

Religious Identity, Citizenship, and Welfare: The Case of Muslims in Britain

Waqar I. Ahmad and Charles Husband

In addressing the situation of Muslim communities in Britain, it is apparent that one of the major frameworks for understanding their situation has been the notion of "citizenship," for citizenship is a means of identifying critical aspects of the relationship between the individual and the state. Following Bottomore (1992), we may make a useful distinction between "formal" and "substantive" citizenship: the former being simply defined as "membership in a nation state" and the latter as "an array of civil, political, and especially social rights, involving also some kind of participation in the business of government" (ibid.).

There are a number of salient points that should be made in relation to examining the implications of this distinction. First, we may note that the legal definition of citizenship is always informed by the cultural and ethnic agendas historically rooted in the foundation myths of each nation-state. Thus in France, for example, just as the revolutionary iconography of the Tricolor, Marianne, and Liberty, Equality, and Fraternity continue to serve contemporary national sentiments (Hobsbawm 1983), so today French legal framing of formal citizenship is infused with its revolutionary roots:

La tradition centraliste française interdit la reconnaissance dans l'espace public des 'communautés', au sens où elles existent au États-Unis. (Schnapper 1990).

Consequently, in France neither ethnicity nor religion are formally relevant in determining access to citizenship.

Waqar I. Ahmad is a lecturer in health studies, and Charles Husband is a professor of social analysis. Both are affiliated with the Department of Social and Economic Studies, University of Bradford, Bradford, England.

Germany, on the other hand, is very much an ethnic state with citizenship conceived of in relation to an ethnic consciousness of kind. As Bottomore puts it:

Because national feeling developed before the nation-state . . . the German nation . . . was conceived not as the bearer of universal political values, but as an organic cultural, linguistic, or racial community—as a *Volksgemeinschaft*. (Bottomore 1992).

A powerful idea of shared ethnic identity is at the core of German national identity and is therefore reflected in its citizenship policy.

Britain, on the other hand, with its self-image of monarchical continuity and historic parliamentary democracy had, until the 1981 Nationality Act, no legal concept of citizenship, since Commonwealth nationals and members had a common allegiance to the monarch. That demotic, nonethnic concept of allegiance to the state was in effect eroded by immigration legislation which, in seeking to exclude nonwhite immigrants from 1962 onwards, progressively moved to define blood links as an essential criterion of rights to entry and settlement in Britain (Gordon 1989). During the Thatcher era, this was heightened and focused by the neo-conservative racialized nationalism promoted by the new right in England (Gilmore 1987; Husband 1991). The Falklands War, the "Iron Lady" resisting European assaults upon British sovereignty, explicit anti-immigrant rhetoric, and an attempt to define and assert the primacy of English-British culture in schools through the 1988 Education Act were part of a process to make "traditional" British values salient. British legislation and sentiments have moved citizenship policy from an open demotic concept of citizenship towards one based on an ethnic-state concept.

Second, Britain and other European countries ended postwar recruitment of migrant labor to service the national economy and provide a malleable and cheap labor force in the 1970s via strict immigration control (Hammar 1990; Layton-Henry 1990). Structural changes in international manufacturing and trade caused a major shift in Western European labor needs, and economic crisis showed the tensions inherent in the ethnic segmentation of labor markets and the demographic isolation of settled immigrant communities. During 1981, major civil disturbances in British cities exposed the frustrations of these communities (Benyon 1984). The Scarman Report (1981), which analyzed causes and necessary responses, acknowledged the existence of urban deprivation, refused to accept widespread racism in British social life, and reasserted the fundamental decency of the British political and institutional fabric. The fundamental equity of formal citizenship was reasserted, while the necessary conditions for guaranteeing substantive equity were fudged.

The point being made here is that citizenship is not merely a legal status; it is also a vehicle for nationalism and a focus for defining national identity. Thus in Germany, very substantial numbers of German-born Muslim residents of Turkish background are excluded from formal citizenship, while in France, working-class North African Muslims, who are French citizens, are made to feel culturally alien. And in Britain, following the "Rushdie Affair" and the Gulf War, British Muslim citizens have been challenged to demonstrate their "Britishness."

