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1 **International Migration by Rural Professionals:**

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9 **Professional subjectivity, disease ecology and veterinary migration from**  
10 **the United Kingdom to New Zealand.**

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1 **Abstract**

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This paper analyses international rural migration by highly skilled professionals. Focusing on the migration of veterinary surgeons from the United Kingdom to New Zealand, migration is conceptualised as a response to disruptions to narratives of professional subjectivity that are set within a ‘disease ecology’ – the inter-woven social, economic, biological, environmental and institutional relations that shape the practice of animal disease management. Drawing on biographical interviews with 50 migrant vets, the paper outlines five narratives of migration that capture the relationships between the personal, professional and biological and inform vets’ decisions to migrate and remain in New Zealand. Firstly, the ‘first job’ narrative highlights the tensions between becoming a vet and the challenges of being a vet. Secondly, the narrative of the ‘anti-vet’ describes the rejection of dominant veterinary subjectivities and the search for alternatives. Thirdly, the narrative of ‘poverty farming’ describes the effects of incremental changes and disruptions to farming and veterinary identities. Fourthly, rationalisations of accidental migration are linked to historically embedded veterinary subjectivities. Finally, a narrative of recovery and therapy links traditional forms of country living and animal welfare in New Zealand to ontologically secure veterinary subjectivities. In conclusion, the paper calls for further research on the international rural migration of highly skilled professionals.

**Keywords:**

Skilled migration; Professional subjectivity; Rural; New Zealand; Veterinary; Disease Ecology.

## 1 Introduction

2  
3 Writing about the impact of British colonialism on the New Zealand (NZ)  
4 environment, [Brooking and Pawson \(2011\)](#) describe the circulations of experts  
5 and expertise that led to the creation of its now taken for granted pastoral  
6 agricultural landscape. The circulation of experts and expertise between  
7 centres of agricultural knowledge in the United Kingdom (UK) and NZ  
8 contributed to the development of specific varieties of grass seed and sheep  
9 breeds, remaking the landscape. Missing from these accounts, however, is the  
10 role of the British veterinary profession. This omission is surprising, not least  
11 because of its role in assisting colonial expansion in NZ ([Nightingale, 1992](#)) and  
12 elsewhere ([Mishra, 2011](#)). Moreover, these patterns of circulating veterinary  
13 expertise continue today: NZ is a recognized world leader in animal disease  
14 control, exporting its techniques and veterinary practices, and continuing to  
15 attract British veterinarians despite fading colonial ties.

16  
17 The aim of this paper is to examine the contemporary international migration of  
18 veterinary experts from the UK to New Zealand. There is, of course, a rich  
19 history of academic study of the causes of rural migration, reflecting economic  
20 and people-led motivations, and the differences between structural causes and  
21 migrants' own agency ([Halfacree, 2008](#); [Woods, 2016](#)). Despite calls for a  
22 greater focus on international migration as a means to 'disrupt conventional  
23 conceptualisations' of rural migration ([Smith, 2007: 279](#)), much of this literature  
24 is focused on migration between European countries ([but see Preibisch, 2010](#)).  
25 Studies have therefore focused on low-skilled agricultural labour ([Lever and](#)  
26 [Milbourne, 2015](#); [Sporton, 2013](#); [Hoggart and Mendoza, 1999](#)), retirement  
27 migration ([Buller and Hoggart, 1994](#)) or return migration ([Ní Laoire, 2007](#)).  
28 Whilst a parallel literature on the geography and mobility of science ([Mahroum,](#)  
29 [2000](#); [Powell, 2007](#)), students ([Findlay et al., 2016](#); [Findlay et al., 2012](#)), experts  
30 and expertise ([Larner and Laurie, 2010](#)), and global professions ([Beaverstock,](#)  
31 [1996](#); [Faulconbridge et al., 2009](#)) exists, this has not permeated discussions of  
32 rural migration or professions such as the veterinary profession.

33  
34 Combining studies of professional subjectivity ([Thomson and Jones, 2016](#)) and  
35 rural migration ([Stockdale and Catney, 2014](#)), this paper identifies the reasons  
36 for international veterinary migration. The paper argues for a conceptualization  
37 of international veterinary migration as a response to disruptions to narratives  
38 of professional subjectivity that are set within a 'disease ecology' – the inter-  
39 woven social, economic, biological, environmental and institutional relations  
40 that shape the practice of animal disease management. The paper identifies  
41 three related aspects of disease ecology that contributes to veterinary  
42 migration: veterinary subjectivity and identity anxiety, disease transmission and  
43 the professional lifecycle. In tracing the biographies of veterinary surgeons  
44 (hereafter vets) that have moved from the UK to NZ, the paper shows how their  
45 decisions to move are framed by the relationships between veterinary  
46 subjectivities and ideas of what counts as appropriate veterinary work;  
47 circulations of disease; and personal and family circumstances.

