

HEALTH AND SAFETY CONCERNS OF MIGRANT WORKERS: THE EXPERIENCE OF TUNISIAN WORKERS IN MODENA, ITALY

FAIÇAL DALY¹

Abstract – This paper examines the relatively under-researched field of health and safety of migrant workers, with special reference to Tunisian construction workers in the city of Modena in the Italian region of Emilia-Romagna. The empirical material comes from questionnaires and interviews with Tunisian migrants, plus smaller numbers of interviews with employers and trade union representatives in Modena. The paper starts by critically reviewing the scattered literature on the health and safety of minority workers, most of which refers to the United States and the United Kingdom. The discussion then moves to a consideration of migrant health and safety questions in the contexts of racism, discrimination, social class, working conditions, labour market segmentation and (non-) regulation. Special attention is given to the failed role of trade unions in defending the rights of minority workers, in advanced countries generally and in Italy in particular. A case study is then made of the construction sector in Italy, enriched by personal accounts of the experiences of Tunisian migrant workers in Modena. Employer and trade union interviews reveal a lack of concern and ability to tackle the relevant issues. Barriers to health and safety awareness training are outlined. In the conclusion, recommendations are made for policy initiatives in this area.

Key words : Tunisian migrants, Modena, Italy, construction industry, health and safety, discrimination.

Resumo – SAÚDE E SEGURANÇA DOS TRABALHADORES IMIGRANTES: A EXPERIÊNCIA DOS TUNISINOS EM MODENA, ITÁLIA.. Este texto incide sobre o tema relativamente pouco estudado da saúde e segurança dos trabalhadores migrantes, sendo feita especial referência ao caso dos tunisinos empregados no sector da construção civil na cidade de Modena, na região italiana de Emilia-Romagna. A base empírica consiste num conjunto de entrevistas e inquéritos realizados junto de imigrantes tunisinos, bem como num número mais reduzido de entrevistas com empregadores e representantes de sindicatos da região de Modena. O texto inicia-se com uma análise crítica da dispersa literatura existente relativa à questão da saúde e segurança laborais dos trabalhadores pertencentes a minorias, a maioria da qual provém dos contextos dos Estados Unidos e da Grã-Bretanha. Procedede-se em seguida a uma discussão dos aspectos da saúde e segurança dos trabalhadores

¹ University of Tunis, Tunisia. E-mail: fdaly61@yahoo.fr.

migrantes no contexto das questões mais vastas do racismo, discriminação, classe social, condições de trabalho, segmentação e (não-)regulação do mercado de trabalho. É dada especial atenção à falta de capacidade dos sindicatos na salvaguarda dos direitos dos trabalhadores migrantes ou pertencentes a minorias, tanto na generalidade dos países industrializados como na Itália em particular. O estudo de caso incide sobre o sector da construção civil em Itália, sendo enriquecido com relatos pessoais de experiências de imigrantes tunisinos em Modena. As entrevistas com os empregadores e representantes dos sindicatos revelam desconhecimento e falta de interesse/capacidade para lidar com as questões mais importantes. No texto, são ainda relevadas as principais barreiras ao conhecimento e formação em matéria de saúde e segurança laborais. Na conclusão, são efectuadas diversas recomendações de medidas políticas neste campo.

Palavras-chave: Migrantes tunisinos, Modena, Itália, construção civil, saúde e segurança, discriminação.

INTRODUCTION

International migration and labour mobility have constituted a permanent feature of the economic development of many countries. Italy is a case in point. In earlier times, Italy perceived migration as the only possible solution to unemployment and underdevelopment, particularly in the South and rural areas. Indeed, Italian history and economic development have been fundamentally shaped by emigration. However, since the 1970s Italy has been involved in importing cheap, flexible and non-unionised labour, particularly from North Africa. The diffusion of the 'informal economy' and illegal employment practices in Italy as well as the rise of flexible forms of production have created all sorts of employment niches for which 'marginal' forms of inexpensive and flexible labour (women, children, part-time workers, and foreign immigrants) are ideally suited (IOSIFIDES and KING, 1996: 77). In such a context it is also crucial to assess whether the disadvantaged status of immigrant labour extends to the area of health and safety. NICHOLS (1997: 86) asserts that immigrants tend to have higher injury rates worldwide because of the nature of the work they do. In other words, in order to understand why migrant workers are disproportionately exposed to health and safety risk and accidents, it is important to ascertain where, exactly, migrant workers are located in the labour market. What is their employment position? Which economic sector they are mostly concentrated in?

This paper attempts to address the lack of studies of the health and safety concerns of migrant workers through an account of the health and safety experience of Tunisian migrants in Italy. It is based on a large-scale questionnaire survey of immigrant workers, plus in-depth interviews with 23 workers, six employers, three trade-union officials, and other key informants, all carried out in the city of Modena. Immigrant workers in Italy face high risks every day at the workplace because they are mainly employed in the so-called 'secondary'

labour market (PIORE, 1979). It is necessary, however, to look beyond this and examine the specific nature (and lack) of migrant involvement in health and safety issues, as this may exacerbate their disadvantaged status. These immigrants are not only employed in marginal and casual jobs, but because of their political, economic and social vulnerability they are likely to be excluded from any decision-making concerning their health and safety.

Many studies (e.g. ILO, 1979; REID and TROMPF, 1990) have demonstrated that the health and safety of migrants and ethnic minority workers are of both national and international concern. Unfortunately, the health and safety of migrant labour in Italy has received little attention from Italian health and safety professionals. Furthermore the failure of many countries (including Italy) to recognise their need for migrants and ethnic minority workers, even when labour shortages are apparent, has forced many of them to work illegally, take the least desirable jobs and accept high levels of risk. Facing the 'non-choice' choice of 'losing your job or risking your life', migrants and ethnic minority workers may continue working despite pain, dangerous working conditions and injuries which are often not reported.

This paper argues that the nature of health and safety problems that migrants and ethnic minority workers face are different from those of the indigenous workers. Therefore, these problems should be thoroughly investigated in order to help policy-makers promote specific regulations and/or self-regulatory measures which protect the health and safety of migrants and ethnic minority workers.

The case study in this paper focuses on the employment experience of Tunisian workers in the Italian construction industry. The construction industry is highly significant in terms of the number of migrant workers employed in Italy; it is also associated with high accident rates and levels of risk. Evidence is used from recent literature and newspaper reports on Italian migration, and data collected during field trips to Modena. One of the central arguments in this paper is that health and safety concerns of migrants have to be studied and differentiated according to the working conditions and nature of their employment, which are rather different from the indigenous workers.

LITERATURE REVIEW

Most international studies on the health and safety of migrant and ethnic minority workers have argued that socio-economic conditions and ethnicity are significant factors for work-related accidents. Many studies (for instance, CORVALAN *et al.*, 1994; MYERS and HARD, 1995; SOROCK *et al.*, 1993) have established that migrant workers in general face a higher accident risk than indigenous workers. Health and safety issues are major concerns for migrant workers because they are greatly over-represented in higher-risk occupations in the most hazardous economic sectors, such as agriculture and construction. In fact,

WALTERS (1998: 311) has attributed the high accident rates among migrant workers not only to their employment in sectors with high accident rates, such as the construction industry, but also to complex combinations of discrimination and disadvantage. The understanding of these combinations as well as factors such as age, skill and experience, will help to explain and address the health and safety concerns of migrant and ethnic minority workers.

