

## Chapter 26. Benefitting from a Turkish migration background? Experiences from medical students with Turkish migration background

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### Introduction

Persons with migration background have become a central issue in research in the past few years, especially according to the current migration debate in the German speaking countries (Brian, 2009; Frum, 2015; Straubhaar, 2016). However, the statistical and scientific evidence of students with Turkish migration background, who are found in higher qualification levels of the tertiary education sector, are so far underexplored. The available data refers almost exclusively to secondary education and the tertiary area is not considered (Müller, 2012).

Up to now there are no detailed studies available treating the challenges of students with Turkish migration background, especially of those in the medical field. The reason for this lack in literature on students with Turkish migration background in Austria, and in general in the German speaking countries, lies within the fact that the importance of this issue has been increasing only in the last few years. In the 1960s Turkish “guest workers” came to Austria to work (Firdaus, 2008), with the intention to go back to Turkey. But many migrant workers remained in Austria and built a new home. At that time studies on students with Turkish migration background did not matter, because they were not present in tertiary education and therefore studies were not possible. Meanwhile, the situation in Austria, like in the other German speaking countries, has changed and young people with Turkish migration background are studying at Austrian universities.

The educational success of students – women as well as men – with migration background seems to be largely invisible in a dominant deficit-orientated migration discourse. School failure of children with migration background are still primarily explained by cultural differences (Bourdieu & Passeron, 1971; Erler, 2007; Farrokhzad, 2007; Fuchs-Heinritz & König, 2011; Unger et al., 2012). For persons with migration background and persons from rather lower classes, disadvantages, e.g. discrimination, in school and at universities can be discerned (Gomolla, 2008, 2010). In the Austrian and German educational system, these disadvantages are partly the result of the educational attainment of parents, family income, ethnic origin and of gender affiliation in the Austrian and German educational system (Fuchs-Heinritz & König, 2011). Women and men with migration background have to deal with many difficulties in their educational career, but many of them have shown to be highly motivated and show an equally high frustration tolerance although they have to cope with structural barriers and prejudice because of their origin. Although the educational participation of students with migration background at universities is constantly rising, the percentage of these students is

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outnumbered by those without migration background (Firdaous, 2008). The Social Survey of the German student union published that the Turkish group is the largest among all students (who account for 21% of the educational residents), followed by students with Croatian migration background (10%), Italian (8%) and Polish (5%) (Middendorff, Apolinarski, Poskowsky, Kandulla, & Netz, 2013). The German Student Union's attention focused on the proportion of women, too. Among students with migration background the proportion of women in the winter term 2005/2006 was 50% (Middendorff et al., 2013). This suggests that the proportion of female students with migration background is larger than of those without migration background, because the proportion of women among all students is 47%. In the mentioned academic year, it became clear that for female students with Turkish migration background, a strong increase is to be expected (Tepecik, 2010).

The group of students with Turkish migration background is still a minority, however, the social relevance and future function of these students should not be underestimated. This corresponds to the fact that academics with migration background mostly identify with the German speaking countries – they see Austria, German or Switzerland as their home – and therefore a new elite of students with Turkish migration background is evolving. Tepecik speaks of special skills like intercultural skills, knowledge and reflection of different value systems and in particular she emphasizes the advantage of multilingualism (Tepecik, 2010).

A question of substance is the reason for under-representation of students with migration background and the conditions that must be provided for students with a migration background for being successful. Paul Mecheril and Inci Dirim think that a central difference concerning students with and without migration background is not due to ethnic and cultural origin, but to education and class (Dirim & Mecheril, 2010). Universities are invited to question their function as a place of exclusion and discrimination of students with migration background (Discher & Plößer, 2010).

Students with Turkish migration background from the first and the second generation at the Medical University of Innsbruck are the focus of our research, since most studies do not differentiate between students with and without migration background, experiencing discrimination and mistreatment (Fnais et al., 2014; Fried, Vermillion, Parker, & Uijtdehaage, 2012; Gágyor et al., 2012; Larsson, Hensing, & Allebeck, 2003; Rautio, Sunnari, Nuutinen, & Laitala, 2005) Also the student survey of the Federal Ministry of Science, Research and Economy of Austria does not differentiate between students with and without migration background, if they are Austrian citizens. Therefore no specific information can be given on how many students of the Medical University of Innsbruck have Turkish migration background (Bundesministerium für Wissenschaft, 2015).

## **Method**

The study aimed at a better understanding of medical students with Turkish migration background at the Medical University of Innsbruck. The main focuses of attention were positive and negative experiences in the tertiary sector, more specifically in the medical study programme. The guideline-based focus groups

approached the experiences with migration background in general, the wish to study medicine and the medical study programme with migration background.

#### *Setting and participants*

Focus groups of students with Turkish migration background at the Medical University of Innsbruck were conducted. 76% of the participants belong to the second generation of Turkish migrants. The remaining 24% were born in Turkey and immigrated in their childhood to Austria or Germany. The method of focus groups is used and generally accepted in social research, especially when it comes to the analysis of complex settings and if orientations strongly develop in interaction with others (Lamnek, 2010; Scheer, Konrad, Scheel, Ulmer, & Hohlt, 2012). A total of 21 medical students, 12 women and 9 men, completed a socio-demographic questionnaire and voluntarily participated in two appointments that lasted for two hours. The focus groups were separated by gender and the recruitment of the participants was performed by public notice in lectures.

#### *Data analysis*

The results of the focus groups with medical students were compiled in the database MAXQDA and the qualitative data was analysed with Grounded Theory, according to Strauss and Corbin (1990). Grounded Theory is not just a technical analysis method that can be used in focus groups and interviews, but also a style of research. The main focus of Strauss and Corbin was a vital relationship between empiricism and theory. Grounded Theory is a methodology which investigated and reflected the social reality (Strauss & Corbin, 1990).

