ABSTRACT: Within the framework of the investigations developed regarding social inclusion of regional migrants in the Bahia Blanca Municipality (Buenos Aires Province, Argentina), and the gaps detected between a formal and a substantial citizenship. This work pays special attention to the effective access to social rights in the light of the guarantees established by the Migration Law 25.871/2004. Through a qualitative study, “critical issues” concerning the access to rights and services in the public health and education spheres by migrants have been identified. Furthermore, a group of institutional, cultural and social conditions that limit the practical implementation of the citizenship were acknowledged.

Keywords: Regional Migrants; Critical Issues; Social Rights; Bahia Blanca Municipality; Substantial Citizenship.

1. INTRODUCTION

This article aims at analyzing regional migrant’s social insertion in the Bahia Blanca Municipality (Buenos Aires Province, Argentina), focusing on their access to social rights formally recognized in the Migration Law 25.871/2004, in the sphere of health and education.

Regional migrants are those who come from South American countries, that are part of the Argentine Republic historical flows, that arrive to Bahia Blanca from neighbouring countries (Chile, Bolivia, Paraguay) and other countries from the region (Perú, and recently, Venezuela).

The reason of focusing on this migrant group lies in diverse factors, such as their absolute and relative number among the migrants received by the municipality; their impact on the economic structure and the world of work; their status as citizens of countries that are partners of Argentina in the MERCOSUR. In addition, it has been observed that this group suffers from greater unprotected and vulneration of rights in the geographical region under study (CEIPIL., 2011;2013a;2013b; IPPDH., 2014; Nicolao, 2013; Santamarina, 2016).

This work is framed within the debates about the gaps between the access to a formal citizenship and a substantial one for migrants, and the building of the latter as a process that involves different actors and levels of action that intervene in the adjustment or expansion between both dimensions.

This work is sustained by a qualitative analysis, and the use of strategies of interactive and non-interactive data collection (Reyes and Hernández, 2008), considering previous scientific contributions on this topic. Among the first, semi-structured interviews have been done to key informants: migrants’ members or leaders of ethnic organizations, models of civil society organizations, and models of public entities that mediate or intervene in the access to social rights in the spheres referred.

During the months of October 2017 and May 2018, 60 interviews were conducted, combining open questions focused on the identification of “critical issues” departing from the discursive narrative (Guber, 2006). The first interviews were aim to achieve a spontaneous approach to the experiences and the forms of incorporation, of individuals or families, of migrants to the different spheres of local community. The second set of interviews reinforced problematic areas emerged in the first interviews, and asked for an assessment specifically directed to the access to health and education services.

Non-interactive strategies included data analysis of technical reports and diverse regulatory briefs that express the migration policy.

As a qualitative study, analysis results are not of a biased nature. It differs from others of demographic and statistical content or from those that address migrant’s social insertion from macro-explicative perspectives (Varela, 2005). The contribution lies in the wealth and complement it offers to this kind of research; studies that consider the voice of the actors involved, directly or indirectly, in the predicament analyzed.
The selection of the period analyzed (2010-2018), matches directly in the starting point, with the regulation of the migration law, issued in 2010, which provided the institutional guidelines and actors responsible for implementing its provisions.

2. THE IMPORTANCE OF ATTENDING LOCAL INSTANCES WHEN ANALYZING MIGRANT POPULATION EFFECTIVE ACCESS TO SOCIAL RIGHTS

According to a recent report from the MERCOSUR Public Policies of Human Rights Institute, challenges regarding migrants social inclusion and the implementation of policies oriented to guarantee their rights in different fields in the reception countries, force to redirect the analysis towards the cities and metropolitan areas even more (IPPDH., 2017).

From this perspective, it is understood that the bond between migration and cities currently denotes great importance in the design and implementation of migration policies from the human rights approach. Cities constitute a privileged place for the study of the dynamics and results of the diverse ways of social insertion, focusing on the ways that migrants work, live, create local habitats and accede or not to their rights in urban areas. In this sense, it is a fact that local areas lie at the heart of the complex relations between globalization, regional integration processes and public policies (IPPDH., 2017).

Camos (2017) Emphasizes that; even it is true that international migration flows have a global dimension, they are defined at the local sphere. On the one hand, an individual or a family’s migration project, who initiate the journey departing from a concrete city to arrive to another, also placed at an exact location in the map. On the other hand, where the “migration act” materializes in itself, since not only the city of departure but also the city that receives international migrants, experiences a significant transformation, adopting different ways, intensities and roles.

The local impact in the receiving city varies depending on the number of migrants that arrive or the accumulated stock; its proportion over the total resident population; the origin of the migration flows; the temporal, circular or permanent nature of the migration projects; the receptor tradition of the city: local segments of the labor market where they are admitted; the coexistence in neighborhoods, schools, hospitals, first-aid rooms; and the cultural expressions that transform practices and habits from the local community (Garcés, 2014; Stefoni, 2009; 2011; Thayer and Durán, 2015).