A study of work-related fatalities in the agricultural production and services sectors between 1980 and 1989 in the USA showed that the highest average annual fatality rate was for blacks at 26.4 deaths per 100,000 workers compared with an average of 22.9 deaths for all workers (MYERS and HARD, 1995: 51-3). Another study of fatal injuries in the New Jersey construction industry from 1983 to 1989 revealed that death rates were higher for Hispanics at 34.8 per 100,000 and African-Americans at 24 than for white Americans at 10.6 (SOROCK *et al.*, 1993: 916). Both studies demonstrated that the high rate of fatal injuries among ethnic and migrant workers were because they were over-represented in the most hazardous and dangerous jobs. Meanwhile a study in Sweden covering over 5,000 employees and 537 accidents between 1986 and 1987 at a major automobile and truck assembly plant found that accident rates were significantly higher for Turkish workers - 61.7 against an average of 53. However this study identified the young age, inexperience and lack of promotion of migrant workers as the main causes of the high rate of accidents (DÖÖS *et al.*, 1994: 22-4). Such an argument leads to the dubious assumption of 'accident-proneness' amongst immigrant workers (LEE and WRENCH, 1980), whereby language, cultural factors and length of residence of migrants are considered crucial factors affecting health and safety at work. A study of 1,211 cases of work-related fatalities among people from 51 nationalities working in various economic sectors in Australia found that the fatality rate was higher among non-English speaking workers than Australian-born people. This study concluded that language and duration of residence are important determinants of safety at work in Australia (CORVALAN *et al.*, 1994).

However, WRENCH's (1999) examination of 4,000 accidents in five factories in the West Midlands of England found that the high level of industrial injuries to migrant and ethnic minority workers was 'entirely attributable to the fact that immigrant and ethnic minority workers were over-represented in the more dangerous jobs' (WRENCH, 1999: 20). His findings also demonstrated how an ideology of 'blaming the victim' had been readily embraced. He argued that future studies needed to emphasise the inherent processes of discrimination and exclusion in the labour market as more relevant tools in the explanation of the high risk of accidents and injuries among migrant and ethnic minority workers.

However, I should make clear that I do not consider that class, status or ethnicity should be treated as independent variables for analysis; rather they are important components in developing an understanding of health and safety issues. In the case of migrant workers, this relationship is also compounded by racism and discriminatory practices. The outcomes of such exclusionary prac-

tices are not only that the health of migrant workers is not considered as important as that of indigenous workers, but also that, because of the racialisation of the labour market, migrants occupy the bottom position in class relations.

Furthermore, an understanding of the socio-economic, political and legal contexts in which employment relations take place is very crucial in the study of the health and safety concerns of migrants and ethnic minority workers (ELLING, 1989). Many social scientists have observed that health and safety risk and injuries are socially constructed and produced (BECK, 1992; DWYER, 1991; NICHOLS, 1997) and that health and safety of migrants are also culturally determined (LIN and PEARSE, 1990; MANDERSON, 1990).

Health and safety have also been influenced by the social and political transformation as well as the economic restructuring which have been shaping modern society and changing the structure of the labour market since the end of the Second World War. In this context, migrant workers, who have become a structural feature of capitalist economies in most developed societies, have also been affected by the deep structural changes in employment relations and labour markets which have occurred in more recent decades. In this context, the disadvantaged position and the general and increasing vulnerability of migrant labour to capital are also crucial in understanding the health and safety concerns of migrants and ethnic minority workers. They are faced by barriers of isolation, low pay, low status, lack of health and safety training and education, lack of protection, precarious housing, language deficiency, and blackmail. As if all this were not enough, they are also used as scapegoats during periods of economic crisis and social tension.

However, despite their disadvantaged economic status, political vulnerability and social marginalisation, migrant workers have played a crucial role in the social and economic transformation of the labour market. They have not just filled the gaps, but they also took those jobs scorned by the native labour force who, because of their level of education and social status, have refused to be employed in low-status and low-skill occupations. The employment status of migrant workers clearly determines their working conditions and thereby their health and safety. Migrant workers are largely employed in the secondary market (PIORE, 1979; PUGLIESE, 1992) and are overwhelmingly concentrated in expanding forms of marginal and less desirable jobs which fall beyond the sphere of health and safety inspection and union control. These jobs are casual, low-paid, hard-working and have poor health and safety conditions: such jobs are often defined as the '3-Ds' (standing for dirty, dangerous, and demanding). By their very nature, 3-D jobs involve more accidents and are more hazardous. Many occupational health and safety studies also demonstrate that health and safety problems tend to increase when job insecurity, casualisation, atypical forms of employment, lack of a health and safety culture and lack of union protection constitute the main features of working relations.

There are also socio-economic, legal and cultural factors which press for a special study of the health and safety of migrants and ethnic minority workers.

Firstly, the health and safety concerns of these groups are closely linked with their poor working conditions and low employment status. These workers are less able to resist unsafe forms of work because of their marginal status and disadvantaged position in the labour market. Secondly, racism and discrimination have been proven to be an important explanatory factor for the high level of accidents among migrant workers (CONE *et al.*, 1991; DWYER, 1991; LIN and PEARSE, 1990; SOROCK, *et al.*, 1993). The power and employment relations in the workplace within society are reflected in the health and safety problems that migrant workers face. Thirdly, and specifically in Italy, poor housing conditions, lack of community organisations, limited social networks, racism and discrimination have 'reinforced the dynamics of exclusion, marginality, resentment and displacement' (PERÒ, 1997: 171). Such isolation of migrant workers inevitably creates a high psychosocial stress, compounded by the dislocation and homesickness which are related to the migration process. Additionally, poor access to health services and welfare benefits limit the detection and cure of occupational diseases at an early stage.

SOCIO-ECONOMIC LINKS TO HEALTH AND SAFETY

The main issues stemming from the literature review section highlight on the one hand that there is a huge research gap on work-related accidents and injuries among migrant and ethnic minority workers. There is also a major demand to study the health and safety of migrant and ethnic minority workers differently. The differences of health and safety conditions of migrant workers can be clearly identified when factors such as employment and social status, racism, culture, language difficulties, limited awareness of risk, lack of union protection and social exclusion are investigated. On the other hand, the legal and economic status of migrant and ethnic minority workers has influenced their conception of health and safety issues. This conception is compounded by migrant and ethnic minority workers' perception of their class position and cultural diversity. It is also dominated by their cultural approach to safety: a fatalistic attitude and a tendency to accept occupational injuries and accidents either as part of one's destiny or as part of the job. These issues can be summarised under two sets of factors: extrinsic and intrinsic.