### **Results**

The results of the socio-demographic questionnaire were charted in table 1.

Table 1: Socio-demographic questionnaire from medical students with a Turkish migration background (first and second generation).

	Women with Turkish background	Men with Turkish background
N	12	9
Age (mean)	22.1 ( <i>SD</i> 3.1)	21.4 ( <i>SD</i> 2.5)
Born in Austria or Germany	75%	77.8%

#### **The advantages during the medical study programme related to the migration background**

All participants mentioned several positive experiences during medical studies. The medical students with Turkish migration background seem to benefit from their family support; generally, the social environment was reported to be very supportive. The female and the male focus groups reported that they were not only financially supported, but also emotionally, e.g. by encouragement during the whole study. Some of the participants reported that during the exam period their mothers supported them in a practical way, like cooking, doing the laundry, etc., for them, even though some families were living in a different city.

In addition, another advantage for students with Turkish migration background is the ability of speaking Turkish. Through their multilingualism, they are able to assist in communication with the large Turkish patient group during internships.

### **Gender differences**

The participants of the male focus group reported that Turkish families, especially their fathers, often exerted pressure in terms of applying to medical school. Some of the male medical students said that their fathers only accepted law, economics or medicine studies and that since their childhood they had been driven into the medicine rail. One male participant reported that his family had always considered him to be a doctor, long time before he began to study medicine. Also the female counterparts reported that studying medicine was very prestigious in families with Turkish migration background. But the female participants were not pressured concerning the choice of the branch of study the same way as the male medical students were.

The female and male focus groups made positive and negative experiences in elementary school during their educational career. All participants reported that they experienced discrimination because of their appearance, language, name and religion. They thought all of these conditions were related to their migration background. Women and men experienced discrimination during their school education, e.g. from classmates and also from teachers. One participant reported that elementary school teachers did not support him in his wish to transfer to a secondary academic school. However, some also reported positive experiences in their school career, in terms of teachers supporting them. The participants reporting negative experiences in school, tried to compensate them e.g. by studying harder than people without migration background or having a peer-group for emotional and practical support. But when they started to study medicine, the male participants reported that these disadvantages mostly disappeared. By way of contrast, the female counterpart experienced an increase in discrimination, mainly focused on their traditional clothing, especially on their headscarf.

Another important gender difference is the relationship among the medical students with migration background. The male participants reported that they are linked, like in a buddy-system or network-system. Male students reported that seniors would help beginners finding friends, studying for exams together, supporting them during their studies in various forms and attending Friday prayers together. The seniors were the leaders and the beginners looking up to them. The female group reported existing friendships, but to a lesser extent than the male group.

### **Discussion**

The results do not only show disadvantages but also some particular advantages and opportunities for Turkish migrants of the first and second generation in medical study programmes. The principal advantage is that students with migration background are capable of speaking several languages. In our opinion, medical students with Turkish migration background are more open towards a multicultural

society, because they are familiar with several cultures (Farrokhzad, 2007; Tepecik, 2010).

The pressure exerted by families, especially by fathers, to which the students are often exposed, mainly depends on the fact that the parents did not have the opportunity to study, since many of them have not even graduated from school (Farrokhzad, 2007). To our knowledge, the parents of the medical students want a better life for their children than they lead themselves. The exerted pressure mainly affects male medical students with migration background. The role of the father is the most important factor regarding the pressure, because the male medical participants often referred the conversation to their father. However, for the female participants the exerted pressure was less evident and the paternal agreement did not play such a major role. Probably the phenomenon of the importance of the study which women and men choose depends on the partially patriarchal Turkish culture (Lutz, 1992; Scheibelhofer, 2008).

Another gender difference we have seen during the focus groups was the intensity of bonds among the male medical students. Only the male medical students have this cross-linkage, they help each other. Among the female focus group such a connection is lacking. During the discussion it was evident that all male medical students knew each other, while in the female group most of the students did not. Also the cross-linkage between female and male medical students with Turkish migration background is virtually absent. The question arises if women with Turkish migration background are socialized in their culture that they connect less than men with Turkish background. In the Turkish culture it is more important for men to have friendships beyond the family circle; however, women make friends mainly in the family circle (Fedtke-Ribeiro & Steinbrugger, 2006).

Most of the existing literature does not differentiate between women and men in the marginalisation of migrants in the tertiary sector (Farrokhzad, 2007; Firdaus, 2008). In our results the male participants reported that discriminations and disadvantages mostly disappeared at University, but female students with migration background experience an increase in discrimination. The female and the male focus groups experienced a similar discrimination during their school education. Only at university a change can be detected. It can be inferred that male medical students benefit more from their migration background when they begin to study than female ones do. On the one hand the migration background of the male medical students is not so easy to recognize, in terms of their outfit. And on the other hand the male ones are better linked and therefore they can support each other.

To our knowledge there is no similar study in this field targeting experiences of medical students with Turkish migration background. Nevertheless, this study has some limitations. Mostly the recruiting strategy does not ensure that all students from the first and second generation with Turkish migration background in this field were included in the study and that the first and second generation were not separated. This phenomenon can cause a distortion of the results, because the medical students from the first generation can have different experiences than the students from the second generation. It is possible that some experiences of medical students with Turkish background are missing. It also must be considered that the focus groups involving these medical students represent only a small part of the

Turkish migrants and that probably other students with migration background have different experiences; therefore, the results of our study cannot be generalized. However, the aim was to get a glimpse of advantages and disadvantages concerning medical students with Turkish migration background, thus on findings that there is still need to challenge prejudices against students with migration background, especially women; moreover, it is essential to increase diversity in the medical study programmes as well as to ensure a non-discriminatory study environment.

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