Bearing both of the above points in mind, it is therefore particularly important to note the ambiguous relationship between "formal" and "substantive" citizenship. In Brubaker's words:

That which constitutes citizenship—the array of rights or the pattern of participation—is not necessarily tied to formal state-membership. Formal citizenship is neither a sufficient nor a necessary condition for substantive citizenship . . . That it is not a sufficient condition is clear: one can possess formal state-membership yet be excluded (in law or in fact) from certain political, civil, or social rights . . . That formal citizenship is not a necessary condition of substantive citizenship is perhaps less evident . . . Often social rights, for example, are accessible to citizens and legally resident non-citizens on virtually identical terms. (Quoted in Bottomore 1992)

Indeed, within Europe there is such a large number of persons who are non-citizen settled residents of nation states who enjoy a range of civil and social rights that Hammar (1990 and 1992) has proposed a new term—"denizens"—to describe them:

This new term is meant to emphasise that the traditional sharp distinction between foreigner and citizen has been eroded and that large numbers of foreign citizens have established close, intensive, secure and long-standing relations with their country of residence. (Layton-Henry 1990)

However, among other consequences, "denizens" would find themselves seriously disadvantaged as regards their mobility within the post-1992 "Europe without frontiers." Thus in discussing the welfare environment of Muslim communities in Britain, we must bear in mind the diversity that exists vis-à-vis their formal and substantive citizenship rights.

The denial of citizenship to ethnic aliens settled in European states remains a powerful means of politically asserting that *they do not belong*. And despite the ability of such "denizens" to have de facto access to sub-

stantive citizenship rights, their political rejection and isolation feeds the cultural xenophobia and racism that then shapes their experience of seeking to exercise these social rights. This is also true in cases where Muslim communities, as in Britain, predominantly enjoy formal citizenship. If these communities are then vilified as "an alien wedge" by popular *and state* racialized nationalism, their ability to enjoy the substantive rights of citizenship are equally undermined (Husband 1991).

The relationship between the state and citizenship rights is, as we have seen, complex. Moreover, if we move from a general consideration of citizen rights to a discussion specifically dealing with those social rights relating to the provision of education, health care, welfare benefits, and housing, then we rapidly encounter a problem: How are we to identify the welfare "needs" of Muslim communities in Europe?

Can we legitimately assume a commonality of experience and identity that constitutes the Muslim presence in Britain? Are North African Muslims settled in London, Pakistanis in Bradford, Bangladeshis in Spitalfields, and white British Muslims to be regarded as having identical welfare needs? Clearly not, for these are persons of distinct ethnic identities who share a religious faith. So we need to confront a paradoxical diversity: Islam transcends ethnicity but is always mediated through it. Islam is universal, while ethnicity is usually linked to territorial identities.

In policy terms, can we distinguish between the universal religious prescriptions of Islam and the historically specific cultural norms of ethnic identities? In terms of theological hermeneutics, the answer must be: Yes, we can make a good attempt to distinguish the two (witness, for example, the theological scholarship of Muslim feminists). But in terms of the lived experience of "Muslim ethnic-minority communities," this is a more difficult and contentious task.

One useful advance is perhaps to recognize that Islam may be invoked to both defend and define ethnicity. Barth (1969) pointed out that ethnicity should be understood in terms of the mechanisms used to *define the boundaries* of ethnic groups. Religion is one such potent mechanism of signalling difference, of differentiating *us* from *them*. Thus in secular-Christian Europe, Islam is invoked increasingly to define the "Other," the alien southern and eastern perimeter defining the edge of "Europe." So, too, for Pakistanis in Britain, Turks in Germany, or Moroccans in France: Islam is a bond that positively affirms *their* ethnic identities.

We have to be clear about the policy implications of two distinct processes:

1. Islamic prescriptions that have immediate implications for implementing policies to ensure the provision of the means to fulfill *religious* demands relating to, for example, diet, burial, prayer, and education.

2. The consequences of the majority society's discrimination against ethnic minority communities, by means of which their Muslim identity is identified, vilified, and provides an agenda for focusing discriminatory action, such as a) specifically by blocking the provision of *halāl* food, hindering the establishment of Muslim schools, and blocking the construction of mosques, and b) generally by discriminating in housing, employment, education, and welfare, and thus making the Muslim community a marginal class.

