when a Frenchman proposed for him to go and helped him find the job, he quickly accepted the opportunity.

Ahmed came to France by train, bringing only the clothes on his back. He did not speak a word of French. Nevertheless, he arrived shortly in Moissac, France, a small farming town about an hour away from Toulouse. He participated in Moissac's agricultural economy by working in an apple orchard. After he "became sick of the country," he moved to Toulouse and obtained a job in a factory. Shortly after, he met Dr. Jean-Paul Charpiot and Dr. Jean-Claude Guiraud, Dr. Guiraud was a general practitioner who worked mostly with immigrants; he also served as the occupational health doctor for the factory in which Ahmed worked.

In 1978, the year of his daughter Fatima's birth, Ahmed had an accident at work that permanently hindered the use of one of his legs. However, thanks to Dr. Guiraud, Ahmed did not

have to stop working because of this injury. The doctor found him a job in a company that employed handicapped workers, and Ahmed worked there until he was 65 years old. At this age, he finally stopped working and went into his retirement, but only after dedicating several decades of his life working in France.

It is no wonder that Ahmed spoke of Dr. Guiraud so fondly. In addition to helping find a stable job, the doctor also helped bring his family over from Morocco to live with him. Fatima explained that since her father is illiterate, he needed the help of Dr. Charpiot and Dr. Guiraud to fill out the paperwork so that his family could benefit from the family reunification laws. After the paperwork was filed, Ahmed's wife and two adolescent children arrived. Fatima was the first child of his to be born in France. Today, when she is not with her father, she uses her ability to speak three languages to work at Toulouse's international airport, Aéroport Blagnac.

With regards to health care, Ahmed knows both the French and the Moroccan systems. In France, he was very well received by the Migrant Health Consultation of Dr. Charpiot and Dr. Guiraud. These two doctors have the philosophy that health is linked to all other aspects of life, such as where people live, their family habits, and of course, where they work. They believe, as Claud Veil writes, that "The state of health is the result of the interactions between the individual and the environment that surrounds him; there is good health if there is good adaptation."¹³ When Ahmed's leg was injured, his doctor-advocates found him a job that did not require walking. They recognized that meaningful work could be a therapeutic activity, because it kept their patient engaged as a contributing member of his community.

This demonstrates that the job market does not only function as an economic motor, but also as a method to integrate workers into society. This assimilation aspect is of particular

¹³ Veil, Claude. *Vulnérabilités au travail : Naissance et actualité de la psychopathologie du travail*. Présentation par Dominique Lhuilier. Éditions Erès, Toulouse, 2012, p. 89.

significance for immigrants, who, due to their different language and culture, have a greater need to integrate. This engagement need not translate into a loss of the immigrants' native roots or culture; it merely provides them with an opportunity to support themselves. An isolated, poor, unemployed person is less likely to be healthy one who can work and pay his bills. One must remember that, as the World Health Organization defines, "Health is a state of complete physical, mental, and social well-being, and does not consist merely of an absence of sickness or disability."¹⁴ In France, the doctors healed him by also "healing" his professional life.

On the other hand, his experience with the Moroccan health care system is not nearly as positive. Fatima said that Ahmed receives dialysis in Moroccan clinics from time to time. He needs to have this treatment a few times per week, and therefore, when he visits Morocco on vacation, he finds clinics to receive his necessary medical care. In addition, he was once hospitalized in Morocco. Fatima described the experience:

It's really a different system...there's a lot of corruption in Morocco. Right now, for instance, he's worried about the clinic where he gets his dialysis in Morocco. He wants to switch. He says that the nurses don't take good care of him, and that if he's not super nice to them, that if he doesn't give them tips from time to time, that they don't take care of him. Still, there's a lot of good stuff that they do – dialysis centers are free for people who don't have an income. He can't access them, however, because he's not a Moroccan resident, because he doesn't live in Morocco. And he can, so to speak, pay for himself.

