Refuge: Transforming a Broken Refugee System
Alexander Betts and Paul Collier
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A NEW APPROACH TO REFUGEES

It is not immediately obvious, from a stroll through the bustling Armenian neighbourhood in Beirut, that many inhabitants arrived destitute just over three generations ago, fleeing pogroms in the death throes of the Ottoman empire. The incomers were able to work, facilitating their integration in the host country. Against the odds, the refugees prospered, and today form one of the bastions of richly-diverse Lebanese society.

Here, then, is the central tenet of this timely and highly-informative book: in order to thrive, refugees fleeing violence must be given the opportunity to engage with host societies through work. Conversely, the indefinite encampment of refugees in remote border areas with few facilities or prospects is deeply injurious, yet this has been the default model since the 1951 Refugee Convention and the UN Refugee Agency were conceived following Europe’s failure to protect those fleeing persecution in the 1930s. While the camps are often needed for emergency humanitarian rescue, they are ill-suited to long-term resettlement.

In contrast to economic migrants, most of the world’s 21 million refugees are fleeing mass violence in fragile states. The authors persuasively argue that, by restricting the response to the immediate humanitarian needs and by not expanding it to development and rehabilitation, the wealthier countries and international agencies have failed to meet the challenges posed. The consequences to the refugees are painfully familiar: dependence on aid, high-risk migration strategies, radicalisation of the young, destitution in urban environments, a drainage of talent. The progressively unfolding tragedy of the Syrian refugees stands out as the epitome in this regard, but there are numerous other noteworthy case studies, such as the notorious Dadaab camp in Northern Kenya, housing mostly Somalis. But the wider consequences are political as the wealthier countries struggle to fend off rising anxieties about mass immigration, fuelled by an upsurge in populist nationalism across Europe. This, according to the authors, is the result of a failure of ‘head’ as well as ‘heart’.

Pointing to successes in Uganda and Central America, the authors urge a paradigm shift in policy to bring about a transformation of the perception of refugees from burden to potential asset. The solutions, they argue, lie in international multilateral collaborations to bring business and industry to the proximate havens (such as Jordan and Lebanon, or Kenya), benefiting both the refugees and the host countries, and improving the prospects of eventual post-conflict reconstruction by maintaining education and skills. While the neighbouring countries provide safety, the wealthier countries and international organisations provide funds and business expertise, with, if there is little prospect of return, safe passage onwards for some, so preventing needless descent into further chaos: a ‘win-win-win’. From our perspective as doctors working on the frontline of refugee health, this radical approach makes sense for at least three reasons: first, generating income would increase stability and help prevent the thousands of deaths linked to perilous journeys at the hands of traffickers to Europe; second, formally enabling refugee health workers to exercise their professions would enhance healthcare in their communities; third, it would allow these communities to take governance of their health needs, thereby avoiding dependence on external aid agencies.

This illuminating book should inform the public, governments, and international organisations, prompting both a wider recognition of shared obligations to refugees and an effective strategy for their reintegration. Let us hope the lessons are heeded.

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