Additionally, at the local sphere, it is the Municipality, the closest administration to citizenship, and, even though it generally lacks regulation tools, enough power and necessary resources, it is the entity that needs to solve demands from the migrant population at different fields of social insertion. Here, the local State importance has two senses: first, as a direct agent in the management of acknowledging migrants as legal subjects; and second, as the actor that transfers to the superior levels of the State, the elements of conflict in the incorporation of migrants into the receptor community (Belil, 2017; Camos, 2017; Thayer and Durán, 2015). For all these reasons, it is assumed that the problem of effective recognition of rights occurs, to a large extent, in local areas.

Nevertheless, the identification of “critical issues” in the access of regional migrants to public education and public health in Bahía Blanca, centers this work in the analysis and discussions around a formal and a substantial citizenship, and the emerging elements from the necessary adjustment between both dimensions.

This paper is not aimed at defining citizenship in a static and conventional way, which considers migrant population as an excluded component, and understands “foreigners” as objects of a legal condition, external to the community. On the contrary, citizenship is understood as a process of building a subject of law that involves everyone who participates in a way or another in a nation, including different building agents (Pereyra, 2005). Following this path, it is a step forward in the acknowledgment of:

“Formal aspects of citizenship are not enough to ensure effective equity and equal access to social rights... does not guarantee equal access to social welfare, to active political participation and freedom. Substantial citizenship refers to effective equity and equal access to social goods, that each individual in a socio-political community is a subject of law” (2005, p. 62).

The substantial citizenship building process involves the intervention of different agents and levels of action. On the one hand, the definition of regulations and policies that allows inclusion and exclusion of migrants to certain social rights and benefits. The State takes the leading role in these regulations, even though, they tend to reflect socially constructed ideas regarding the place that migrants have in the
country’s project (Mármora, 2002). Migration policy - as well as the whole legal framework that defines migrant rights in the different areas of social participation-, constitutes a central element to ensure full citizenship; since several organizations focus efforts in these modifications. In addition, they generate a reference framework to make possible the actual complaints, when rights are not fulfilled - demanding criteria (Pereyra, 2005).

However, this level of analysis is not enough, since, as Mármora (2002), advance regulation frameworks may exist in terms of rights recognition, either social, political or civil, that coexist with excess of the public force at the moment of its application. These situations may be linked to unclear administrative practices by state agents, even the most extreme manifestations of discrimination, just because of their “suspicious faces”. In other words, there are formal and informal mechanisms that facilitate or obstruct migrant’s access to social goods. Besides, state institutions play a significant part by legitimizing or not those rights, by applying or ignoring certain regulations (Pereyra, 2005).

2. STATE, POLITICS AND LEGISLATION ON MIGRATION. SOCIAL RIGHTS WITHIN THE FRAMEWORK OF THE MIGRATION LAW 25.871

Migration policies are a group of regulations, laws and state instruments destined to regulate migrant’s successive access to different spheres of the host society, and, as a natural consequence, their gradual recognition as subjects of rights (López, 2005). Migrants rely on three fundamental dimensions: the control and regulation sphere, that determines the conditions of entry and residency of migrants into the national territory; the integration sphere, that comprises strategies for the socio-economic and cultural incorporation to the receiving society (including their access to social rights); and the nationality sphere, that determines the ways of migrants incorporation to the political community of the recipient country (Arango, 2000; López, 2005). Although this article deals with the second sphere mentioned, the starting point is assuming that the first sphere affects and goes through the second inevitably (CEIPIL., 2011).

In Argentina, the migration policy is explicitly developed in constitutional rules, laws, decrees and administrative resolutions, international and regional treaties among other devices. This country is part of the most important international instruments that form the universal and inter-American system of human rights; a large part of them has constitutional hierarchy. Argentina has also confirmed International Convention on the Protection of the Rights of All Migrant Workers and Members of Their Families, and in the MERCOSUR sphere, it was the first country confirming the Residence Agreement for the Member and Associated States, that besides simplifying processes of access to residency among the member countries, determined the recognition of equality in terms of human rights and social, cultural and economic freedom among natives and migrants that have obtained the residency in the recipient country.

This agreement establishes that it will be applied without prejudice of intern regulations or dispositions of each Member State “that are more favorable to migrants” and, for this reason, special emphasis is given to the migrant regulation in force.

The migration law Nº25.871/2004 enact, a reference in the South American region, has its origin in a wide and extensive struggle of different social organizations which claimed the abolition of a regulation that came into force during the last de facto government (1976-1983), that violates migrants human rights (Badaro, 2006; Correa, 2004; Nicolao, 2014). This regulation starts by recognizing migration as a fundamental and inalienable right of a person, that must be guaranteed on the basis of equal treatment (FIDH., 2011), and moves forward by formally recognizing a large index of guarantees specified in the following paragraphs.