This disparity of health services can surely be attributed, at least in part, to the relative poverty of Morocco compared to France. A country cannot provide a very high quality of medical care in the public sector if it cannot raise the necessary taxes to finance it. However, this disparity highlights another reason for which Ahmed's (and many immigrants') appreciation for

¹⁴ Preamble to the Constitution of the World Health Organization, such as it was adopted by the International Conference on Health, New York, 19-22 June 1946; signed 22 July 1946 by the representatives of 61 countries. 1946; (Official Acts of the World Health Organization, n°. 2, p. 100) and brought into effect 7 April 1948.

France's health care system is so high: they have memories of other systems that function a lot worse than the French one.

Ahmed could be considered by an employer as an "ideal" worker. He never missed a day of work, and he kept working even after a serious injury. Although he never mastered the French language, he wanted his children to adapt to their new surroundings in France. He never wanted him or his family to impose their ideas on others. According to Fatima, "They didn't want to bother anyone. I think that they kept living like they would have in Morocco, but in adjusting themselves, because they didn't have a choice." She proves that his wishes came true: she is well-educated, she speaks three languages, and she has a well-established career. Although she will always feel part Moroccan and part French, she says, her life is entirely in France.

Ahmed still appreciates the French job market, and especially the health care system. He did not have to abandon his Moroccan roots to achieve this appreciation, but he did have to adapt certain habits and behaviors. His story reveals that he could not have worked as long as he did, nor as easily have integrated into French life, if he had not had the help of Dr. Charpiot and Dr. Guiraud. He shows that the lines between integration, work, and health are not perfectly clear; they are all different bolts in the same machine of immigration.

III. Polish agricultural laborers in Moissac

On a weekend visit to Moissac, France, an interview took place with a group of Polish farm workers. This author spoke with a family consisting of a mother, Lena, her son Edward, and her boyfriend Roland. Luckily, all three spoke at least some French, and Edward was completely bilingual in French and Polish. This allowed for a more direct and more interesting conversation.

Lena and Roland are agricultural workers in Moissac's orchards. They both originally started their work in the fields by collecting the fruits. Next, they worked at the fruit station, where they organized the produce, prepared plates to ship, etc. Roland still works there, while Lena is currently not working. At first, they both came only for the busy growing season when labor was needed and then returned home to Poland, similar to the "circular motion" of North Africans during the Glorious Thirty. Now, they stay all year long. Lena came for the first time seven years ago. Last year, she decided to bring her son with her, as she knew they wanted to live in France permanently. Roland chose to move to France two years ago. The two met through mutual friends last year thanks to the Polish association.

Their motivation to immigrate to France was mostly financial. They earn four times more money in France than they can in Poland: an agricultural worker in each place can earn 300 euros and 1,200 euros per month, respectively. The magnitude of this income gap made their decision to stay permanently in France quite easy. They sometimes return to Poland, and although they miss certain aspects of their life there (mostly Polish vodka, according to Roland), they feel satisfied with their life in France.

Edward represents their new life in France, much as Fatima did for Ahmed. According to Roland:

He came to France, he learned the French language, and he goes to French school. With all that, it's easier for them [Lena and Edward] to think of another life in France. She wants it like that, too. Like that – all the time,

new friends, all the time. He always speaks Polish with us. That way he can go to Poland and he can have Polish friends. That still means that at home it's Polish, and at school it's French.

[...] In France, there's a lot for children. At school, it's easier. You don't have to pay for everything all the time. In Poland, you have to pay all the time...in France, no. Given that, we want to stay in France.

Similarly to what Ahmed wanted for Fatima, Lena hopes that Edward will adapt to French life without losing his Polish origins. Although she wants him to make French friends at school, she still wants him to be able to communicate with his Polish grandmother. Nevertheless, his family will always remember that life was more difficult in Poland. Although they hope to continue their family traditions, they also hope benefit from all they have gained in France.

The Poles, the most recent wave of immigrant workers in France, are viewed very differently from Moroccan workers. While Moroccans come from the Mediterranean culture of the south, the Poles come from the formerly Soviet culture of the East. Moroccans are Muslim while Poles are Catholic. Moroccans come from Africa, another whole continent, while Poles come from within European Union borders.