Extrinsic factors are associated with the socio-economic, political and legal status of migrant workers. These may be linked to the difficult working conditions and the characteristics of the jobs that ethnic minority workers occupy. Specific examples of such factors could be:

- Lack of trust and scepticism concerning the management of health and safety which is dominated by 'white experts' who are often inadequately prepared and have little understanding of migrants and ethnic minority workers' conception of health and safety. The perception and experience

of many migrants and ethnic minority workers show that that they receive second-hand information and the health and safety system is not responsive to their needs (FREEDMAN, 1998). They feel that 'their right to know' is not recognised and that the little information and training they receive are considered inferior to that given to their indigenous colleagues. Further difficulties include the general lack of commitment of employers to improving working conditions and the popular belief that migrants and ethnic minority workers are 'accident prone' and suffer from 'compensation neurosis' (LIN and PEARSE, 1990: 206);

- The disadvantaged position and the general vulnerability of migrant labour to capital have also influenced the health and safety conception of migrants and ethnic minority workers. Migrant workers have been coerced into accepting a trade-off between their total flexibility and extreme vulnerability, and therefore employability. ELKELES and SEIFERT explain that: 'Possibly for fear of losing their jobs immigrants may only consult a physician when the most manifest sign of illness, pain, occurs and hinders them in their work' (1996: 1043). Migrant workers have had to accept a trade-off between reduced unemployment and high level of risk and hazards. In other words, they have accepted that the ends justify the means.

Intrinsic factors are the result of ethnic minority workers' culture and attitudes to health and safety and risk perception. There are also many barriers which prevent migrant workers' settlement and integration and therefore their acceptance within the host country. Examples might be:

- Spiritual beliefs and the subordination to supernatural power, whereby many migrants believe that accidents and illnesses are caused by spirits or the 'evil eye'. JENKINS *et al.* (1996) reported that many Vietnamese migrants in the USA are likely to consult a sorcerer, fortune-teller or a Buddhist priest to cure their occupational illness or diseases. A similar attitude was also observed among many Sicilian-Canadians who had recourse to sorcery and healing rituals to protect them from exposure to the evil eye (MIGLIORE, 1989);
- The concept of illness itself may be seen as a physical dysfunction among certain migrant communities. This was found among Turkish migrants in the Netherlands who believe that they were recruited to perform physical labour and therefore 'when they become ill, a shift occurs in their self-concept; whereas before their identity was based on labour, now it is based on illness' (DE BRUYN, 1989). In the construction industry, for example, a macho attitude has always existed. Therefore, only the fittest workers can endure the hard and demanding working conditions, even if this means that they have to tolerate some kind of physical pain. Enduring pain and illness is considered a strong character trait among

these workers. This not only delays any form of intervention but also threatens one of the basic fundamental health and safety principles – ‘prevention is better than cure’.

Although these conceptions may constitute barriers for the prevention of occupational accidents and injuries, learning more about migrant and ethnic minority workers’ conception of occupational health and safety could help to identify and respond to their health and safety concerns and help to define a health and safety strategy which takes into account their specific needs.

Health and safety of migrant workers are also influenced by the broad relationships between capital and labour. In the case of the employment relations in Italy, ANDALL (1990) observed that some Italian employers were using unscrupulous methods such as low-pay, tax and insurance avoidance and violation of the health and safety laws in order to achieve high profits and perpetuate the exploitation of migrant workers. Furthermore, illegal working conditions, job insecurity and the general vulnerability of immigrants to employers’ blackmail may lead them not to be fussy about their health and safety problems complain about their work for fear of being fired.

It is clear from the Italian case that the trade-off between having a job or working under hazardous conditions takes place under the threat of ‘job blackmail’. LEVENSTEIN argued that: ‘job blackmail is found more often in those work places where workers have little or no power of control over their jobs as well as workplaces that are not unionised’ (1995: 34). Therefore, trade unions should play a central role by promoting education, training and participation of migrants and ethnic minority workers in health and safety issues. This will not only empower them but also improve their health and safety awareness and culture. But this, in turn, depends on whether the trade unions have overcome their original opposition to immigration and accepted migrants and ethnic minority workers as equal members within their organisations without exclusion or racial discrimination.

REPRESENTATION AND PARTICIPATION OF MIGRANT WORKERS IN ISSUES SURROUNDING HEALTH AND SAFETY

The empowerment and involvement of migrant workers in issues surrounding their health and safety may improve their working conditions and reduce their general vulnerability and disadvantaged position. The support of trade unions, in this context, is very important in ensuring better and healthy working conditions for all their members. In fact, many studies have demonstrated that trade unions play a crucial role in maintaining a healthy workplace and improving the working conditions of their members. However, they have failed to recognise the different needs and specific health and safety problems of the migrants and ethnic minority workforce. Many reasons for this can be identified. These include lack of awareness, prejudice and the reluctance of trade union officials

to take on the interests of migrants and ethnic minority workers. In the name of class unity and equality, trade unions have adopted a 'complete colour-blind' approach in dealing with the health and safety of migrants and ethnic minority workers. WRENCH (1997) argues that class unity does not exclude the fact that migrants and ethnic minority workers have different interests. Hence, special measures should be implemented in order to meet the specific problems experienced by such workers.

Furthermore complacency and racism within some union organisations, which play along with the work assignment of migrants and ethnic minority workers to the most unpleasant and hazardous jobs, have contributed to the increased health and safety risk due to exposure to asbestos and hydrocarbons hazards (ELLING, 1989). WRENCH and VIRDEE (1996) have revealed how, on several occasions, British trade unions and management colluded and discriminated against black workers in order to lower their wage and to keep the hierarchical division of labour whereby 3-D jobs refused by native workers were filled by migrants and ethnic minority labour. This was possible not only through discriminatory employment procedures but often with the tacit and/or explicit consent of trade unions and with the collaboration of white workers (WRENCH and VIRDEE, 1996: 257).

The decision to join a trade union is not only based on the quality of services that migrants and ethnic minority workers can get but above all it is about belonging to a specific social group which has been established around a set of values and principles which reflect the views of the dominant set. In most traditional countries of immigration, trade unions initially opposed the recruitment of migrants. This not only made migrants more wary of joining a trade union but also alienated future involvement and cooperation between both sides. The integration and assimilation of migrant workers in the trade union movement depends on their acceptance of the status quo and existing power relations. Migrants and ethnic minority workers are clearly aware that their socio-economic status and legal and political vulnerability put them into a marginal situation. Whatever they do, they fear that they become scapegoats for any social tension. Threat and fear of losing their employment remain powerful control mechanisms which suffocate their initiatives and accentuate their disadvantaged position. They know that they are the last to be hired and the first to be fired. Their legal status and political situation are subject to discretionary and arbitrary decision by the authorities.