Within the field of “control and regulation”, it innovates by incorporating the “temporary residence due to nationality” category (Art. 23, inciso “l”), which states that migrants from Member and Associated countries to the MERCOSUR, have the right to a two years residency, extendable with multiple entrance and departures permissions, on the ground of being citizens of countries that share an integration project with Argentina.

This innovation has a direct impact on the population under study, since, different from worker migrants from other origins, they are exempt from certifying employment contracts that indicate dependency ratios.

Secondly, article 9 of the law states that migrants and their families have “the right of receiving information” (and forces the State to provide it) about their rights, and obligations in the recipient society (a); the requisites for their admission, permanence and departure of the country (b); and every other information that allow them to fulfill administrative or other forms in Argentina (c). In
Addition, the Migration National Directorate (DMN, by its Spanish initials), the authority of application of the law, must adopt every measure that consider appropriate to disseminate the information mentioned and assure that it is spread by employers, unions, or other entities or institutions, for free, and, as far as possible, in an understandable language.

This aspect reveals itself as essential for the achievement of an effective equality of treatment, since lack of information, on occasions worsens by a language barrier, usually becomes an obstacle for the practical exercise of social rights.

In the integration sphere, there are three articles of the law that become essential to understand the coverage of migrant’s social rights. Article 6° states that:

Every State jurisdiction will ensure equal access of migrants and their families to the same conditions of protection, refugee and rights as any other native, particularly regarding social services, public goods, health, education, justice, work, employment and social security.

In the specific field of education, article 7° stipulates:

Under no circumstances the status of irregular migrant will prevent his/her admission as a student in a educational facility, public or private; national, provincial or municipal; primary, secondary, tertiary or universitary… (Art. 7°)

In the same direction, according to article 8°:

Under no circumstances will be denied or restricted the access to the right of health, social assistance or medical attention to every foreigner who requires them, whatever his/her migration status...

In addition, it is mandatory that authorities of educational and health establishments provide guidance and advice in order to compensate the irregular migration status of migrants that contact every institution (arts.7 and 8)

There is another group of dispositions that complement the articles, as the article 13 which defines as discriminatory every act or omission because of ethnia, nationality (among others), that arbitrarily impede, obstruct or restrict the full exercise of fundamental rights and guarantees recognized, on the basis of equality. Furthermore, article 14, which holds the State responsible “in all jurisdictions” (national, provincial, municipal), in the development of initiatives aimed at “the integration of foreigners” in their residence community; providing Spanish language teaching courses at school (a); the spread of useful information for the adequate insertion of foreigners to the argentine society (b); the knowledge and appreciation of their cultural, recreational, social, economic and religious expressions (c), and the creation of training courses, inspired by coexistence criteria in a multicultural society, and training courses for the prevention of discriminatory behavior for civil servants (d).

Reflecting on the local contexts, it is clear that these articles recognize the need of participation of the different levels of the State. However, the distribution of responsibilities and competences that hold the municipalities is not well defined. From the operational point of view, the regulation of this rule (Decree n 616/2010), does not solve such limitation: it establishes that the National State, through the National Direction of Migration, must work “in collaboration” with other areas of government (articles 6, 7,8,14) but it does not specify any kind of modality or instrument to make a reality the articulation demanded.

Nonetheless, the country has a migration policy that offers a framework of guarantees regarding social rights for migrants, which should be contrasted to the functioning of the actual institutions in different spheres. Hereafter, the local scenario and the characteristics of the migrant population under study will be described.

3. CHARACTERISTICS AND MIGRATION PROFILE OF BAHÍA BLANCA MUNICIPALITY

Buenos Aires Province has been the most attractive destination for international migrants that historically arrived in Argentina; and currently accommodates 52% of the migrant population in the country [(INDEC., 2010) (National Institute of Census and Statistic of Argentina)]. In the southwest of the region known as the “Interior Bonaerense”, the provinces hinterland, there is Bahia Blanca Municipality, formed by the city of Bahia Blanca, head of the municipality, and the cities of Ingeniero White, General Daniel Cerri and Cabildo.

Bahia Blanca is the third most important judicial district in this region, due to its demographic size, with a population that reaches 301,572 people. Historical recipient of international migration flows, migrant population reaches 13,502 people, according to the last census, which represents 4,5% of the total inhabitants, 79 % coming from South American countries (INDEC., 2010).
Chilean community is the one with the largest number in the group, equivalent to the 85 % of the regional group, and 65 % of the total number; (INDEC., 2010).

Regional migration is a notably labour one, formed by people that move to get access to a job, to better wage conditions and more possibilities of social mobility. In the migrants discourse, not only job opportunities have a central place in the migration decision, but also the free access to the public health and educational systems. In addition, education represents an instrument for social mobility that becomes Argentina’s central attraction element in the Latin American context (Nicolao, 2014).