48  
49 To do this, the paper draws on in-depth biographical interviews with UK vets  
50 working in NZ. It begins by reviewing the literature on international migration

1 and professional subjectivity, linking them to the concept of disease ecology.  
2 Secondly, the paper outlines the methodological approach adopted. Thirdly, the  
3 paper describes narratives of moving to and staying in New Zealand, showing  
4 how different elements of the disease ecology contribute to international  
5 migration.

## 8 **International Migration to Rural Areas**

10 [Halfacree \(2008: 486\)](#) argues that migration to European rural areas has  
11 'largely been seen as an 'internal migration' phenomenon' dominated by  
12 studies of lifestyle-led voluntary movements of middle-class groups to rural  
13 areas and analyses of their socio-cultural and housing impacts ([Milbourne,](#)  
14 [2007](#)). International studies of rural migration, however, have helped challenge  
15 the dualistic and stereotypical rendering of rural migration as a conflict between  
16 the fixed identities of locals and newcomers, tradition and modernity, and  
17 economic versus lifestyle motivations ([see for example Ní Laoire, 2007](#)). At the  
18 same time, accounts of international rural migration also challenge the  
19 significance of the rural idyll and middle-classes. Whilst some accounts stress  
20 the role of people-led explanations ([Buller and Hoggart, 1994](#)) others take a  
21 darker turn. Significant here are those migration studies that examine the  
22 changing demands of agricultural labour and food processing. Here, [Hoggart](#)  
23 [and Mendoza \(1999\)](#) describe how agricultural 'occupational niches' are  
24 created for immigrant labour, whilst [Sporton \(2013\)](#) and [Lever and Milbourne](#)  
25 [\(2015\)](#) argue that international migrant workers have become essential to the  
26 meat-processing industry, whose precarious lives are facilitated by employment  
27 regulations, employment agencies and zero hour contracts.

29 For [Halfacree \(2008\)](#), the story of European migrant labour reflects at least one  
30 way in which the binaries of rural migration research remain unchallenged: that  
31 of the difference between economic and people-led explanations, suggesting  
32 that these migration patterns reflect 'economic' explanations of migration in  
33 which cultural notions of rurality or the rural idyll are absent. However, more  
34 recent analyses also stress the extent to which these forms of labour-based  
35 international migration reflect the 'messiness' of migration categorisation  
36 ([Stockdale, 2016](#)). Thus, synthesizing recent studies of migrant labour, [Woods](#)  
37 [\(2016\)](#) argues that 'patterns and processes of contemporary migration are more  
38 fluid and dynamic than often imagined, providing 'mixed messages' about the  
39 agency of migrants. Whilst some accounts demonstrate their structural  
40 disempowerment, others highlight their own agency to construct their own  
41 identities and futures, and re-shape the places in which they live ([Lever and](#)  
42 [Milbourne, 2014](#)).

44 As [Woods \(2016\)](#) suggests, international migration might be better seen as  
45 patterned by heterogeneity: the origins and types of migrant workers varies in  
46 different places; that international migrants exhibit different motivations,  
47 experiences and aspirations; that trigger points and catalysts are social,  
48 economic and regulatory; and that migrants' integration with local communities  
49 can vary between localities. In this messiness, international labour migration is  
50 shaped by economic factors and personal factors – such as marriage or family



1 reunification ([Sporton, 2013](#); [Jirovsky et al., 2015](#); [Hedberg and Haandrikman,](#)  
2 [2014](#)). Equally, the ease of stereotyping the kind of agency work performed by  
3 migrant workers as low-paid and unskilled in which migrants' agency is  
4 captured by a globalized corporate food system is also misplaced. Rather,  
5 international rural migration can involve all social classes and employment  
6 types in which motivations combine the economic, social and personal  
7 ([Eimermann et al., 2012](#)). Indeed, many migrant workers working in poorly paid  
8 and unskilled jobs are educated and skilled but working in occupations that do  
9 not match their qualifications ([Hoggart and Mendoza, 1999](#)).