Therefore, it is evident, as many well-known students of migration (CASTLES and KOSACK, 1973; MILES, 1986; PHIZACKLEA, 1983) maintain, that trade unions are not immune from racial discrimination and racist attitudes. In Italy, for example, the three local trade union secretaries in Modena, interviewed during my field work, failed to recognise the existence of structural and institutional racism and discrimination and to be responsive to the migrant workers' needs and interests. Also there is a substantial gap between theory and practice and a deficit of implementation of equal-opportunity policies. Because there is lack of

commitment to equal opportunity policies, union representatives found it very hard to incite and promote such measures among indigenous workers. Although Italian trade unions have played a crucial role in questions of integration and employment during the legalisation of migrant workers, their initiatives have lacked consistency and they have been unable to reconcile and defend the interests of all their members equally. Italian trade unions proclaim the equality of workers regardless of nationality and condemn discrimination against migrant workers, but they have not yet succeeded in putting forward a clear and coherent policy to reduce tension or to reconcile the various interests. They have been neither able to invoke class solidarity and persuade indigenous workers to the common cause, nor to develop and commit themselves to any form of equal opportunity policy. Collusion between the Italian unions and the management of Fiat provides an example of the involvement of unions in discriminatory practices against migrant workers. In 1989, during the negotiation between Fiat management and the trade unions for the implementation of night shift work, the trade unions did not agree to implement this measure for Italian workers. However, it accepted Fiat's use of migrant workers on night shifts, on Sundays and bank holidays instead of Italian workers who refused to work unsociable hours (*Il Manifesto*, 7 October 1989).

It is the fundamental role of any trade union to protect all its members without distinction of colour, race, nationality or religion, but in reality distinction still patently remains in the behaviour of trade unions in Modena and Emilia-Romagna towards migrant workers. This happened, for instance, in 1988 when 'it was found that even in such traditional union strongholds as Modena and Reggio, Egyptian immigrants working long hours for low pay in foundries, were not immediately given union support' (ANDALL, 1990: 159).

This lack of union support also occurred in the company where I worked between 1991 and 1993. The controversial lay-off in 1993 of 15 migrant workers in *Glem Gas* clearly demonstrates how racism and discrimination against a powerless and vulnerable workforce operates in the Italian trade union movement. *Glem Gas*, is a white goods' company (it makes cookers) employing 230 employees (214 Italians and 16 migrant workers, mostly from Morocco and Tunisia). Following a crisis of demand in white goods from the Middle East, and after management and unions' consultation, the company agreed upon a lay-off in the so-called *Cassa Integrazioni Guadagni* (Wage Guarantee Fund) for a temporary period of two weeks.² The first lay-off took place in the last week of

² '*Cassa Integrazioni Guadagni*' is a fund regulated by law and managed by the National Security System. It is funded by employer contributions but payments from it are boosted by state aid to maintain its solvency. It operates in accord between unions and employers. The fund is used by companies which face temporary economic problems. The worker may be laid-off or for three or four days a week. He or she can receive up to half their total pay for up to one year if the crisis is temporary, or for unlimited numbers of years if the crisis is serious. The main objective of this fund is to protect workers from mass redundancies during companies' restructuring. While they are in *Cassa Integrazione*, many workers succeed in finding irregular cash-in-hand jobs.

January 1993. Some 36 workers were laid-off, among them 14 migrants and 14 women. In the second lay-off, which occurred in the first week of February 1993, some 43 workers were involved and the same criteria used as during the first lay-off. The migrant workers felt that they should not have been laid-off on both occasions and felt betrayed by the union representative. They decided to withdraw from the trade union in protest against being considered second-class workers and for not being protected in the same way as Italian workers from the *Cassa Integrazione*. They accused their union representative of being racist and felt that they had been discriminated against because of their powerless position.

The Tunisian workers in my questionnaire survey in 1997 clearly demonstrated resentment towards the Italian unions. In fact, 61 per cent of the 156 Tunisian workers who participated in this research and answered the question about their relationship with the trade unions, admitted not having any contact with the three main trade union confederations in Modena. Only 30 per cent of the 156 had regular contact with their trade unions. However, just 27 per cent are satisfied with the trade unions' protection. Furthermore, despite the claim of the three union confederations of representing all workers without distinction of their origins, they still adopt differential and discriminatory attitudes towards migrant workers. The next part of this paper will examine the employment conditions of migrant workers in Italy with particular focus on the construction industry in Modena.

EMPLOYMENT CONDITIONS IN THE CONSTRUCTION INDUSTRY IN ITALY

The recruitment of migrant workers has been a regular feature of the European construction and building industries (housing development, bridges, roads and tunnels), not to mention agriculture, manufacturing and service sectors. These have long employed migrant labour, especially in the 'traditional' countries of immigration such as France, Germany and Switzerland.

However, little research has been conducted on the role of migrant labourers and their working conditions in the construction industry. The few studies (AUSTRIAN, 1980; DANESH, 1995; ILO, 1995) which have looked specifically at the construction sector note that the employment of migrant labour has been a stable feature of this sector. This is because, despite efforts to substitute labour by machines and hi-tech equipment, the building trade in particular remains a labour-intensive sector. Great demand for migrant labour in the building industry took place during the reconstruction of Europe after the First and Second World Wars, following natural catastrophes and during periods of economic expansion. In Italy, the employment of migrants has become a structural characteristic of the construction industry, which now occupies third place in the ranking of sectors employing foreign labour (QUASSOLI, 1999: 221).

Migrant labour was recruited in the construction industry both because of shortages of labour and because the native work force refused to work in this sector, owing to the hard, dangerous and demanding working conditions. The construction industry relies heavily upon the availability of a cheap, docile, extremely flexible and healthy young labour force for its survival. These characteristics are more likely to be found ready-made in migrant workers who, because of their social, economic and political vulnerability, are easy to hire and fire. In the case of a disadvantaged group such as migrant workers, marginality and irregularity are often necessary and unavoidable conditions for finding work. Furthermore, the construction industry has been mostly abandoned by Italian workers because of the hard working conditions, low wages and precarious employment. VILLA described the labour market in the construction industry as: 'a secondary sector both because many disadvantaged workers are confined to it and because it is characterised by job instability, poor and uncertain career prospects, unstable earnings and uncertainty about future income' (1981: 133).

In Italy, the demand for migrant labour coincided with two natural catastrophes: earthquakes struck Sicily in 1968, then Friuli in 1976. Labour shortages compelled employers for the first time to recruit Tunisians to replace local rural labour, which had fled the afflicted area in Sicily, and Yugoslavs to work on rebuilding damaged property in Friuli. However, many Italian surveys have shown that the vast majority of migrants occupy subordinate positions on the lowest rung of the occupational ladder, whether in the construction industry or within the whole Italian labour market. For instance, in 1996 76.4 per cent of male and 66.4 per cent of female migrants were employed as unskilled labour (CARITAS, 1998). The Istituto di Ricerche Economiche e Sociali (IRES) surveyed firms in Modena, Milan and Turin, and confirmed that:

Immigrants tend to be taken on to meet employers' needs rather than because of any wish to include these new members of society in the labour market... In terms of promotion, immigrants are virtually blocked once they reach the top of the job classification for blue-collar workers... The general impression is that nothing is done that is not to the advantage of the enterprises that choose to take on immigrant workers (1997: 43).