Muslim communities thus become disproportionately represented in the national underclass and are consequently denied the full enjoyment of their social rights. Their class position and, at the same time, the majority community's racism tend to force them to call upon the resources of the welfare state. This development, in turn, is perceived as disproportionate dependency and so legitimates defining them as a burden on society and a threat to the interests of "real Britons."

The Production and Construction of Welfare Needs and the Role of the State

We cannot discuss welfare needs without considering how they are produced and defined. The British state has played an important but inglorious part in creating particular needs through racialized policies, particularly on immigration. Various state welfare agencies now base their assessment and provision of welfare to minority ethnic communities on their assessment of the claimant's immigration status and have thus become tools of state immigration control. Gordon puts it well:

Black people are a problem and unwelcome here. That is the message which is restated and reaffirmed every time immigration policy is made more restrictive. It is a message not lost on "our people" in Britain—on the employers who can ask, with reason, why they should have "them" in their firm if the government does not want them in the country, on the tenants who do not want them in "their" streets or housing estates, on the parents and pupils who do not want them in "their" schools, on the 42 percent of young white people who, according to the British Social Attitudes Survey, will now willingly admit to racial prejudice. (Gordon 1989)

Gordon is right to emphasize state racism as a vital part of societal racism. Various state spokespersons throughout British history have ex-

pressed concern about foreigners upsetting the population "balance," using state services to which the white people should have sole or first rights, or creating "race relations problems." Queen Elizabeth I was horrified that "blackamoors" had settled in her "realm" and were consuming relief meant for her own faithful subjects. In 1979, Mrs. Thatcher made her famous remarks about British people's fear of being "swamped" by people of alien cultures. Douglas Hurd, then Home Secretary, said in 1987 that:

It would not be in the interests of the ethnic minorities themselves if there were a prospect of further mass inward movements. That prospect would increase social tensions, particularly in our cities. That is why we say that firm immigration control is essential if we are to have good community relations. (Hansard 1987)

These ideas about the nonwhite populations being a problem, their presence a threat, and their consumption of welfare as inimical to the interest of the white people can all be seen in play in the minority ethnic communities' interaction with state welfare. Clear links have been established between immigration status, length of stay, and social security entitlement. The practice of passport checking, particularly for "Asians" is widespread. Arnott (1987) writes that:

A survey in Oldham found that only 18 out of 77 Department of Health and Social Security officers did not check passports. Anyone who is black, particularly if they look Asian or do not speak fluent English, are often assumed to have "recently come from abroad" and therefore are asked for their passports. A Tameside man who came to this country as "recently" as 1938 was asked for his!

To borrow a phrase used to describe the British and other western governments' treatment of asylum seekers, what the example given above illustrates is *the politics of dissuasion*. The British government is sanctioning bureaucratic practices that routinely question the citizenship rights of Muslims in Britain because they look "un-British," and continues to create an environment that tends to dissuade British Muslims from claiming their legitimate welfare rights.

The problem does not stop there, for the institutional discrimination located in routine practices is amplified by the personal racism expressed freely by bureaucrats and professionals. After the publication of the report *Action Not Words* by the National Association of Health Authorities (1988), one particular health authority with a minority ethnic group popu-

lation of about 15 percent (the largest single Muslim population in an authority) wrote to all its consultants asking about the adequacy of service provision to ethnic minority patients. In reply, its senior orthopaedic consultant rehearsed many of the racist arguments about equal opportunities, even when only implemented at a national level (as in that hospital), being inimical to the minorities. This was based on the claim that such policies will prolong the time taken by the mainly Muslim minority groups to integrate. Rather, the problem was simply due to a lack of integration as opposed to institutional or individual racism within the health service. The consultant felt free to state that the improvement of policies for the Muslim minority was unfair, as by virtue of birth and lineage white patients deserved a better quality of service than nonwhites.