### 10 11 *Subjectivity, Professionalism and Migration*

12  
13 Missing from these studies are accounts of the international migration of highly  
14 skilled professionals to rural areas. Instead, the migration of highly skilled  
15 professionals is associated with the rise of the 'global city' in which the  
16 expansion of transnational corporations result in flows of professional labour  
17 between world cities ([Smith, 2003](#); [Faulconbridge et al., 2009](#)). Whilst the global  
18 nature of rural space is increasingly recognized ([Woods, 2011](#)), these studies  
19 focus on lifestyle and tourism. In some senses, professional migration may be  
20 no different to other international rural migration: professional migrants can rely  
21 on (and be let down by) employment agencies ([Connell and Walton-Roberts,](#)  
22 [2016](#)) whilst motivations may include economic and cultural factors  
23 ([Beaverstock, 1994](#)). Indeed, drawing on Giddens' ([1984](#)) structuration theory,  
24 [Robinson and Carey \(2000\)](#) distinguish between practical and discursive  
25 consciousness to describe the mixed reasons for international migration by  
26 doctors. Belying their discursive economic reasoning for migration, are a series  
27 of taken for granted historical cultural links that not only shape their destinations  
28 but also help them navigate bureaucratic barriers to migration ([see also Kōu et](#)  
29 [al., 2015](#)).

30  
31 Studies of highly skilled professions have shown how the growth of globalised  
32 professions and flexible labour markets contribute to international migration to  
33 service seasonal demands ([Beaverstock, 1996](#)). Equally, others have shown  
34 how governments and institutions make possible the conditions for international  
35 migration by adapting employment laws ([Raghuram and Kofman, 2002](#)).  
36 However, professional international migration may also be encouraged through  
37 the creation of professional subjectivities and identities in which mobility is  
38 normalised. This is particularly the case amongst scientific professions in which  
39 expectations of mobility are part and parcel of how science works and how  
40 scientists behave ([Ackers, 2005](#)). Moreover, academic mobility is also  
41 normalised amongst students ([Findlay et al., 2016](#)). Thus, [Heffernan and Jöns](#)  
42 [\(2013\)](#) describe how scientific subjectivities and disciplinary identities are  
43 created through institutional infrastructure – such as sabbatical programs –  
44 which contribute to the movement of highly skilled professionals as a means of  
45 doing 'good science' through the exchange and circulation of ideas ([Jöns,](#)  
46 [2015](#)). In short, scientific mobility is essential not just to 'doing good science'  
47 but being a 'good scientist', strengthening the credibility of the scientist and the  
48 legitimacy of their institution as a 'centre of gravity' ([Mahroum, 2000](#)).

1 Elsewhere, management studies emphasise how professionalism is thought of  
2 and constructed as a mode of conduct rather than simply a matter of technical  
3 expertise ([Grey, 1998](#)). Discursive regimes ([Gill, 2015](#)) and 'master narratives'  
4 ([Nelson, 2001](#)) prescribe the limits of professional identity, regulate  
5 professional behaviour and determine professional status. These master  
6 narratives serve to reinforce dominant professional identities: those on the  
7 margins are not recognised as legitimate or valuable, are less able to intervene  
8 or voice concerns, and may ultimately come to accept the dominant view of  
9 their roles through what [Nelson \(2001: 21\)](#) calls 'infiltrated consciousness'.  
10 Master narratives may be created within professions themselves, or through  
11 the activities of international recruitment agencies that define ideal types of  
12 migrant worker ([Findlay and Cranston, 2015](#); [Findlay et al., 2013](#)). Whilst these  
13 dominant elite identities may confer status and provide a form of professional  
14 ontological security ([Giddens, 1991](#)), the pressure to continually conform and  
15 worries over losing identity can lead to 'status anxiety' ([Burke, 1991](#)). As a  
16 result, [Gill \(2015\)](#) argues that alternative counter-identities are developed in  
17 'spaces of action' as sources of personal meaning. Other responses may  
18 include 'survival practices' ([Collinson, 2003](#)) in which alternative subjectivities  
19 are constructed to challenge dominant professional narratives. Another  
20 response is to leave the organisation or profession altogether. For example,  
21 studies in healthcare connect the promotion of new managerial subjectivities  
22 that are divorced from notions of appropriate care to professional exit and  
23 escape by international migration ([Humphries et al., 2015](#); [Gauld and](#)  
24 [Horsburgh, 2015](#); [Sharma et al., 2012](#)).