Migrants constitute both a new working class and a marginalised underclass which have emerged from the social and cultural transformation of Italian society and the shortage of labour in the secondary labour market. This shortage has been striking particularly in the construction sector in Modena where the demand for migrant workers has become vital for the survival of many small and medium firms. Indeed, in the province as a whole, over 26 per cent of migrants employed in construction are Tunisian, by far the largest migrant group (Provincia di Modena, 1995: 50-2). In fact, the percentage of Tunisians working in the six firms surveyed during my fieldwork ranges from 15 per cent in the medium-sized businesses to 70 per cent in the micro-firms; this clearly demonstrates the increased demand for migrant labour in small firms in the

construction industry. Yet not one of these workers has ever been employed as a foreman or a supervisor. Although migrants have met the shortage of labour in Emilia-Romagna constituting a disposable 'reserve army' (CASTLES and KOSACK, 1973) for the construction sector, they have also provided a ready-made target and scapegoat for the expansion of the informal economy in Italy. The shortage of labour has been particularly severe in the maintenance and repair sectors in Modena where many small and medium firms have become totally dependent on cheap, 'illegal' migrant workers for their survival and competitiveness.

The six employers I questioned also confirmed the shortage of labour and firmly denied that their Tunisians had stolen jobs from the indigenous population on the grounds that the *Modenesi* would never accept such hard working conditions.³ One particular employer, Signor Pacchioni told me:

A year or so ago, the accountant who prepares the payroll gave us a list of 40 or 50 workers on the unemployment register. My wife selected about a dozen workers who fitted our particular trade and satisfied our requirements. She telephoned them, but none of these workers replied to our recruitment drive. All these people are, in my opinion, either unwilling to work or are working in the black economy. That's why there is a lot of permanent unemployment in Italy, because people are working in the black economy, and by avoiding paying social security contributions, they are able to earn more money.

The refusal of the local workforce to work in the building industry and the exhaustion of the traditional Italian labour reservoir in the rural South have led to a labour shortage, particularly in the northern regions. Moreover, many employers, particularly of small and medium enterprises, engage migrant workers partly because they can induce them to accept illegal and dangerous working conditions and therefore secure their total flexibility; and partly because of their political vulnerability, making them more docile and more compliant. The owner of a waterproofing company in Modena admitted that: 'Here in Italy, Italians do not want to work. They do not want to do heavy jobs. They want to know how much they are going to earn and then they discuss the job'. Migrant workers also have flexibility in responding both to the organisational needs of firms and/or in relation to local market demands. This flexibility, together with the 3-Ds and illegal working conditions, appear to be crucial in defining 'bad' jobs in building, which Italians refuse to take even when they are unemployed (DE LUCA and BRUNI, 1993; VENTURINI, 1996). BRUNETTA and TURATTO assert that the 'the real problem with the Italian labour market is not that there are many unemployed, but that there are too few people employed in the official economy' (1996: 199). Furthermore, 'amongst the army of Italy's young educated unemployed, the shame of manual labour means that almost nobody accepts unskilled work: hence the opportunities, and need, for immigrant workers' (KING and RYBACZUK, 1993: 185).

Initially the six employers interviewed used official channels, such as job

³ All quotations from the Italian and Arabic interviews have been translated by the author.

centres, because they did not want to risk taking on *extracomunitari* (migrant workers from non-European sources). Later they used direct contact, friendship and family networks to avoid union control and compliance with health and safety regulations. In particular, Tunisian migrants who had been settled in a job for a long time and had gained the trust of their employers and adapted themselves to the hard working conditions, were used as intermediaries and as a source of new recruitment. For instance, Karim⁴ moved from Viareggio, where he escaped the dangerous and hard working conditions in the fishing industry, to work with his cousin Fadhel, who had been working with Signor P. for the past three years.

Though personal contact is important to small and medium firms, ethnicity and adaptation to hard working conditions are increasingly becoming a crucial mechanism for migrant labour selection. Choice of workers is based on prejudice and stereotype: some employers would not recruit immigrants despite the obvious economic benefits and flexibility they offered. For instance a local newspaper advertised: 'Looking for workers, no *extracomunitari*', while a family announced: 'Looking for a domestic of Aryan race. *Extracomunitari* are invited to refrain from replying'.⁵ Such examples support WALLERSTEIN's argument that:

Racism operationally has taken the form of what might be called the 'ethnicisation' of the work force. By which I mean that at all times there has existed an occupational-reward hierarchy that has tended to be correlated with some so-called social criteria (1995: 33).

The interviews with employers and their representatives provide clear evidence of the ethnicisation and selection of workers in Modena. In fact, most employers interviewed expressed some stereotypes and/or prejudice against their Tunisian workers. For instance, Signor B. thinks that Central African migrants work harder and are more obedient and amenable than Tunisian workers. This statement was also echoed by Signor G., Secretary of the powerful National Confederation of Artisans in Modena, who felt that: 'migrants from Central Africa are more adjusted to the rules than the North Africans, who are less committed to permanent work'. When challenged about the Tunisians being less amenable to exploitation, he replied:

In my opinion, the exploitation of workers is part of the innate spirit of employers. It is normal for the employers to try to take advantage of what is possible from labour power. It is normal for employers always to ask more, because the more they ask the greater the profits they make.

Other employers whom I interviewed denied these claims, maintaining that

⁴ A pseudonym. I avoided using the real names of Tunisian workers in order to preserve their anonymity.

⁵ *La Gazzetta di Modena*, newspaper advertisements reproduced in *Rassegna Stampa Immigrazione*, 4 (1996): 22.

they were very satisfied with their Tunisian workers. The next part of the paper will take a case study approach to some health and safety issues faced by Tunisian migrant workers in the construction industry in Modena.

HEALTH AND SAFETY EXPERIENCES OF TUNISIAN MIGRANT WORKERS IN THE CONSTRUCTION INDUSTRY IN MODENA

This case study takes the occupational health and safety experience of Tunisian migrants as a central focus. In doing so, I conceptualise their health and safety experiences as a relationship between their disadvantaged and vulnerable position within the labour market and their high concentration in the '3-D' jobs described earlier. My aim is not to explain whether migrant and ethnic minority workers are 'more prone' to injury and illnesses than native workers, but to argue that migrants are exposed to greater health and safety risk because of their disadvantaged social position and their political and legal vulnerability.

The evidence comes from both my personal experience and the observations of the Italian labour market over a period of 10 years residence in Italy between 1984 and 1993, and from my subsequent fieldwork visits to Modena during which I carried out systematic sociological research amongst Tunisian migrants using both quantitative and qualitative data to record the history of their migration and settlement in Italy, with a particular focus on the Tunisian community in Modena. I distributed 300 questionnaires and conducted interviews with Tunisian workers employed in six firms in the construction industry, and with their employers.

Though the employers interviewed presented working conditions in a good light, two admitted that the work was dangerous and the pay low. Karim, one of my Tunisian interviewees, presented the case more precisely:

I earn 1,500,000 lire per month; but if you are a very good worker, you can earn a maximum of two million lire. I have never earned that amount of money since I joined [name of firm] nine years ago. I pay 500,000 lire for my rent, I pay for my car fuel, my food. In the end I can't save anything.