In a paper published in 1988, Kushnick gives another distressing example:

In 1981 when lawyers acting for Ibrahim Khan, who had been thrown out of a window by three youths, wrote to St Mary's Hospital in London to request a letter from the hospital so that a claim for criminal compensation could be made on his behalf, they received the following reply:

"No one here is prepared to write a report for you about this patient . . . Mr Khan has been extremely fortunate to receive treatment that exceeds the cost of a heart transplant. There is absolutely no reason why this patient should receive preferential treatment or become a burden on the tax payers here. I find it immoral to use public money allowing Mr Khan to become a burden on their dwindling resources." Signed: Orthopaedic secretary and over-burdened tax payer. (Kushnick 1988)

A central point in our argument is the distinction between the ways in which needs are *produced* and the ways in which they are *defined or represented*. It can be seen that in defining Muslim communities as ambiguously British, as an "alien wedge" and therefore justifiably second-class citizens, their welfare needs are seen as less legitimate than those of their British fellow citizens who are white. And as we shall see below, Muslim needs also tend to be represented as having a specifically unique and peculiar origin in their alien culture and religion.

We need, therefore, to be careful when it comes to identifying the ways in which the welfare needs of Muslim communities are *defined or represented*. Independently of this, we need to reveal how their welfare needs are produced. In addition, here we must recognize that state immigration policies and discrimination based on color, culture, and religion

are major contributing factors in creating the welfare needs of Muslim communities.

Take, for example, the housing policies of the London Borough of Tower Hamlets. State and institutional racism has restricted the employment chances of the local (largely Bangladeshi) Muslim population, and this population thus remains in low status jobs and has a high unemployment rate. The option of owner occupation therefore is not realistic, creating a need for socially rented property. Due to these and other problems, many Bangladeshis have been separated from their families, who remain in Bangladesh and for whom they have no accommodation in Britain. The local council policy of registering requests for housing from its Bangladeshi residents only after their families arrive from Bangladesh automatically made the families homeless on arrival. The council then could claim that as the families had deliberately made themselves homeless, they were a low priority. In a formal investigation, the Commission for Racial Equality found that the majority of the boroughs' thirteen hundred homeless people in 1988 were Bangladeshis (CRE 1988).

Another example shows the interplay between many of the above issues and traditional English fears about "Asian arranged marriage." The "arranged marriage system" was seen by immigration officials as a way to circumvent immigration controls where both young Asian men and women were potential sponsors of partners from the Indian subcontinent. Attempts were made to discriminate, particularly against women. For example, the entry of a fiancé into Britain is conditional on the resident spouse or family providing for his/her accommodation and welfare needs. In a society combining racial and gender-based discrimination in relation to Muslim and other Asian women in employment and elsewhere, they are obviously less likely to be able to fulfill these requirements than are men from the same communities. According to Brah (1992):

The immigration rules governing the entry of foreign husbands and fiancés were changed five times between 1969-1983 with the primary aim of preventing black and immigrant women from having their partners join them in Britain while allowing white women the right to do so. In 1985, the European Commission of Human Rights decreed that the British immigration rules discriminated on the grounds of sex.

The British government reacted by making the conditions for men equally difficult—a strange way of achieving equality by any standard! The "primary purpose" rule in relation to controlling entry into Britain is a classic example of the discriminatory potential of discretionary powers linked to inherently ambiguous legal requirements. As a way of reinforcing

ing the marginal citizenship of Britain's Muslims and in its capacity to destabilize families and create hardship, it is a vicious tool of state racism.

We see then that state racism legitimates and perpetuates institutional and individual racism in the production and definition of welfare needs of Muslim and other minority groups. It also structures their interaction with welfare agencies.

Class and Racism in Producing Needs

One of the major determining factors of an individual's welfare needs, and of the likelihood of these needs being met, is one's position in the class system (for health and social needs, see Townsend and Davidson 1982; Whitehead 1987). For our discussion here, that position is compounded by the role of racism in modifying an individual's relation to, and experience of, the class system. As Modood stated in a broad generalization:

That South Asian Muslims in Britain form a virtual underclass there cannot be much doubt; throughout the 1980s, of the nine non-white groups identified in the 'Labour Force Survey', Pakistanis and Bangladeshis have suffered the highest rates of unemployment, have the lowest number of educational qualifications, and the highest profile in manual work; and this is true in each respect not just for women but also men, and not just for the middle-aged (the first generation) but also the young. They have had the most adverse impact from immigration laws and rules, they have the worst housing and suffer from the highest levels of attacks on person and property. Of all groups Pakistanis are least found in London and the South-East for they came mainly to work in the run-down mills and factories of the North and Midlands and have in consequence suffered most from the 'shake-outs' of the early 80s and benefitted least from the recent growth. The plight of the Bangladeshis is perhaps worst of all. Scope for improvement is circumscribed by the fact, as a recent European Commission survey showed, that while Muslimophobia has not yet reached French proportions, Asians are the single most disliked minority in this country. (Modood 1990)

Class and racism, in interaction, help to determine the frequency and nature of an individual's interaction with state welfare agencies. While welfare needs are socially produced, the attempt to make use of welfare provision by members of Muslim communities in Britain is all too often *defined* in ethnic terms by state agencies. An ethnic definition of need

helps to obscure the social and structural basis of the need, and helps to perpetuate the marginalization of Muslim citizens.

One difficulty in engaging in a discourse on inequalities between communities defined by religion, rather than as an "ethnic group," is the lack of official data. So although we can talk about inequalities suffered by Pakistanis and Bangladeshis in a reasonably meaningful way, we cannot do so for white and Afro-Caribbean Muslims, Muslims from the Middle East, Afghanistan, Iran, or Turkey. Relatively little has been written about the welfare needs of a number of numerically smaller Muslim communities in Britain (see Rashid 1992 and chapter 3 in Torkington 1991 on the Liverpool Somali population).

We now want to look at some evidence of the low socioeconomic position of Muslims in Britain. Muslims are located in the worst areas of the labor market and suffer one of the highest rates of unemployment. Figures quoted in a parliamentary answer in the Houses of Parliament on unemployment, on 22 May 1992, showed unemployment to be 7 percent for whites, 13 percent for Indians, 15 percent for West Indians, and 21 percent for Pakistanis and Bangladeshis (quoted in Runnymede Trust 1992). The job levels also differ, again with the two main Muslim populations (Pakistanis and Bangladeshis) being particularly badly affected.

In health, the perinatal mortality rate (i.e., deaths of fetuses and/or newborns between twenty-eight weeks of pregnancy and the first week of life) for 1985 was around 10 per thousand for mothers of "all places" and around 20 per thousand for babies born to Pakistani mothers (quoted in Bhat et al. 1988). These differentials are confirmed by later evidence (Britton 1989). In 1990, babies born to Pakistani mothers had the highest stillbirth rates, neonatal mortality (deaths under one month of age), and post-neonatal mortality (deaths between four weeks and one year of life) of all ethnic groups in Britain (Parsons et al., forthcoming). Some may take comfort in thinking that perhaps this is due to the effects of poverty and malnutrition experienced as children and the low educational status of many Pakistani mothers due to their upbringing in an underdeveloped country. However, the sad evidence is that the birth outcome of British-born Pakistani mothers is even poorer, pointing to discrimination and disadvantage as well as to the quality of obstetric and antenatal care (Belderson 1988; Clarke and Clayton 1983). Recent work in Glasgow, which related health to length of residence in an age-controlled sample of Asian residents, showed long-term established residents to be in worse health (Williams, forthcoming).

If we focus on health, the relationship between health status and socioenvironmental situation is of vital importance. The Ottawa Charter for Health Promotion (Whitehead 1992) outlines nine basic prerequisites for healthy living: peace, shelter, education, food, income, a stable eco-

conomic system, sustainable resources, social justice, and equity. The above evidence suggests that the basic prerequisites for a healthy life are not being met for the main Muslim populations in Britain on which we have data. The limited evidence on the welfare needs of some of the smaller Muslim communities shows that not only are their needs not being met, but that the mere existence of these communities in policy terms is not acknowledged (Rashid 1992; Torkington 1991).

However, the current popular discourse on the relationship between the state and the citizen on the one hand and between minority communities and majority society on the other hand portrays a different picture: that the problems facing minorities are due to their own deficiencies. A classic example of this phenomenon is seen when discussing the significance of consanguinity (intermarriage between blood relatives) in relation to health and illness, as will be discussed below.