25  
26 Master narratives of professionalism also reveal the geographical dimensions  
27 of professional identity. Whilst the skills and characteristics of the prototypical  
28 professional may vary between countries, colonialism and the globalisation of  
29 professions can spread particular master narratives that seek to establish  
30 universal versions of professional conduct ([Spence et al., 2015](#)). In a  
31 neocolonial context, these master narratives also serve as a protection against  
32 competing forms of professionalism from marginal, non-elite countries. Thus,  
33 as [Thomson and Jones \(2016\)](#) show, professional migration from the margins  
34 to colonial centres may precipitate identity anxieties: career success, autonomy  
35 and security is dependent on the extent to which migrants are able to conform  
36 to prototypical colonial ideals.

### 37 38 39 *Veterinary Migration in Global Disease Ecologies*

40  
41 How might professional subjectivity and identity anxieties relate to the  
42 international migration of vets? On the one hand, the veterinary profession was  
43 integral to colonial expansion ([Mishra, 2011](#)), establishing universal  
44 professional standards, practices and identities across the world. This historical  
45 depositing of veterinary ideals creates topologies of veterinary professionalism,  
46 making and drawing similar places together, and facilitating movement between  
47 them. The development and style of the NZ veterinary profession, for instance,  
48 was dependent on the arrival of British vets to conduct disease control functions  
49 and the recognition of membership of the UK's Royal College of Veterinary  
50 Surgeons as the sole accreditation qualification ([Burns, 2010](#)). The first of these

1 vets, J.A. Gilruth, arrived from Scotland in 1892 and came to play a major role  
2 in the development in the veterinary profession in NZ ([Nightingale, 1992](#)). By  
3 encouraging further veterinary migration from the UK, Gilruth ensured that they  
4 dominated the Department of Agriculture and the profession itself ([Burns,  
5 2007](#)). Thus, during the 20<sup>th</sup> Century, a cadre of Scottish vets shaped NZs  
6 approach to animal disease management, such as eradicating bovine  
7 Tuberculosis ([Enticott, 2017](#)). Whilst these activities established the importance  
8 of government veterinary work, these vets also contributed to a hierarchical  
9 structure to animal health care by establishing the use of para-professionals,  
10 and developing the unique 'club' structure in which farmers cooperatively  
11 supported private veterinary services ensuring their availability in remote rural  
12 areas ([Burns, 2015](#)). Such global topologies of veterinary professionalism are  
13 likely to promote and sustain patterns of migration by veterinary experts.

14  
15 However, whilst these activities may have helped embed ideal forms of  
16 veterinary subjectivity, other experiences show the importance of  
17 understanding how they relate to the disease environment in which vets work.  
18 Thus, whilst the veterinary profession may have been integral to colonialism, in  
19 practice, different ideal veterinary subjectivities emerged in different places due  
20 to different colonial regimes and the localised nature and severity of disease  
21 ([Gilfoyle, 2003](#); [Mishra, 2011](#)). Whilst not explicitly referring to veterinary  
22 subjectivity, [Davis \(2008\)](#) refers to these variations as the outcome of the social  
23 and biological relational field through which disease management is organized.  
24 Referring to localised 'disease ecologies' examines how differences in the  
25 presence/absence of animals and diseases contributed to different roles for  
26 veterinary medicine in environmental policy in colonial India and North Africa.  
27 However, what is also clear from Davis' work ([2008](#)) is that local disease  
28 ecologies and veterinary roles are shaped by more than disease itself. Rather,  
29 Davis shows how the contribution of veterinary medicine to environmental  
30 policy is shaped by the relationships between pathogens, animals, approaches  
31 to veterinary education and styles of colonial administration.

32  
33 Developing the concept of disease ecology further, this paper suggests that  
34 veterinary subjectivities are shaped within disease ecologies, in which the  
35 social (such as institutional discursive regimes) and natural (such as disease  
36 outbreaks) define but also disrupt prototypical veterinary subjectivities. These  
37 disruptions challenge vet subjectivities and provide moments in which other  
38 elements of personal lifecycle can prompt the decision to migrate. A disease  
39 ecology therefore encompasses professional 'master narratives' of identity and  
40 practice, the governance and institutional management of the veterinary  
41 profession and other related disciplines such as farming, personal and lifecycle  
42 aspects of veterinarians, and biological and environmental factors relating to  
43 disease transmission. The remainder of this paper explores how veterinary  
44 lives are shaped within and by disease ecologies, and how disruptions to  
45 established veterinary ideals and identities contributes to international  
46 migration.