Regarding their labour integration, far from a homogeneous outlook, there are divergences depending on the country of origin, time of residence in the place of destination, gender or level of instruction. However, underlying all the reasons, outstands their integration to low skilled jobs, with major levels of informality, and lower earning wages than native population (IPPDH., 2014).

Among the most important groups, the migration of Chilean farmers to Bahia Blanca dates back at the mid-20th century. During Pinochet dictatorship (1973-1990), migration reached its highest levels, with a socially diverse movement, which abandoned its seasonal character and rural destination, to move to urban areas. Currently, these groups are working in the service areas (supermarket or shop sellers), doing construction work (builders of different levels of qualification), and in the agricultural sector. These movements present low levels of renovation, resulting in an ageing population that includes return movements (INDEC., 2010; INE - Chile, 2017; Torrecilla, 2014).
Bolivian migration started in the 70’s, when they arrived to the horticultural area in the Río Colorado valley, in Buenos Aires province, then they moved to Bahía Blanca. It was within the framework of a phenomenon that has expanded nowadays to the green belts of different urban centers in the country, known as “Bolivianization of Horticulture”. It is defined by the leading participation of Bolivian families in the production of green vegetables for its fresh consumption, in places where they can climb from salaried to sharecroppers or small holders. Daniel Cerri city concentrates a large part of these groups in the area called “vegetable garden”. Today, it constitutes the migration flow with the highest level of income, with rural and urban destination (the latter, with insertion in the building sector -builders, ceramists, plasterers), (Benencia, 2012; Cirollo, 2007; Kraser and Ockier, 2008; Toranzos, 2014).

The Paraguayan population constitutes a group of more than a half million people, with a similar insertion to the Bolivian community: in vegetable gardens (rural areas) and the construction sector (urban areas). The Peruvian movement has its peak in the 1990’s, and currently shows weak dynamism. It is characterized by its urban insertion, population with the highest relative levels of instruction and a female majority. The Venezuelan, instead, is the most differentiated group, it developed recently and it is experiencing a rapid growth. It is associated to an economic, political and social crisis that undergoes their country of origin. Approximately, it has developed for 4 years in Bahía Blanca, and the population would exceed 300 people, with a better qualification profile than the rest of the immigrants (INDEC., 2010) Claudia, representative from the Venezuelan community, personal communication, March, 24th, 2018).

As general trend, migrant women of regional origin join in the domestic service, in the care system in the broadest sense, and also, in the commercialization of different products in the city -food, clothes, shoes- (Toranzos, 2014).

The characteristics mentioned provide a framework to contextualize and favor the interpretation of the research results.

4. CRITICAL ISSUES IN THE ACCESS TO SOCIAL RIGHTS IN THE SPHERE OF HEALTH AND EDUCATION: ACTORS AND INSTITUTIONS IN THE BUILDING OF A SUBSTANTIVE CITIZENSHIP

This section reports the results of the analysis on the real access conditions to social rights of the regional migrant population in the health and education spheres in Bahia Blanca, by virtue of the current migratory legislation articles 6,8,13 and 14.

In the face of the reduced number of previous investigations on this topic, the most outstanding conflict spots (critical issues) are reconstructed, taking into account the voice of the migrants and those actors that mediate or take part in a direct or indirect, formal or informal way, in the institutions related to these spheres.

In Bahia Blanca, as in any other reception context, social and public institutions play an important role in the possibilities or restrictions that migrants get through during their inclusion in the in the local community life. Therefore, besides the institutional complex that forms the public health or the education systems, it should be emphasized the presence of a local office of the National Migration Directorate (DNM, by its Spanish initials) located in the capital city, as a consequence of the quantitative weight of the migrant population in its jurisdiction area ; the sites of consulates of several countries (Brazil and Chile, among the South Americans); the large group of migrant organizations that function in this territory (more than 50, European and American together); or the Pastoral Care of Migration that has been in the district for 35 years, providing social assistance to the migrant population.

Migrants interact with these institutions at different intensity levels, while their migratory trajectories form into stages with different expectations and needs; and, different relations with the institutional and social surrounding area are developed.

One of the first critical issues that this field work reveals, as a cross-cutting element of the areas analyzed, revolves around the difficulties derived from the access to the legal residency of the recently arrived migrants. Beyond the favourable treatment that the law 25.871 defined for the citizens of MERCOSUR, and the existence of a local office of DNM in Bahia Blanca, the paperwork to obtain the residency still represents one of the first difficulties that migrants have to face in their preliminary reception. This is not an insignificant matter since, as it will be revealed later, problems with “paperwork” come up, condition and limit the possibilities of the substantive exercise of rights in other social spheres, even in spite of the fact that, these must be guaranteed independently of the administrative migrant condition (Articles 7 and 8)
Getting an absence of criminal record certificate, which is only granted by official entities in the countries of origin or in Argentina through the consulates; or obtaining an entry stamp, for those who arrive by unofficial borders, or for who lose it are revealed as central difficulties.