The reason for giving non-standard contracts can be attributed to

... the bosses' interest in not regularising black labour in order to save on health and social security contributions and the minimum wage, and the general vulnerability of immigrants to their employers; blackmail that led them not to seek regularisation for fear of losing their jobs and not being able to find another (ONORATO 1989: 307).

Thus the building trade is known not only for lower wages and avoidance of health and safety regulations, but also for widespread illegal working practices. Furthermore, *caporali* (illegal intermediaries who take bribes) make contact

with immigrants in specific bars and squares in the morning where they choose the most suitable and strongest for the building sites. Immigrants are often blackmailed, threatened and dismissed by the *caporali* if they try to report their illegal activities or ask for regularisation. No wonder the director of one of the building firms describes the industry as the 'wild west'. Despite all this, some Tunisians welcomed the opportunity to earn more money, even by accepting the most hazardous working conditions and receiving illegal payments: the workers admitted that they received money *fuori busta* (cash-in-hand).

Employers justified the practice on the grounds that they first wished to try out workers before taking them on permanently. They also claimed that labour laws are too rigid, making it impossible to sack an unsatisfactory employee. The unofficial trial period seems to have become normal practice and a 'legal' way to pursue illegal employment and avoid health and safety control.

Other relevant factors are age and language difficulties which are widespread among middle-aged men and are problematic in terms of job promotion and of health and safety education. This explains in part why my interviewees who were aged over 40 have not been able to move within their job and have suffered all sorts of harassment and abuse. Not only do they have wives and children to maintain in Italy, but they are also the chief bread-winners for their relatives left behind in Tunisia. Older workers feel that, having been builders for so long, they cannot change, whereas the young feel compelled to stay because of racism and discrimination within the labour market.

Because there is no settled and stable definition of tasks, Tunisian workers feel powerless, exploited and hence alienated. They carry out most of the excavation work, and lifting and moving of heavy weights. Khames complained that 'the hardest and most hazardous jobs within the company are reserved for us'. Abdallah confirms:

Since I joined the company seven years ago, I do all of the cutting of bricks and hammering. I carry out all the digging with axe and shovel, to do this and that. And even when there are other new manual workers, I always do the heaviest and the hardest jobs. I carry out all these jobs as best as I can.

They must carry out any task required and receive and execute orders from fellow Italian manual workers. They are thus treated differently because they are considered 'poor Third World workers' (ANDALL, 1990: 162), and are made scapegoats for any mistakes made at work.

Vocational training in the construction industry has always been controlled by the employers through the apprenticeship system. Generally, employers do not want to waste time in training or teaching their migrant workers, but are more concerned with the accumulation of profit. They are reluctant to enhance the career prospect of their foreign workers. Additionally, they are unlikely to invest in training because of the high fluctuation and short-term planning in the construction industry and the high mobility of the workforce.

The fact that health and safety training courses use the Italian language

and that signs are not translated into different languages constitutes a barrier for those migrant workers who do attend, particularly those with a language deficiency. Signor M. and his daughter, Signora E., criticise the building schools because they do not meet the needs of migrant workers. Signora E. asserts:

One of our workers did attend a health and safety training course, but he could not do it because the big problem is that on the course they speak Italian. In my opinion, he did not understand a lot because he does not speak Italian very well. Indeed, the second time, he refused to attend because he said he didn't understand at all.

Her father finds the training methods illogical and contradictory. He comments:

The only thing is this, we have these immigrants for whom we organise frequent courses and I do not understand why... Tunisian translators are not used to support Tunisian migrants if they do not understand. Towards the end, *il poverino* (the poor lad) came out without any understanding. What is he going to do? Time wasted and money wasted! If there is someone there who could translate for him what they are saying, he would be better off.

This attitude towards vocational training has always characterised the construction industry. Though informal and individual training still happens in small firms, it is used as an opportunity to control immigrant workers and obstruct promotion. Italians may not be interested in such opportunities, but Tunisians are; 20 per cent of the 155 respondents to the questionnaire had participated in a course; 73 per cent found it useful and 29 per cent found it helped them to find employment. The employer Signor P. believes that a craftsman inherits his knowledge and adapts to the work in hand, but he misses the point that in a highly segmented and hierarchical labour market, there is a constant demand on workers to increase productivity. And this brings increased health and safety risks. Though Signor N. recognised that his Tunisians had some good skills, he preferred to teach them himself what he called 'the working culture', since he had little faith in official schemes. Profit is the dominant consideration, not health and safety, education and training of workers; in any case the construction industry has inherently high fluctuation and short-term planning, not to mention the mobility of the work force.

Most Tunisian workers who participated in this research in Modena are not being informed or properly inducted into the health and safety procedures. Over 49 per cent of the respondents were not provided with protective clothing; 67 per cent of the 157 Tunisians who responded to the questionnaire declared that they were not given any induction or information about health and safety provisions; 43 per cent had suffered an occupational injury in the workplace. Over 37 per cent have not reported their injuries because they do not know who is the health and safety officer in their workplace. For instance, Sebti said that one day, while he was carrying a 50 kilogram bag of cement, he twisted his leg and fell over. He injured himself, but he carried on working without telling his

supervisor. Indeed, he did not know that he should inform his supervisor. The day after, he was not able to move from his bed. When he went to see the doctor, he was diagnosed as having a fracture and was given three weeks off work. He returned to work in the second week. Despite this, his company, which accepted in the beginning that he was injured in the workplace, asked him to pay back the 1.2 million Italian lire (£470) he received for his injury. When he asked why, he was told that he had no witness and that his supervisor denied the fact that he had been injured in the workplace. However, his fellow-citizen, Abdallah, learnt from Sebti's 'mistake'. When he was injured in the workplace, he immediately reported his injury to his supervisor and managed to find witnesses to confirm his injury. Despite the fact that the firm accepted that Abdallah was injured, it did not stop him from showing his macho attitude and breaking health and safety regulations. Abdallah told me:

Although I was injured and the social security paid my wages without any problem, I did not want to stay at home and I went to work illegally because I wanted to show my commitment to the company. During my injury period, I used to leave my job everyday at 10 a.m. to go to the hospital where I received my therapeutic treatment and then return to work. The company continued to receive, illegally, my wages from the social security and they did not declare that I was working until I was fit enough.

This occurred with the complicitness and blessing of the employer, Signor S., who concealed the fact that what happened to Abdallah is a breach of the health and safety legislation. He continues to insist that Abdallah is a very committed worker, but that his productivity is very low. Most employers are likely to take advantage of migrant workers' lack of health and safety knowledge. In fact, over two-thirds of Tunisians in the survey stated that they were given no induction or information about health and safety provisions.

Another endemic feature of the construction industry is the high level of labour mobility, which prevents many workers from improving their health and safety education and training. Signor P. observed:

During my forty years employing people, I have had more employees than Agnelli (head of Fiat) himself. It seems a joke that I had so many employees who worked for one day only. When they found the job hard, they didn't return. They didn't bother to cash in their day's work. All these workers were Italians, both *Modenesi* and Southerners.