## 47 48 49 **Methodology** 50



## 1 *Context*

2  
3 The focus of this study is on the migration of UK vets. New Zealand was chosen  
4 as the migration destination for three reasons. Firstly, there is currently great  
5 interest in the biosecurity and disease management practices developed in NZ  
6 within the UK government to manage diseases such as bovine Tuberculosis  
7 (bTB). Recent eradication strategies for bTB in the UK make extensive  
8 reference to the NZ experience ([Defra, 2014](#)) and veterinary experts from NZ  
9 are routinely invited to comment on UK plans. Secondly, there is a long history  
10 of migration and cultural connection between NZ and the UK. As indicated in  
11 the previous section, the structure of the NZ veterinary profession was  
12 developed by UK vets, and NZ remains heavily reliant on veterinary labour.  
13 According to the NZ register of veterinary surgeons, there were 2765 vets  
14 practising in NZ in June 2016: 30% qualified at an overseas university whilst  
15 11% (294) were from the UK. Of these, 59% moved to NZ within 4yrs of  
16 graduating, the average time since arriving in NZ was 10.5 years and 60% or  
17 migrant vets are female. Thirdly, whilst there are studies of medical migration  
18 to NZ ([Gauld and Horsburgh, 2015](#); [Sharma et al., 2012](#)), there has been no  
19 attempt to account for veterinary migration to NZ.

## 20 21 *Biographical Interviews*

22  
23 Existing studies of international migration to NZ are overly quantitative and  
24 reduce reasons for migration to simple categories such as 'lifestyle'. For  
25 [Stockdale \(2014\)](#), these approaches are unable to describe how decisions to  
26 migrate are made, or the capture the kinds of practical consciousness  
27 implicated in migration decisions. Rather, as [Halfacree and Boyle \(1993\)](#) argue,  
28 biographical methods are required to go beyond the façade of simplistic  
29 'economic' or 'lifestyle' explanations in order to fully tease out migration  
30 motivations.

31  
32 For this study, interviews with vets were conducted based on Wengraf's ([2001](#))  
33 Biographical Narrative Interpretive Method (BNIM). The BNIM follows a three-  
34 stage procedure: first, a 'Single Question for Inducing Narrative' (SQUIN) is  
35 posed to the interviewee. The SQUIN directs the participant to the subject  
36 matter but is deliberately broad enough to allow participants to talk through their  
37 experiences. The participant is encouraged to talk for as long as possible  
38 without interruption until they can offer no more insight. For this study, the  
39 SQUIN was: "*I'd like you to tell me the story of your veterinary career, from*  
40 *when you first realised what you wanted to become a vet through to now.*  
41 *Please talk about all the significant events, experiences you've had that have*  
42 *lead you to move to move to New Zealand and that you think have kept you*  
43 *here as well*". Secondly, whilst the participant is describing their story, extensive  
44 notes are taken to identify 'Particular Incident Narratives' (PINs) which are then  
45 explored in the order raised by the participant. Finally, nonnarrative questions  
46 are asked. In this case, questions about returning home and feelings of home  
47 were posed where they had not already been raised in participants' migration  
48 narratives.

1 In total 50 vets were interviewed in New Zealand (20 in December 2015, 27 in  
2 June 2016, and 3 in the UK who had recently returned from NZ). Vets were  
3 identified using the Veterinary Council of New Zealand's online veterinary  
4 register (<http://www.vetcouncil.org.nz/onlineReg.php>). Vets were randomly  
5 selected and through snowball sampling and were based in the North and  
6 South islands. Of these, 27 identified as farm vets, 10 worked for the Ministry  
7 of Primary Industries (MPI), 6 were small animal vets, 4 academic, 2 equine  
8 and 1 in mixed practice. 52% of vets interviewed were female. All but one  
9 graduated from a UK veterinary school: the remainder qualified in Ireland but  
10 was a UK national. 76% of vets interviewed had migrated since 2000; 48% had  
11 migrated within 5 years of qualifying; and on average they had been in NZ for  
12 11.9 years when interviewed. These characteristics broadly represented the  
13 overall population of UK vets in NZ. Two interviews were with vets based in  
14 Wellington. However, they have been retained within this analysis because  
15 their original migration destinations were rural.

16  
17 Wengraf outlines a formal method of analyzing BNIM interviews in which  
18 objective life events are presented to an independent panel to iteratively  
19 develop interpretive hypotheses about the experience of life events. This was  
20 not possible in this study and instead analysis relied on an ongoing inductive  
21 analysis of interview data made possible by the interview procedures itself and  
22 the concentrated time period in which a large number of interviews were  
23 conducted. As a result, theoretical saturation of core migration narratives was  
24 reached during the interviews themselves. Nevertheless, all interviews were  
25 fully transcribed and entered into Nvivo to preserve a record of the narratives  
26 uncovered during the interviews. In what follows, the paper describes these  
27 narratives and how they are connected to international veterinary migration.