Likewise, there is coincidence among those migrants who do not receive information or state advisory in the process. Even though the DNM bears this specific responsibility (article 9), it is not included as a policy proactively developed by this organism in this territory. Thus, counseling for paperwork, goes through articulation circuits at a local scale, where actors that cover the gap or absence of the State are involved, acting as mediators-apprentices (Pastoral Care of Migration, consulates, migrant organizations):

We work with every immigrant who approaches us. The paperwork is done here, in our administration; for the certification of criminal records, we send them to our office Buenos Aires and there they are assisted with the procedures in their own embassies of Peru, Bolivia, and Venezuela. This certificate is fundamental to obtain the precarious residency that is the first step, and the most complex one. We are in communication with the DNM. When they receive people who asks questions and do not know what to do, they send them here (María, Pastoral Care of Migration, personal communication, November 19th, 2017).

The most common difficulty is the paperwork because most of the people enters illegally or lose the certificates from Bolivia here in Argentina, and they have to deal with a lot of paperwork; so the most traditional demand is certification. As a result, we are the link, we tell them when they have to go to the Migration Office and what do they have to take there. Sometimes, when the Bolivian Consul from Rio Negro, comes here, we meet people who need help with the paperwork. It is a constant demand. (Aldo, a cultural model of the Bolivian Community, personal communication, May 18th, 2018).

As will become clear below, these difficulties affect and moves directly towards the health and education spheres, generating diverse problems.

4.1. Public Health and Health Care Assistance

Among the experiences related to regional migrants access to the public health system, taking as a starting point that the majority in these communities does not have another type of medical coverage besides the one provided by the State (IPPDH., 2014); it is important to briefly describe how the local public health system functions, in consonance with the national system.

Bahía Blanca possess 54 medical units (“First Care Rooms”) in the hole territory, including the ones located in the capital city and in municipal offices, added to a Municipal Hospital “Dr. Leónidas Lucero” and a Regional General Hospital “Dr. José Penna” of provincial management. All of them are free health care institutions.

First Care Rooms are part of the Primary Health Care system (PHC), where essencial healthcare is provided. It constitutes the first contact between the community and the health services. They are formed by interdisciplinary teams of work, and are located in the neighborhoods. Additionally, hospital centers have a 24 hours attention for emergencies, and services in different fields that have outpatient and admission facilities. In order receive medical care in those centers, people need scheduled turns with limited availability, except in case of emergencies. That is an attached characteristic in a swamped system (Jelin, 2007).

One of the first critical issues identified in this sphere is related to the migrant’s lack of knowledge about the steps to follow to utilize the services and resources of the public health system in the local community. Lack of information regarding how the health institution on the preliminary reception centers works and about their guaranteed rights (an essential requirement for its demand), is a process that takes time, and require mediators - people from the same place of origin or alternative institutions- that function as a link with the system:

Many of them do not know that they have the right to health, they get sick and do not go to the hospital; if they do not have money, they think they cannot go to a first care rooms. There was a boy that needed an urgent CT scan and, since his mother did not have the money at that moment, it was not done until she got the necessary resources to pay for the study. We know that they have that right, we intercede for them, but they are not always informed (Alicia, Social Worker from the Health Care Unit, personal communication, November, 10th, 2017)

Migrants with longer time of residency in the county do not face that issue, as in the case with a big proportion of the Chilean interviewed:
The organization of the Chilean community has a long history, most of them have started their families in Argentina, and they have Argentinian children and grandsons, so they have a stronger and well established social protection net. As a result, there would be no greater need for assistance from the consulate or other institutions to accede to different health care facilities in Bahia Blanca. However, there are also people who are in a more unfavorable situation; generally they are recently arrived immigrants, so the counseling is required, when they have social problems, health problems or specific diseases (Chilean Consul in Bahia Blanca, personal communication, February, 9th, 2018).

The second critical issue is related to the limitations of accessibility derived from the level of complexity of the attention required. Migrants experience a high level of access to health care units (that is, the possibility of receiving attention) - but not exempt of difficulties. The bigger issues appear when attention with a major level of complexity is needed (regarding services and resources), in hospital centers:

Regarding the health issue here, at the neighborhood level, the first aid rooms solve the problem more or less. The first aids rooms depend on the Municipality, and they do not have real difficulties. The most serious problems appear when there is a need for a special attending in the Municipal Hospital or in the “Penna”. In the Municipal, when there are problems we have to call the directors, who, sometimes have fulfill our claims and interventions. On other occasions, given the refusal of the directors, we are forced to submit writs of amparo, to get a pacemaker to a Bolivian, for example, or for Paguayan women to be admitted in the hospital…. We are pretty combative in that sense (Elvira, Pastoral Care of Migration, personal communication, November 19th, 2017)