There is a long history of using ideas about the inherent and stable racial and cultural traits supposedly shared by members of a "racial stock" to define, explain, and shape the response to the perceived needs of "black" or minority communities. Thus there have appeared discourses on black, oriental, and colonized peoples' intelligence, educational performance and intellectual achievements, sexuality, and proneness to particular diseases due to genetic or cultural deficits. In the health services, and in the literature on health and health care of Britain's minority populations (particularly Asian Muslims), "race" and notions of cultural and biological difference combine to result in a particular racialized construction of the minority populations' health needs. State responses to issues thus defined have reflected these racialized constructions (Ahmad 1989). For example, the problem of high perinatal mortality in "Asians" was to be reduced through *cultural* interventions under the Asian Mother and Baby Campaign. In addition, higher rates of rickets were related to perceived culturally inappropriate practices that were to be resolved by a move towards the British style of diet and dress, while higher rates of tuberculosis were to be controlled through vigorous tests at ports of entry (Ahmad et. al. 1989; Gordon 1983; Rocheron 1988).

Muslim family forms, particularly the "arranged marriage," have always been seen to be problematic. For example, with reference to the colonization of India, the British claimed that they were a liberalizing force especially for the women, who were seen to be socially, economically, and sexually oppressed. In other words, they were "ruthlessly oppressed creatures who must be saved from their degradation" (Brah 1992). Thus the media now carry stories of "British, liberated" Asian girls being forced into arranged marriages, thus posing this custom as a threat to individual freedom and the British way of life.

White liberal professionals often champion the "oppressed" young person, often a woman, against "outdated," Third World, oppressive systems such as arranged marriages. If one adds these ideological constructions with further "monstrous" acts (i.e., marriage with consanguineous, blood relatives), one has the making of a highly charged discourse combining notions of cultural pathology with genetic pathology, and illicit sexual relationships verging on incest that complement the notion of Muslim women as helpless, passive, oppressed, and in need of being saved.

The following example is instructive. The fact of higher rates of consanguinity among Pakistanis in Britain is now the ultimate "explanatory hypothesis" within medicine of their poor health status. Recently, one of us met an oncologist who was convinced that the "unusual cancerous tumors" he was seeing in Pakistanis were due to consanguinity, a hematologist who blamed consanguinity for their blood disorders, an ophthalmologist who was convinced that there was a link between their eye disorders and their marriage patterns, and of course the informal, and to some extent formal, culture within obstetrics that has a theological belief in the link between high perinatal mortality and interbreeding among Pakistanis.

The interest in consanguinity among obstetricians includes serious researchers who wish to disentangle the complex interplay between socio-economics, life-styles, environment, genetics, and health service factors in influencing, for example, birth outcome, perinatal mortality, and congenital malformations. A larger group, however, is happy to hang anything from poor "birth outcome" to blood disorders, cancers, diseases of the eye, and much more onto this new-found peg. This concern is already being expressed in scientific literature (Bundey et al. 1989; Lancet 1991), and research on consanguinity is likely to be a major subindustry soon.

Consanguinity is fast becoming the "cause" of all the health problems of the Pakistani and Muslim minorities, despite the fact that the relevant research literature remains inconclusive (Rao and Inbaraj 1977; Macluer 1980; Saedi-Wong 1989) and is too often conveniently sidestepped. The fact that it is nearly impossible to control for numerous confounding variables—including social class, education, and health care quality—in studies on the effects of consanguinity is easily ignored. It provides an excellent way of blaming the victim and absolving the health services and wider racial inequalities from responsibility. Better still, by not doing anything one can claim to be antiracist and on the side of the Muslims, as the only possible recommended action regarding consanguinity would be for communities to abandon this alien and deleterious habit. There is evidence, however, that Muslim communities have refused to be intimidated by professional disapproval and have demanded adequate and equitable health care resources for health problems that are popularly located in their presumed pathological cultures (Darr 1990).

Thus racism and racial discrimination is ignored, and ideas about the minorities' duty to change, to become true Brits, are emphasized. It is a small step from presenting issues of power, structural disadvantage, and racial oppression as problems of minority cultures to arguing that the promotion or even maintenance of minority cultures is inimical to becoming good Brits. In this scenario, to talk of fighting racism or anti-Islamic sentiment, generally agreed to be on the rise across Europe, becomes positively harmful to "good race relations" and to the interests of minority communities. Thus it is argued that if they must protect their cultural heritage, they should do it themselves. But they should also beware of the potential harm of such acts, as they may conflict with "being British."