## 31 **Narratives of Veterinary Professionalism and International Migration**

32  
33 This section describes five related narratives of veterinary migration. Taken  
34 together, the narratives highlight how local disease ecologies influence the  
35 decision to migrate to and stay in NZ. All research participants are anonymised,  
36 but gender and the date of moving to NZ is provided alongside quotes.

### 39 *The First Job*

40  
41 Recounting the beginnings of their veterinary careers, UK vets in NZ told one  
42 of two stories: either their career was the culmination of a realization of a dream  
43 held since childhood, or the fulfillment of a self-imposed academic challenge.  
44 For those growing up on a farm or in the countryside, the transition to a  
45 veterinary career was portrayed as a natural consequence. For others, the  
46 challenge of getting into veterinary school was motivation enough:

47  
48 "I was used to being like one of the top kids at school, and I quite like being challenged, oh, vet  
49 school's one of the hardest things to do, I'm going to get in just because I can try and get in;  
50 it'll be a challenge for me, so I... I... and I think from that moment, probably like 15/16, I'd  
51 got almost like tunnel vision" (C4, Female, 2015).

1  
2 The challenge of *becoming* a vet was not always simple but dedication to the  
3 challenge was a consistent theme. At this life-stage, the challenge of becoming  
4 a vet had little impact upon where they wanted to practice, unlike their next  
5 career stage: the challenge of *being* a vet. Just as [Lave and Wenger \(1991\)](#)  
6 distinguish between learning to practice and learning to be a practitioner, the  
7 reality of veterinary work – of being a vet – came to fundamentally alter their  
8 view of the profession and their identity. The ‘first job narrative’ captured these  
9 work experiences and existential challenges of being a vet. This narrative was  
10 not simply connected to the first job: it began forming during work experience  
11 at University and could cover a number of different early career moves. Broadly,  
12 the first job narrative characterized a realization that a veterinary career  
13 involved accepting substandard working practices, long hours, overwork, and  
14 a lack of support. Typically, vets stories of moving to New Zealand were  
15 prefaced by accounts of over-work leading to mental and physical exhaustion:

16  
17 “I knew I couldn’t stay there for much longer without burning out, or at least without changing  
18 my role slightly, because... it was so busy, and the out of hours were very bad, and there was a  
19 lot of injuries, and it was quite, um... it was quite a tough job...I think physically and mentally  
20 hard, um, draining. I was... you're just never home... so my first job was long, busy days...I  
21 think we did one in five on-call, and one in five weekends, but a night on call would be at least  
22 one dog Caesarean, probably two. Um, I've done four in a night before. If it was lambing season,  
23 you'd have four or five sheep Caesareans through the night as well, plus there'd be calvings  
24 pretty much every night that you were on call, so on-call meant that you weren't at home. You  
25 didn't go home from that day that you were working until the end of the next day that you were  
26 working, or if it was the weekend, sort of four days straight, really, without... I had one full  
27 weekend where I didn't go home or sleep for the four days, which is not safe” (L3, Female,  
28 2013)

29  
30 Having met the challenge of becoming a vet, there was little or no intellectual  
31 challenge to being a vet. Treatments were routine and reactive and required  
32 little thought, either because the ‘thinking’ jobs were jealously guarded by  
33 senior colleagues or because pet insurance required ‘interesting’ cases to be  
34 referred to specialist clinics. If the narrative of veterinary subjectivity was all  
35 about long hours and hard work, the marginality of new vets meant that they  
36 were ‘grateful’ for their opportunity, accepting that these working conditions  
37 were a rite of passage learning experience ([cf. Thomson and Jones, 2016](#)).  
38 However, the first job was also strongly connected to disillusionment with the  
39 veterinary profession followed by professional exit or escape following different  
40 trigger events. Vets recalled how their physical and mental exhaustion suddenly  
41 culminated into a decision that ‘they had had enough’ following specific events,  
42 such as difficult clients, accidents, personal relationship breakdowns. For  
43 example:

44  
45 “the guy was drunk, he was obnoxious, and wanted his dog put down, and I went out to do a  
46 house call, and there was nothing wrong with his dog, so I said there's nothing wrong with your  
47 dog, I'm not going to put it down, and he said to me, if you don't put it down, I'm going to kick  
48 your head in, and then his mate turned up, and you know, it was just a whole unpleasant night,  
49 and I bumped... euthanized his dog, and sort of ran back to the car, and he chased me back to  
50 the car, and I just... you know, and I just thought, I don't need this shit! I just sort, this is not  
51 worth... my job's not worth this” (G2, Male, 1995)