This antithesis can even be noticed in their work styles. The dichotomy was very well explained by Monsieur Duchamp, the owner of a large fruit orchard in Moissac:

They're really two completely different populations of workers. The Poles come from the East, where they're used to a certain hierarchy and they listen well to orders. In the morning, I give the instructions, and they do them. They'll do the same thing for eight hours, nine hours, ten hours. They're very attentive and very meticulous. But, if you will, they're going to have a certain rhythm of work, and they're going to keep that rhythm the whole time. They're not going to speed up or slow down. The Moroccans, on the other hand, have a natural ease for collecting the fruits, much more than the Poles. In that aspect, they're much more efficient than the Poles. For collecting cherries, for example, I have a Moroccan who can collect four bags while the Pole will collect two. They have a natural ability, and they're going to function a little more...well, anyway, I think they have a little more feeling of severity. They don't want to listen to orders, that's for sure. They're not very attentive, that's for sure. But, if you know how to handle them, they're super workers. Better than the Poles.

We only spoke briefly with the Polish family about health care. Like education, they appreciate that it is free in France, whereas they would have to pay for medical care in Poland. However, with regards to labor, their case is interesting for several reasons. First, the farmers spoke of them mostly with regards to their capacity to work. The motivation for having them here, both in the eyes of Poles and those who employ them, is mostly financial.

Furthermore, they symbolize the changing demographics of immigrant workers in France. The Moroccan wave is older, peaking in from the 1950s to the 1970s. Their future in France will not be first-generation immigrants, but second- and third-generation – in other words, French citizens with Moroccan origins, like Fatima. On the other hand, the circulation of manual labor is rather open within the European Union (EU). According to the organization, “any citizen of the European Union has the right to move to another member country in showing a valid identity card or passport. In any situation, no exit or entry visa can be imposed.”¹⁵ This law applies to visits lasting less than three months. For those who stay longer, there are more requirements, but it is essentially much easier for Eastern Europeans to come to France than for Moroccans. Many years ago, farmers predicted this demographic transition in agricultural labor. One of them remarked, “The day when we will have no Moroccans to work in the fields we’ll be in bad shape; we’ll need to call on the Russians because the average Frenchman doesn’t want to work on the farm.”¹⁶

Moreover, the Polish immigrant is considered “easier” to deal with than the Moroccan immigrant. He works without asking questions, and his culture has more in common with French

¹⁵ European Union. “Droit de libre circulation et de séjour des citoyens de l’Union et des membres de leur famille.” 28 November 2009. Accessible from http://europa.eu/legislation_summaries/internal_market/living_and_working_in_the_internal_market/l33152_fr.htm. Accessed 15 May 2013.

¹⁶ Barou, Jacques. « Ouvriers agricoles immigrés et exploitants français : représentations croisées. » *Les Étrangers dans les Campagnes*, Presses Universitaires Blaise Pascal, février 2008.

culture. With his memories of the Soviet regime, he is used to having to work harder than he works in France. The French rhythm of life is much calmer than what he is accustomed to, even in working the menial jobs no French person wants, as in farm labor. According to Roland: “In Poland, we work all the time. For example, from 6:00 in the morning to 2:00 or 3:00 in the afternoon. There are no breaks, or if there are breaks, they’re small, maybe at 10:00. But here in France, they work 8:00 to noon. That’s only four or five hours.”

Therefore, the Pole is more accepted by the French because he develops their economy without disrupting their rhythm of life. His presence and his cultural differences are less threatening. While Ahmed’s generation was not culturally “threatening,” so to speak, this appears to be truer of the new generation of Moroccan workers. Now that the Moroccan presence in France has existed for over a half century, they feel that they should not have to be as discrete about their culture or religious beliefs. Their predecessors like Ahmed had to lay low because, as Fatima said, “they had no choice.” But now they have choices, and their refusal to be quiet and to be submissive to French society causes tension between them and the French.