An example of this is the text of an open letter to a number of Muslim organizations sent by John Patten to clarify the Conservative government's position on "being British" (4 July 1989). Stressing "integration" and "participation" by all minority ethnic groups, the minister then stressed that "being British" meant:

. . . that we recognise and support those things which, by virtue of living in Britain, are common to us all. Those include: the framework of laws, freedoms, rights and obligations which we live under; the English language; and British history. One cannot be British on one's own exclusive terms or on a selective basis, nor is there room for dual loyalties where these loyalties openly contradict one another. (Cited in Singh 1992)

Muslim Mobilization: Concluding Remarks

We have come again to the tension between the de jure reality of a common "formal citizenship" and the de facto experience of the inequalities of "substantive citizenship." The diversity of ethnicities in Britain is not easily accommodated within the English nationalism that informs state policies. For welfare agencies there is a clear requirement to *appropriately* recognize and respond to ethnic diversity amongst their clientele.

The need for "ethnic sensitivity" in responding to welfare needs has direct implications for the training and recruitment of personnel in welfare agencies. Local authorities and some professional bodies have begun to address this question (CCETSW 1991). But the response is patchy and the political will often ambiguous or "actively" lacking.

Nor does respecting ethnic diversity in response to welfare needs address the social production of those needs. Challenging the social production of welfare needs is necessarily political, and this raises particular questions for the Muslim communities in Britain. This should have been an area of policy where the political focus upon power relations and

structural inequities of the antiracist movement in Britain could have been assumed to provide support for Muslim mobilization. However, a number of factors may be noted as informing the context for Muslim mobilization, among which are:

- 1) Religion is part of our personal, cultural, and historical identity. It is important for many, and its importance is not always recognized by all;
- 2) There has been, recently, a rising tide of anti-Muslim sentiment or racism that has been increasingly openly articulated since the mobilization against *The Satanic Verses*. This is gaining some respectability. Muslims should rightly be concerned about it and should organize in defense;
- 3) The antiracist movement has neither adequately understood Muslims' concerns and fears nor adequately supported their struggles in recent years; and
- 4) Antiracism as a political force has been severely diminished by continued attacks from both the right and the central government. Even some on the left have lost faith in its commitment to a class-based model to effect antiracist change. Moreover, some Muslims see it as irrelevant at best but as generally inimical to their interests.

We wish to assert that the antiracist movement has to come to terms with new forms of struggle around religious identity and the protection of religious values and traditions. Many Muslims clearly felt that both the grassroots and the formalized antiracist movements did not aid their cause. However, there are a number of problems associated with organizing on religious or cultural-ethnic grounds: it fragments the much wider political unity based on common oppression under British racism; and it fits in with the New Right discourse and policy of accentuating difference and then setting up such difference as deviance from a British norm. This then fuels an explanation of the "natural fears" of the white community as being legitimate.

To some extent, Muslim identity is made central for Muslim communities by the distinctive anti-Islamic racism currently prevalent in Britain and Europe. Thus Muslim unity and mobilization is a necessary and legitimate strategy. However, the diversity of the ummah should guarantee that such Muslim mobilization does not become essentialist and deny the ethnic diversity that constitutes the Muslim communities of Europe. Participation in common struggles against racism and distinct pro-Muslim stra-

tegies are not mutually exclusive. The demography of Muslim communities means that struggles for adequate welfare provision at the local level for social services, education, and health will have a distinct Muslim and ethnic component. The specific constitution of local communities, their needs, networks, and points of leverage with local and state agencies should guarantee this.

To the extent that the citizenship rights of Muslim communities are defined in relation to their "ethnic minority" status, they must join with other ethnic minorities to resist their marginalization and oppression. In Britain, immigration legislation, the 1988 Education Act, and the provision of funding for welfare benefits are not uniquely disadvantageous only to Muslims. In challenging state policy at the level of its formulation and legal definition, or the white ethnic xenophobia of bureaucracies and professions, much is to be gained by a united front against oppression.

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