Nearly nine out of ten of the Tunisian workers in the construction industry who responded to the questionnaire had moved jobs at least twice. Young migrant workers, in particular, often consider their employment in the construction industry as a channel to find a better and stable job, hopefully in manufacturing industry.

However, the poor working conditions and dangerous health and safety situation of migrant workers in the construction industry is by no means an exception to what is happening in some manufacturing sectors such as ceramics.

Many small and medium-sized firms in the ceramics industry in the industrial district of Sassuolo (a small town on the outskirts of Modena) benefit from migrants' work experience and skills while denying them both job promotion and a healthy working environment. One of these unlucky migrants is a Tunisian friend, whom I shall call Nabil, who was assigned work in the kilns. This was hot, dirty and physically demanding and involved exposure to chemical hazards. Nabil had graduated in Chemistry in 1989 and has been employed as an unskilled worker since he finished his degree and came to Italy in 1990. His degree has not only not been recognised, but he has been subjected to a consistent process of demoralisation in the ceramics factory where he is currently employed as an unskilled worker. Here is part of his testimony:

My job is to mix chemical products in the exact quantities and according to the description on the order I receive from the laboratory. Having a background in Chemistry, I would occasionally notice that the quantities recommended were wrong and may be dangerous and I would raise it with the foreman, who sometimes ignored all the health and safety concerns and ordered me to carry on. He would then realise the damage caused. After a series of such incidents, I decided to bypass the foreman and talk to the manager. I took the opportunity to present to him my application for a position in the laboratory where I thought I could be more useful. Later, the manager told me: 'the only thing I can offer you is to give you a job near the kilns'. This is one of the worst and most precarious jobs in the factory, owing to the heat, danger and dirt.

Nabil is only one example of many other Tunisians in Modena with similar qualifications and many years of experience who are accepted for menial and hazardous jobs only. Over 27 per cent of Tunisian migrants surveyed indicated that the nature of their professional activity was dangerous, but they cannot afford to be unemployed.

CONCLUSION AND RECOMMENDATIONS

The above case study evidences how migration vulnerability and disadvantaged position exposes migrant workers to high level of risk in the small and medium construction and industrial firms where they are employed. Tunisian workers witnessed how small enterprises in the construction industry have been using migrant labour not only in the most hazardous and insecure jobs but also as a way of saving labour costs by the avoidance of good health and safety practice. The testimonies show that the health and safety situation of migrants in Italy is by no means an exception to that which has occurred in Australia, USA or other EU countries.

Health and safety regulations and standards differ from country to country within the EU. Therefore, it is difficult to make a comparative judgement between, for example, Great Britain and Italy. On the best data that exist, the construction fatality rate is 11.2 per 100,000 workers in Italy in 1991, almost

twice the rate of 6.9 in Great Britain. However, these figures are compounded by the inclusion of self-employed in the Italian case and their exclusion in the British (Health and Safety Commission, 1997: 82). On the other hand, the Italian rate is based on the data provided by companies which pay contributions regularly to the Italian National Insurance and Security Office. It does not take into consideration the large number of medium-sized and small firms that avoid paying the social contribution and are the main employers of clandestine and illegal migrant workers. Therefore, it is likely that the rate of fatal injury, especially amongst migrant workers, is far greater than the figure provided by the National Social Security Office. If this were not enough, migrant workers earn much less, even for the same job, than their Italian counterparts. For instance, an IRES survey (1997: 65) found that, in the construction industry, an Italian labourer earns 150,000 lire a day (£58), whereas an immigrant receives 50,000 lire (£20) for the same work.

This paper was premised on the assumption that learning more about migrants and ethnic minority workers' values, beliefs and conceptions regarding occupational health and safety could inform and equip the health and safety policy-makers with better understanding of their concerns. This could make their initiatives not only more responsive to the specific needs of migrants and ethnic minority workers but also ensure a more equitable basis for participation and involvement in health and safety issues. Health and safety policy-makers could also benefit by enrolling migrants and ethnic minority workers in their courses on prevention and control of health and safety risks. Moreover, in order to tackle the health and safety problems of migrants and ethnic minority workers, health and safety authorities, professionals and trade union organisations need to take into consideration the dynamics of social exclusion and the special needs of migrant and ethnic minority workers (i.e. language difficulties, training and education).

The analysis of the health and safety concerns of migrants and ethnic minority workers cannot only be understood and attributed to their membership of the working class but also to their cultural conception, which is particularly influenced by their language problems and their spiritual beliefs. The widespread racism and discriminatory practices which exist in the labour market and society as a whole may also explain why migrants are often at particular risk of stress-related work. In other words, health and safety concerns of migrants and ethnic minority workers are both class and cultural issues which need to be addressed accordingly, above all by culturally-sensitive means. These include education, training, multilingual information, on-the-job language courses and employment of bilingual health and safety inspectors. Addressing these issues not only can empower migrants and ethnic minority workers but also encourages them to participate and take a leading role in trade union organisations and in promoting the development of occupational health and safety strategies. Addressing the health and safety concerns of migrant workers may help trade unions to consolidate class solidarity and promote social justice

and integration of migrant workers. However, if policy-makers and authority regulators are really serious about reducing the level of accidents and injuries and improving the health and safety of migrant workers, then they have to first tackle racism and discrimination in the workplace.

ACKNOWLEDGEMENTS

This paper draws on material from my PhD in Sociology at the University of Bristol. I acknowledge the financial help of a research scholarship from Bristol University. I am also grateful to Professor David Walters of South Bank University for his helpful and constructive comments on an early draft of this paper, and to Professor Russell King for his continuous support and editorial guidance.

REFERENCES

- ANDALL, J. (1990) – New migrants. old conflicts: the recent immigration into Italy. *The Italianist*, 10: 151-175.
- AUSTRIN, T. (1980) – The “Lump” in the UK construction industry. In NICHOLS, T. (ed.) – *Capital and labour: Studies in the capitalist labour process*. London, Fontana: 302-315.
- BECK, U. (1992) – *Risk society: towards a new modernity*. London, Sage.
- BRUNETTA, R. & TURATTO, R. (1996) – The Italian labour market and the European convergence. *Review of Economic Conditions in Italy*, 50(2): 199-214.
- CARITAS (1998) – *Immigrazione: Dossier Statistico 1997*. Roma, Anterem.
- CASTLES, S. & KOSACK, G. (1973) – *Immigrant Workers and Class Structure in Western Europe*. London, Oxford University Press.
- CONE, J. E.; DAPONTE, A.; MAKOFSKY, D.; REITER, R.; BECKER, C. & HARRISON, R. J. (1991) – Fatal injuries at work in California. *Journal of Occupational Medicine*, Vol. 33(7): 813-817.
- CORVALAN, C. F.; DRISCOLL, T. R. & HARRISON, J. E. (1994) – Role of migrant factors in work-related fatalities in Australia. *Scandinavian Journal of Work and Environment Health*, Vol. 20(5): 360-370.
- DANESH, K. (1995) – I lavoratori immigrati nei settori dell’edilizia a Roma. *Rassegna Sindacale* 5(3): Supplement.
- DE BRUYN, M. (1989) – Turkish migrants and somatic fixation in the Netherlands: Research in Amsterdam. *Social Science Medicine*, Vol. 29, No 7: 897-898.
- DE LUCA, L. & BRUNI, M. (1993) – Flexible employment configuration. In *Unemployment and Labour Market Flexibility: Italy*. International Labour Organisation, Geneva: 131-154.
- DÖÖS, M. *et al.* (1994) – Immigrants and occupational accidents: a comparative study of the frequency and types of accidents encountered by foreign and Swedish citizens at an engineering plant in Sweden. *Safety Science*, Vol. 18(1): 15-32.