It should not be portrayed, however, that Moroccans are “victims” in a system that only wants them for their labor. One can observe in the case of Ahmed and Fatima, as well as with many other examples, that many Moroccans feel very well adjusted and integrated to French life. But in studying the case of the Poles, one can see that France has had a much harder time at integrating North Africans than it has had at integrating other immigrant groups. After all, France wanted to bring Moroccans to work during the Glorious Thirty, not to challenge their concepts of *laïcité* (complete secularism in the public sphere) or their republican values. This observation can help the reader understand that to only see immigrants as workers, and to not understand the culture from which they come, will create difficulties for the society that receives them.

IV. Youssef: Moroccan industrial worker returned to Tétouan

Not every Moroccan that arrived in France during the Glorious Thirty had a positive experience. For example, Youssef was a Moroccan industrial worker who worked in France for seven years before deciding to return to Morocco.

Youssef arrived in France in 1970 when he was 20 years old. He was first in the Parisian metropolitan region where he worked as a skilled factory worker. He described the situation:

France asked for workers, and for factory workers in particular. I gave my papers – I had done my professional training as a *tourner* [a type of specialized industrial worker]. I turned in my application papers, and they accepted me to go work in France. I signed a contract...for two years. That's all that I knew. They gave me the ticket, they paid the trip expenses, and I came.

In Paris, he lived in an apartment building with other young workers. He was required to share a small room with two other people that he had never met. This type of living situation did not please him: “What I didn't like was having a triple. They could kill me! They could rob me! I didn't like it.” Although he eventually found an individual room, even that was a struggle; people told him, “There's lodging over there on that side of town, that's where you the immigrants go.”

At his job, he worked with plastics, which he described as “pretty boring.” Nevertheless, after a month of apprenticeship, he achieved official designation as a “qualified” worker. He kept working in this factory for two years, even after his contract ended. After the two years passed, he could not return to Morocco because the trip would have been too expensive. He stayed in the Paris metropolitan area until 1972. Afterwards, he moved to Alsace because he had read a newspaper advertisement that requested skilled workers there.

In Alsace, he worked in a different factory as a welder. This position was much more demanding than the one he had had in Paris. He needed to wake up each morning at 4:00 AM,

catch the bus to work at 5:00 which waited for him outside his apartment, and then start working at 6:00. The work itself was very physically demanding; according to Youssef, “It was muscle work, and at the time, I was real skinny.”

He remembers his time in Alsace quite negatively. He explained that the Alsatians were quite cold and unwelcoming to him. He felt racist sentiments from his neighbors, especially in the town of Colmar: “There was, at the time, a café where it was written: ‘Forbidden to foreigners.’ There was a sort of setting aside of immigrants.” After he decided to leave his employer-provided housing to look for his own apartment, he continued to encounter difficulties: “Saturday, Sunday, we couldn’t leave the building. If you walked 200 or 300 meters, you’d be stopped by cops that asked for your papers.”

Even though he was a solid employee – he was in France legally, and his boss was always very happy with his work – he felt that the Alsatians viewed him with a condescending eye. There were, however, some exceptions: “There was a woman who worked at the laundry cleaners – she was a marvelous woman. She welcomed us into her home, and she cooked us Alsatian specialties with her husband.” But even if all the Alsatians had been as kind as this woman, the distance between his work and the city of Colmar made it difficult to meet locals. He could not become more integrated because of this geographical problem.

Eventually, after years of frustration with xenophobic attitudes, he decided he could not stay in France, and especially not in Colmar. “I couldn’t stand that city,” he said. “I decided to go back – I said to myself, ‘I’m going back to my home. That way, if I’m viewed badly by others, at least it’s by my own people. So I came back.’” He returned to Tétouan, his hometown, on January 1, 1978. He has stayed there ever since.