1 For others, questioning the veterinary professional identity unfolded in relation  
2 to family circumstances and the decision to seek out an alternative way of  
3 working:

4  
5 “every other night I was on call...and it’s really difficult to maintain a role as an active father  
6 in terms of, you know, what I wanted to be as an active father, you know, I could have gone  
7 back and... and... and thought of it in... in the previous generation’s terms of, woman you look  
8 after child; I’ll go to work, kind of hunter-gatherer approach, but I’m... I’m... I didn’t want to  
9 be that kind of dad” (E11, Male, 2006)

### 11 12 *James Herriot and the Anti-Vet*

13  
14 In the UK, the James Herriot series of books, and subsequent TV series ‘All  
15 Creatures Great and Small’, have contributed to the popular image of the  
16 prototypical vet who works in mixed practice in a small market town, frequently  
17 called upon to perform complex yet heroic duties for both small and large  
18 animals. Written in the 1970s, the portrayal of the vet is of its time and  
19 increasingly divorced from the range of work conducted by vets today.  
20 Nevertheless, the idea of the mixed practice vet – despite the ever-decreasing  
21 opportunities for this kind of work – and its portrayal of veterinary identity  
22 endures ([Wedderburn, 2016](#)) and can be considered as *the* master narrative of  
23 veterinary subjectivity.

24  
25 The James Herriot form of veterinary subjectivity – whether directly inspired by  
26 the books and TV programs – or through similar work experiences, shaped  
27 many of the UK vets’ in NZ decision to enter the profession. Take this  
28 description of one vet’s first encounter with a vet whilst working on a farm:

29  
30 “A cow had jumped over a barbed wire fence, and she caught her udder on the way over and  
31 she’d ripped her teat right off and caught the milk vein as well and there was blood galore! We  
32 managed to walk her back, maybe half a mile back to the farm, and obviously the second we  
33 got back to the farm, [the farmer] was straight on the telephone to the vet... A young lad  
34 [arrived], he probably wasn’t much older than me, maybe four or five years older than me, and  
35 I remember it was, as I say summer, so 4 o’clock, lovely warm afternoon, um, he got out of his  
36 car, his music was pounding! And, um, the farmer ran straight over to him, you know, it was  
37 like this guy had to save the day, save this cow and imagine him driving out listening to his  
38 music, getting excited about, there’s going to be blood and guts and what’s he going to do. And  
39 he stitched the cow up, and that was pretty straight forward but then the really exciting thing  
40 was he asked if he could get another cow, and he stuck a great big harpoon into this cow’s neck  
41 and connected it up to a great rubber tube, and he siphoned out up to 10 litres of blood into this  
42 great big bucket with a bit of citric acid in it. And my job was to swirl this bucket around to stop  
43 the blood from clotting. And then he took the blood from that cow and he filled a great big bag  
44 up and transfused that blood into the cow that had torn it’s teat, and, um, so he’d given her a  
45 blood transfusion as well as stitched her tits up and after it was all done the cow had gone from  
46 being practically on death's door, really huffing and puffing for... for breath, she’d lost so much  
47 blood obviously not much haemoglobin in her system to just suddenly walking in with her mates  
48 into the shed to be milked, as if nothing had happened. And the farmer’s wife came out just  
49 as we finished and she had made some cake, cup of tea and there’s great big fat globules floating  
50 on the tea. She’d obviously got a bit of arthritis I think, cos the, um, cake mixture hadn’t been  
51 mixed properly, there was great big lumps of lard still in there, but the vet, he... you know, he  
52 sat back with his cup of tea, and his cake, took it all in his stride and, I just thought, well, this is  
53 it, what a great... you know, the appreciation that they had for him. Er, what a great lifestyle,  
54 and he got back in his car, after his cup of tea and his cake, put his music on again, and off he  
55 went. There was dust coming up behind his wheels, obviously off to the next exciting thing, and  
56 I thought that’s for me” (C1, Male, 2001).