In hospitals, the most obvious limitation are related to specific treatments, such as surgeries, chronic diseases, or in cases that certain medicine or prosthesis are required. There is a difference between the Municipal Hospital and the Regional Hospital “Dr. José Penna”. Since the latter has shown greater accessibility for migrants, historically and currently. This reveals that, on occasions, the level of access for migrant population ends up depending on a personal decision, -and, thus, arbitrary- of the managers in charge of institutions, disregarding the current regulation on migratory policy (Art. 6 y 8/Ley 25.871):

There are no problems in the Hospital Penna. We have problems at the Municipal Hospital, with the new Director (migrants who still do not have the precarious residency, are not helped, even if it is an emergency case), but in the Penna they take care of everyone who has been referred there. In other words, girls who suffer from epilepsy, psychiatric problems, and cases of tuberculosis had been properly solved. (Maria, Pastoral Care of Migration, personal communication, November 19th, 2017).

If we did not have a personal identification (issued in Argentina), we were not received in the Municipal Hospital, but we could go to the Penna Hospital. Recently, we have been told that the Municipal choose to accept us too with precarious, provisional identifications. At least, that is what they told me (Celeste, Peruvian, personal communication, October 24, 2017).

Limitations in the access to medical services in hospital centers are associated to the third critical issue identified, related to the administrative status of the migrant who asks for the service. Generally, it consists in bureaucratic and administrative obstacles (especially linked to the requirement of an identification issued in Argentina, for scheduled procedures, admission, treatment of chronic diseases), that violate the article of the law 25.871.

The fourth critical issue identified is related to the discriminatory practices by health professionals, or migrants’ native pairs in contexts of medical attention. Discrimination based on perceptions strongly rooted in the Argentinian popular consciousness, which consider that migrants take advantage of the social services and public health. It is also believed that the situation that worsens in critical contexts, due to a lack of resources and a saturated system:

Once, I went to a first aid room and a woman told me “the best you can do is go back to your country because you do not receive any help from your embassies, … and you always come here and then tell your pairs that you have been helped and thus Bahia Blanca is full of Bolivian migrants...(Ruben, Bolivian, personal communication, November 22nd, 2017).

(...) in the health sphere, there is a lot of discrimination that, sometimes, acts as a barrier against the population, who do not approach or receive any attention in health centers… In the first aids rooms Bolivian women tend to suffer from discrimination when they their children to the pediatrician, since, sometimes they are mothers of six or more, and as a result they ask for six places, so everyone receives medical attention, and people complaints and insults ( Health Unit nurse, personal communication, January 6th, 2018).

These kinds of comments and practices affect, directly or indirectly, the guarantee of migrants rights in the health sphere. This situation tend to generate distance between the migrant population and the system, and, also, the violation of rights guaranteed in articles 6, 8 and 13. Within this framework, the
group of Bolivian origin emerges as the “other” more differentiated with their own characteristics (language, clothes, traditions) and differentiated physical traits (Jelin, 2007) which turns them into the most vulnerable group.

The fifth critical issue identified is related with the intercultural situations that occur in the context of hospitals, first-aid rooms and medical consultations in general. This topic also affects migrants and the quality of the medical assistance they receive. There is a large number of testimonies about communication difficulties, dissimilar behaviours and practices that affect the assistance (in the case of women, in their ways to give birth, breastfeeding). In addition, different clothes and personal hygiene or feeding patterns make the distance evident, the lack of will to understand and respect towards cultural diversity, and even rejection from the health professionals are among the problems that migrants have to face.

Yet, it cannot be avoided that, from the migrants point of view, who do not detached from the comparative logic between the place of origin and the place of destination, from that “I am divided” as people “separated in two pieces” in time and space between “there” and “here”, the before and after the migratory experience (Varela, 2005), there is still, an appreciation of the public health in the reception context. The low level of questioning the situations of violation of rights is also related to the weak conception of themselves as a group.

4.2. The Education Sphere

In the area of state education, even if it is impossible to talk about migrants educational integration and cover its total magnitude and complexity, there are some repeated elements that emerged from the testimonies of the migrant population, workers of the primary and secondary educational system, that should be contrasted with the migration law in its articles 6, 7, 13 and 14.

In Argentina, education in state institutions is free in its initial, primary secondary and tertiary levels, and also at the university level. Since 2014, compulsory education extends from 4 years old until the ending of the secondary level. In Buenos Aires province, the Education Law N°13.688 establishes in its article 5 that the State should provide and guarantee a comprehensive education, inclusive, permanent and good quality for every inhabitant, guaranteeing equality, free of charge and social justice in the exercise of this right.