Despite his disappointment with France, he was very impressed by their health care system. He needed to go to the hospital twice while he was there. In 1971, he had surgery to treat his appendicitis. Three years later, in 1975, he had a welding accident at work. His interactions with French doctors, unlike his interactions with most Alsatians, were extremely positive; he described his hospital visits with a twinge of nostalgia. Like Ahmed, his appreciation for these doctors was influenced by the disparity between the systems in France and in Morocco:

The doctors there are something else. They're human. In the end, they're very humane people. They don't want to know this or that [about your financial situation], they just take care of you. Only afterwards do they ask you to pay. They don't ask you to pay beforehand. They're really super people, all of them. The doctors in France are excellent.

[...] There's an enormous difference between certain doctors. French doctors, they are, how do you say – they don't want to get rich off of their career. They just want to practice medicine. But here [in Morocco], it's the opposite...what's more, here, prescriptions and medications are expensive. Medical visits, too expensive. The average person can't pay for them.

Youssef's story reveals many things about the experience of a Moroccan in France. His job was exigent and exhausting, but he could bear it. Like Ahmed, he worked reliably and consistently all his years in France. Youssef was even a skilled laborer, rather than unskilled, who had taken high school classes in Morocco and professional training before coming to France. His friends were mostly Moroccan, but he expressed that he would have liked to participate more in French life. Even though he grew up Muslim, he said that he did not practice his religion while he was in France, and therefore was not challenging the deeply ingrained French principle of *laïcité*. Therefore, the only thing that can explain his negative experience is the xenophobia that was prevalent among Alsatians at the time.

This fear of the “Other” can be explained in part by the oil crisis that hit France in 1973. Youssef arrived at the end of the Glorious Thirty, and during his time there, employment became

more and more scarce. Four years after his arrival, the unemployment rose to such high levels that, as referenced earlier, Giscard d'Estaing halted guest worker immigration policies. Even though unemployment during periods of economic crisis are higher for foreigners than for locals,¹⁷ those hurt by the bad economy, especially unskilled laborers, often label immigrants as “thieves” of their jobs. These feelings of insecurity which emerge change the discourse surrounding the “Other” and can be so strong as to change political agendas. As Noiriel rights, “Exacerbated xenophobia during periods of economic crisis often translates into new policies of relation measures against immigrants geared towards satisfying not only the interests, but mostly the phantasms of the social groups represented in Parliament.”¹⁸

With Ahmed's story, one could observe that his relationship with French doctors eased his integration in France; his work and his medical care validated him. However, despite the positive experiences Youssef had with French health care, they were not enough to integrate him in France. In his care, his demanding job was not the main source of his struggles; rather, it was French xenophobia that compelled him to leave. The fear of unemployment and of the “Other” among Alsatians created hostile emotions towards immigrants like himself. The welcoming attitudes of French doctors were not enough to motivate him to stay in France.

The Poles were well-integrated despite having never taken much advantage of French health care, while Youssef felt compelled to leave despite his positive experience with this system. Therefore, one can conclude that work plays a bigger role in integrating immigrants than health care does. Additionally, one cannot forget the role played by the French perception of immigrants. If this opinion is too unwelcoming, the foreigner will never feel integrated in France, despite his efforts. The present-day complaints about North Africans often revolve

¹⁷ Noiriel, Gérard, p. 255.

¹⁸ Ibid., p. 269-270.

around their insistence to express their religion, their culture, and everything that makes them “un-French” – which the French perceive as a resistance to social integration. However, Youssef’s story shows that in some cases, even when the immigrant does not practice his religion or flaunt his cultural differences, he will be rejected simply because he comes from somewhere else. From an economic standpoint, this is a shame, because “Contrary to xenophobic affirmations, Social Security, pensions, etc., benefitted more than they lost from foreign manual labor.”¹⁹

Greater forces than the humanitarian will of French doctors or the productive capacity of Moroccan workers influence the phenomenon of Mediterranean migration. The local political environment and the populist sentiments play a significant role as well.

¹⁹ Cordeiro, A. and Verhaeran, R., 1977. Cited by Noiriel, Gérard, p. 314.

Conclusion

No clean and simple answers exist as to how the role of work affects Moroccan immigration in France. Xenophobia, personal integration efforts, and economic necessity explain certain aspects of the complex and diverse research results.