- DWYER, T. (1991) – *Life and death at work: industrial accidents as a case of socially produce error*. New York, Plenum Press.
- ELKELES, T. and SEIFERT, W. (1996) – Immigrants and health: unemployment and health-risks of labour migrants in the Federal Republic of Germany, 1984-1992. *Social Science Medicine*, Vol. 43, No 7: 1035-1047.
- ELLING, R. H. (1989) – The political economy of workers' health and safety, *Social Science Medicine*, Vol. 28, No 11: 1171-1182.
- FREEDMAN, T. G. (1998) – “Why don't they come to Pike Street and ask us”: Black American women's health concerns. *Social Science Medicine*, Vol. 47, No 7: 941-947.
- Health and Safety Commission (1997) – *Health and Safety Statistics 1996/1997*. Norwich, Her Majesty's Stationery Office.
- ILO (1979) – *Safety and health of migrant workers*. Geneva, International Labour Office.
- ILO (1995) – *Social and labour issues concerning migrant workers in the construction industry*. Geneva, International Labour Office.
- IOSIFIDES, T. & KING, R. (1996) – Recent Immigration to Southern Europe: the Socio-economic and Labour Market Contexts. *Journal of Area Studies*, 9: 70-94.
- IRES (1997) – *Italy: Case studies of good practice for the prevention of racial discrimination and xenophobia and the promotion of equal treatment in the workplace*. Dublin, European Foundation for the Improvement of Living and Working Conditions.
- JENKINS, N. H.; LE, T., MCPHEE, S.J.; STEWART, S. & ITA, N. T. (1996) – Health care access and preventative care among Vietnamese immigrants: Do traditional beliefs and practices pose barriers?. *Social Science Medicine*, Vol. 43, No 7: 1049-1056.
- KING, R. & RYBACZUK, K. (1993) – Southern Europe and the International Division of Labour: From Emigration to Immigration. In KING, R. (ed.) – *The New Geography of European Migrations*. London, Belhaven Press: 175-206.
- LEE, G. and WRENCH, J. (1980) – “Accidents-prone immigrants”: an assumption challenged. *Sociology*, 14(4): 551-566.
- LEVENSTEIN, C. (1995) – The social context of occupational health, in *Occupational health: recognising and preventing work-related disease*, 3rd edition. In LEVY, B. S. and WEGMAN, D. H. (eds.). London, Little Brown and Co.: 473-488.
- LIN, V. and PEARSE, W. (1990) – A worker force at risk. In REID, J. and TROMPF, P. (eds.) – *The health of immigrant Australia*. London, Harcourt Brace Jovanovich.
- MANDERSON, L. (1990) – Does culture matter? In REID, J. and TROMPF, P. (eds.) – *The health of immigrant Australia*. London, Harcourt Brace Jovanovich, xi-xvii.
- MIGLIORE, S. (1989) – Punctuality, pain and time-orientation among Sicilian-Canadians. *Social Science Medicine*, Vol. 28, No 8: 851-859.
- MILES, R. (1986) – Labour migration, racism and capital accumulation in Western Europe since 1945: an overview. *Capital & Class*, 28: 49-86.
- MYERS, J. R. and HARD, D. L. (1995) – Work-related fatalities in the agricultural production and services sectors, 1980-1989. *American Journal of Industrial Medicine*, Vol. 27(1): 51-63.
- NICHOLS, T. (1997) – *The sociology of Industrial Injuries*. London, Mansell.
- ONORATO, P. (1989) – Per uno statuto dello straniero. *Democrazia & Diritto*, 6: 303-328.
- PERÒ, D. (1997) – Immigrants and politics in left-wing Bologna: Results from Participatory Action Research. In *Southern Europe and the new immigrations*, edited King and Black, published by Sussex Academic Press, Brighton: 158-181.

- PHIZACKLEA, A. (1983) – In the front line. In *One way ticket: migration and female labour*, edited by A. PHIZACKLEA. London, Routledge.
- PIORE, M. (1979) – *Birds of Passage: Migrant Labour in Industrial Societies*. Cambridge, Cambridge University Press.
- Provincia di Modena (1995) – *Note, analisi, riflessioni sul fenomeno dei cittadini stranieri in provincia di Modena*. Modena: Osservatorio Economico Sociale della Provincia di Modena.
- PUGLIESE, E. (1992) – The New International Migration and the Changes in the Labour Market. *Labour*, 6(1): 165-179.
- QUASSOLI, F. (1999) – *Migrants in the Italian underground economy*. Oxford, Blackwell.
- REID, J. and TROMPF, P. (eds.) (1990) – *The health and safety of immigrant Australia: A social perspective*. London, Harcourt Brace Jovanovic.
- SOROCK, G. S.; SMITH, E. O. & GOLDS, T. (1993) – Fatal occupational injuries in the New Jersey construction industry, 1983 to 1989. *Journal of Occupational Medicine*, Vol. 35(9): 916-921.
- VENTURINI A. (1996) – Extent of Competition between and Complementarily among National and Third-World Migrant Workers in the Labour Market: An Exploration of the Italian Case. In *The jobs and the effects of migrant workers in Italy: Three essays*. Geneva, International Labour Organisation: 25-42.
- VILLA, P. (1981) – Labour market segmentation and the construction industry in Italy. In *The dynamics of labour market segmentation*, WILKINSON, F. (ed.). London, Academic Press: 133-149.
- WALLERSTEIN, I. (1995) – The construction of peoplehood: Racism, nationalism, ethnicity, fourth edition. In *Class, Nation, Race: Ambiguous identities*, E. BALIBAR & I. WALLERSTEIN (eds.). London, Verso: 71-85.
- WALTERS, D. R. (1998) – Health and safety strategies in a changing Europe. *International Journal of Health Services*, Vol. 28(2): 305-331.
- WRENCH, J. (1999) – The “accident-prone immigrant”. In Workshop on Migration, work environment and health, Stockholm, 8-9 October 1999.
- WRENCH, J. (1997) – *European Compendium of good practice for the prevention of racism at the workplace*. Dublin, European Foundation for the Improvement of Living and Working Conditions.
- WRENCH, J. and VIRDEE, S. (1996) – Organising the unorganised: ‘Race’, poor work and trade union. In ACKERS, P. et al. (eds.) – *The new workplace and trade unionism: Critical perspectives on work and organisation*. London, Routledge: 240-278.