On the one hand, Intercultural education is conceived as the responsible for impulsing an intercultural pedagogic perspective in the articulation with regular education, complementing and enriching it. Are included among its functions: to guarantee “the migrant communities to receive an intercultural or bilingual education, that help to preserve, reinforce and recreate their cultural standards, their languages, worldviews, traditions and ethnic identities” (Chapter XIII, section “f”).

The field work allows the detection of different critical issues that are related with ine arrival, permanence and incorporation of migrant students to the educational system in Bahia Blanca. The first critical issue, as in the health sphere, is associated to the limitations of the irregular migrant condition or the lack of identification. Even though there are no proofs that the inscription is banned due to an irregular situation, there are other kind of inconvenient that obstacle or delay this process. There are no mechanisms or clear guidelines about the certification of preliminary studies in their countries of origin and their curricular equivalences in the Argentinian system, or for the regularization of their legal situation to get the degree, once they have finished:

The admission of my younger daughter to school was complicated at the beginning because we did not bring the documents from the primary school there, it was a big mistake, well, that cost a lot of money...and she had to repeat the school year because she should have been started a year ago to go to the secondary school. Here she had to retake 6th year. (Ana, Peruvian, personal communication, March 13, 2018).

The biggest problem is of bureaucratic nature, regarding the certification of the level of studies reached in their country and the academic equivalence of degrees here. The process to follow is long until the starting year is decided, and in the meanwhile the potential student is out of school. (Primary school Headmaster, personal communication, February 11th, 2018).

Linked to that issue, people who work at schools show a generalized lack of information about the migration law. As a result, there is lack of legitimacy of migrants as a subject of law, and there is breach of duty from the school institutions of providing guidance with the paperwork to the families who require it (article 7). In certain cases, this duty falls on isolated good will on the part of people who help the families, with scarce institutional tools. As a result, generally, migrant families are left alone in this process:
(...) the Headmaster told us that we have to do the residency paperwork but she never explained more than that… since we did not have the money, and we did not know how to do it, we postponed it...and we lose a lot of time before Pedro started school. (Teresa, Chilean, personal communication, November 11th, 2017).

The second critical issue, with a wide register of testimonies that coincide, is linked to a problem that goes beyond the students’ migrant status or administrative situation, and is associated to wider social issues, such as child labour, that could cause the non-attendance of school of children from migrant communities:

(...) there is a significant number of inhabitants of neighboring countries who do not attend school. I have observed and recorded by professional visits to construction sites, brick kilns, vegetable gardens, where the children are working. (Secondary school’s social worker, personal communication, March 5th, 2018).

This type of difficulties associated to the inclusion of children into the family's work system, also contributes for dropout. A study performed by (Kraser and Ockier, 2008) shows that in Daniel Cerri city, the Bolivian group works in the fruit and vegetable productive circuit, where children are a component of the family’s labour; and when their presence is required for agricultural labour, parents do not send them to school, generating negative consequences in their school trajectory.

The third critical issue identified is the most complex one. It is related to the absence of tools and strategies for approaching interculturality and the prevention of discriminatory behaviours in the school sphere (Thayer and Durán, 2015) that allow to prepare the ground for their insertion in the education system.

Specifically, from the perspective of different members of the educational community (teachers, members of the School Counseling Team, migrant families), the challenges that the migrant population goes through can be classified into four issues groups: “integration with their peers” (1), “learning problems” (2), “communication problems” (3), and “discrimination due to their migrant status or national or ethnic origin”(4). Those central concepts are affected and influenced mutually. Sometimes, these are not limited to the educational sphere, since they are a consequence of more complex situations that involve social aspects of different scale and magnitude.

Regarding “integration” difficulties (1), teachers argue that:

(...) distances are shown in the interpersonal relations between peers, by means of nicknames, underestimation, isolation, close groups, expressions with discriminatory content and, sometimes, violence among peers (Secondary school teacher, personal communication, December 9th, 2017).

In this sense, practices of exclusion of migrant students at the moment of groups’ formation for team work inside the classrooms or for recreation have been identified. Besides, discriminatory speeches, and physical violence are also observed.

“Learning problems” (2) are associated to causes such as absence, differences between the training received in their countries of origin and destination, and “language barriers” that affect the learning process in general, and the acquisition of reading and writing skills in particular, in the first stage of the primary education:

The request for intervention is due to learning problems. The cultural clash, mostly against Bolivian migrants is clearly noticed. Paraguayan people speak Guarani at their homes, and they learn faster our language (due to the t.v. and other media), but regarding the acquisition of reading and writing skills the difference with the rest of the students is noticeable (Education Counselor, Primary School, personal communication, November 12th, 2017).

“Communication” issues (3) have to do with the fact that many migrant students enter the country only speaking their mother tongue (Quechua or Guarani), which affects their communication with teachers peers, and the learning process itself. Besides, there is a lack understanding of certain communication codes in the school sphere that go beyond idiomatic problems.