First, North Africans (and other groups, like the Poles described earlier) immigrate to France most often in search of better wages and professional opportunities compared to what is available in their home country. They also benefit from a generous welfare state that provides them with many superior benefits, notably in health care, which can help them feel more comfortable in their adopted home. Lastly, one cannot ignore that the immigrant's role as a worker makes him simultaneously greatly needed and greatly disliked in his host country. In times of economic growth, he fills necessary manual labor jobs that the local population does not want. In times of economic crisis, he is viewed as a "thief" of jobs for locals and as a scapegoat for the crisis itself. Either way, the local population tends to perceive him fundamentally as a worker, particularly a low-skilled worker.

The qualitative information that one obtains from life histories better help explain the response to these thesis questions. The interviews with Ahmed, the Poles, Youssef, and everyone else with whom the author was able to speak allowed for deeper understanding of their situation. Ahmed, who arrived during the Glorious Thirty, shows the installation of a Moroccan in France and the transmission of culture to the second generation. The Poles provide an example of an immigrant group that comes to France for similar reasons to North Africans, but is received and perceived in an entirely different manner due to their Eastern/Christian culture. Youssef, who came to France just before the oil crisis that shocked Europe, underlines that the difficulties

encountered by foreigners, especially xenophobia, can be so hostile and so severe that the immigrant is compelled to leave the adopted country altogether.

Immigration, and particularly North African immigration, remains a controversial subject in France. However, this topic need not always be a source of tension; it also provides an opportunity to rethink the importance of immigration in French national identity. Immigrants played a huge role in developing the country throughout the 19th and 20th centuries. They augmented the population during a period where the French had less and less children. With numerous French citizens of Italian, Belgian, North African, Polish, and many other descents, immigration has become, albeit imperceptibly at times, a core element of modern French society. As this trend will not disappear, it is of high importance that France validates immigrants for the role they have played in construction *l'État français* – the French state.

North Africans, and Moroccans in particular, have contributed more than just their labor to their adoptive homeland. They changed the French melting pot in a way that has, and will continue to, transform France in to a more diverse, more dynamic, and more interesting country.

Bibliography

- Barou, Jacques. « Ouvriers agricoles immigrés et exploitants français : représentations croisées. » *Les Étrangers dans les Campagnes*. Presses Universitaires Blaise Pascal. Février 2008.
- Daoud, Zakya. *Marocains : Les Deux Rives*. Les Éditions de l'Atelier, CCFD. Paris, 1997.
- De Haas, Hein. « Morocco's migration transition : trends, determinants, and future scenarios. » *Global Migration Perspectives*, n° 28. Avril 2005.
- European Union. "Droit de libre circulation et de séjour des citoyens de l'Union et des membres de leur famille." 28 November 2009. Accessible from http://europa.eu/legislation_summaries/internal_market/living_and_working_in_the_internal_market/133152_fr.htm. Accessed 15 May 2013.
- Foucault, Michel. *Naissance de la Clinique*. Presses Universitaires de France. Paris. 1963.
- Milza, Olivier. *Les Français devant l'Immigration*. Questions au XXe siècle : Éditions Complexe. Bruxelles, 1988.
- Noiriel, Gérard. *Le creuset français: Histoire de l'immigration, XIXe-XXe siècle*. Éditions du Seuil. Paris, 1988.
- Preamble to the Constitution of the World Health Organization, such as it was adopted by the International Conference on Health, New York, 19-22 June 1946; signed 22 July 1946 by the representatives of 61 countries. 1946; (Official Acts of the World Health Organization, n°. 2, p. 100) and brought into effect 7 April 1948.
- Teulières, Laure. *Histoire des Immigrations en Midi-Pyrénées, XIXe-XXe siècles*. Nouvelles Éditions Loubatières, Toulouse, 2010.

Veil, Claude. *Vulnérabilités au travail : Naissance et actualité de la psychopathologie du travail.*

Présentation par Dominique Lhuilier. Éditions Erès. Toulouse, 2012.