Regarding “discriminatory situations” (4), mostly appear in oral discourse. They refer to the migrant students using their nationalities in a pejorative way “Peruvian go back to your country”, “Bolivian”, “Paraguayan”, “Go away, shitty Bolivian”, is frequent expressions narrated by the school workers used by their native peers.

Once again, those expressions are based on deeply rooted views in the Argentine society regarding the population of these origins. Besides, those opinions are nurtured by myths and prejudices such as “the silent invasion of the neighboring countries”, “migrants steal Argentinian jobs”, “migrants collapse social services”, “migrants come to Argentina to commit crimes”. Among the regional group, discrimination specially affects the Bolivian school population, and to a small extend, Paraguayan and Peruvian population. Discrimination is practiced by their peers in the classrooms, and, in some isolated
circumstances, is underlying the teachers speeches who do not completely accept diversity. Sometimes, it does not only affect students, but it also reaches their families.

Having said that, such ideas, source of prejudices and xenophobia, can only be knocked down from the educational sphere, the only system capable of accomplishing a cultural change due to the training of new generations. However, for that purpose, there is a need of teachers trained in inclusive ideas and values, who are able to carry out the Provincial Education law and the migration law, as tools to approach interculturality, transcending the discourse.

The groups of situations described, that are influenced and come up each other, demand the systematic intervention of the educational institution. The entity responsible for embracing cultural differences, bridge the gaps, and develop coexistence strategies, that knock out all forms of discrimination that question the presence of migrants and their families in the education as well as in different social spheres.

Thus, not only the lack of knowledge on the migration law in the educational sphere affects the compliance of articles 7 and 14 section b; but also, other dispositions that favor the integration of the migrant population to their community of residence are far from being applied at the local context. There are no Spanish teaching classes at schools (article 14, section a), areas to promote migrants’ cultural expressions (section c), or training courses inspired in the coexistence in a multicultural society and the prevention of discriminatory behavior (article 14, section d).

However, again, as with the public health sphere, education at its different levels and modalities, and its free nature, is highly valued by the migrant population, especially by those who were able to reach upward mobility.

5. CONCLUSIONS

The main critical issues in the social insertion of regional migrants in Bahia Blanca have been identify in this work; focusing in their effective access to social rights in the health and education spheres, under the assumption that local contexts provide a favorable scenario to generate qualitative information that enriches macro-expllicative studies of the phenomenon.

This paper moves forward in the acknowledgement of issues that affect different actors, institutions and levels of action, as agents for the building of a substantive citizenship for the migrant population, where the State carries the most important but not exclusive role.

From the point of view of the formal recognition of rights through the development of regulations (nominal citizenship), a framework that provides guarantees with its center in the law 25.871 can be acknowledged. The recognition of the right to health and education in all its levels is defined independently to the migratory condition (regular or irregular) of the migrant subject. In addition, other central guarantees can be added, such as treatment equality, the right of receiving information, the right not to be discriminated by their national/ethnic origin, and the State responsibilities in the development of strategies aimed at the integration of migrants in their residence community (articles. 6, 7, 8,9,13 and 14).

Furthermore, the lack of specific responsibilities that this regulation grants to the Municipalities in mechanisms for the effective recognition of rights is evident, which leave them as passive actors before the definitions of the national government.

The critical issues revealed point to the existence of formal and informal mechanisms that obstruct, delay and make problematic its practical exercise. As a result, there is a weak legitimacy of the migrant population as legal subjects which makes the refuted migrants presence derive in discriminatory practices and attitudes that, latent or manifest, are oriented to their exclusion.

It becomes apparent that social institutions play an important role undermining rights or ignoring regulations. The migration status of the migrant still represents a barrier for the access to the health system (especially in hospital facilities), or for a rapid and full incorporation to the educational system. The lack of information on migrant’s rights and obligations, regarding their access to residency paperwork, or the way the sanitary institution works, result in distance, exclusion and weak mechanisms of demand. Discriminatory speeches and practices, individual or institutional, based on myths and prejudice about the impact of regional migration in the city of destination, worsen the scenario.

The migration status and the time of residency in the place of destination are still major factors in the process of building a substantive citizenship. The established migrant groups that have been in the destination place for a long time and have legal residency tend to rely on a safety net and social capital that facilitates, in different ways, the exercise of their rights. On the contrary, those who have recently arrived, in a more vulnerable situation, have a weak conception of themselves as legal subjects. Some of them count with the protection of a group of institutions that based on the current regulations define
pressure mechanisms for achieving their demands (Pastoral Care of Migration, consulates, migrant organizations).

Thus, the adjustment between a citizenship in regulation terms and a citizenship in substantive terms does not consist in an extension of their rights but in the improvement of this group of institutional, cultural and social conditions, that limit the practical realization of the citizenship.

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