1  
2 If this heroic veterinary subjectivity was appealing, the reality of day-to-day  
3 practice led to a realization that an alternative set of subjectivities existed –  
4 referred to here as the ‘anti-vet’ – encompassing roles such as public health  
5 and research. However, not only were these anti-vet subjectivities silenced by  
6 the dominance of the James Herriot mixed practice ideal, but also by  
7 professional veterinary institutions. For example, one vet described how private  
8 practice was promoted above all other opportunities despite realising it was not  
9 for her:

10  
11 “Everyone was pushing you into being into practice...you never really learnt about what other  
12 opportunities and jobs are really out there...Even when I said to my Director of Studies, who’s  
13 like the Dean of the vet school, I was like, I don’t want to do practice, he was like, you should  
14 do practice, quite like, you should do it, you’ll regret not doing it, like even if you do it for like  
15 a year, and I’m like, no. So, it’s not really... like they... they’re like, oh, practice, practice,  
16 practice, and Government work and research: it’s been almost looked down upon” (C4, Female,  
17 2015)  
18

19 Typically government veterinary work was represented as an indoor desk-job  
20 with a lack of autonomy and a bureaucratic supervisory role. It was simply  
21 something that wasn't seen as appropriate veterinary work, or as one vet  
22 working in a NZ slaughterhouse reflected: “nobody goes to veterinary college  
23 thinking, oh yeah, I can't wait to get out and work in a abattoir”. Nevertheless,  
24 as dissatisfaction with their current veterinary identities grew, so these ‘anti-vet’  
25 alternatives became attractive.  
26

27 Attached to the James Herriot master narrative of veterinary subjectivity is a  
28 fixed spatiality: of a market town rural life in which the routine – the same clients,  
29 with the same problems – defines vets’ existence. Escaping this lack of  
30 challenge could mean not just spatial relocation, but a spatial reorientation  
31 away from the fixed to the temporary. As a general qualification, a veterinary  
32 degree affords a degree of mobility: working as a locum allows vets to witness  
33 a range of different veterinary experiences – from small animal clinical work, to  
34 wildlife rescue and rehabilitation. Locum work could provide one way out of the  
35 spatially fixed identity of private practice. For others, the reaction to this fixed  
36 spatiality was a recognition and desire to do something for animal health at a  
37 global scale as opposed to the mundane and localized:  
38

39 “The part that I didn't like, or didn't want to do was... what is today modern veterinary medicine.  
40 I mean fixing dogs that had problems, that had problems because they're sort of inbred, because  
41 of years of in-breeding... that sort of thing seemed to me, um, I wouldn't say valueless, but I  
42 didn't want to do that, compared to some of what I think are the global issues, which is around  
43 sort of declining ecosystems, people dying of infectious diseases, um, you know, the sort of  
44 bigger picture stuff” (E12, Male, 2014)  
45

46 The localized spatial identity had other drawbacks. In particular, vets who had  
47 moved to NZ to work in farm animal practice all commented on how their  
48 existing skills and knowledge were insufficient and required updating,  
49 particularly in relation to nutrition and pasture management. Whilst some were  
50 aware of the seasonality of NZ agriculture, none were accustomed to its  
51 physical demands and its unrelenting repetitive nature. Pregnancy testing could  
52 be a particularly daunting period:



1  
2 “Scanning lasts about three months...and you stand there, and you scan... you just have [cows]  
3 coming past your face, just relentlessly for five hours. You can't stop to have a wee, you... so  
4 you don't drink, so that you don't need to, because you can't...and you have to age those  
5 pregnancies as well, so it's not just pregnant, yes or no, which is fast, but you have to find the  
6 foetus, measure its length, and say within a week how old it is...And it's really painful. You  
7 get sort of really bad repetitive, sort of strain injuries, really hard on your shoulders. All my  
8 fingers were sort of taped up and things to stop you getting blisters “(L3, Female, 2013)  
9

10 So whilst the generality of veterinary medicine allowed a degree of mobility,  
11 expectations of international mobility and their codification into a veterinary  
12 identity appeared less significant. As well as subjectivities, vets' own bodies  
13 were shaped by their local disease ecologies meaning that the transition  
14 between them could be painful.  
15

### 16 17 *Poverty Farming and Veterinary Practice* 18

19 The first job and the anti-vet are not just associated with vets fresh out of  
20 veterinary school. For other vets, these challenges accrued incrementally and  
21 in relation to other changes in the local disease ecology. Thus, the gradual  
22 rejection of prototypical veterinary life emerged in relation to the outbreak and  
23 spread of exotic and endemic disease, changes to agriculture, and the  
24 governance of disease. For vets qualifying before 2000, the 2001 Foot and  
25 Mouth Disease (FMD) outbreak represented a significant chapter in their  
26 career, resulting in the reorientation of their approach to veterinary work:  
27

28 “I ended up going to the doctors because I was kind of on the verge of having a nervous  
29 breakdown...I thought after the foot and mouth we were going to have no business to  
30 go back to, because, you know, the amount of farms that were put out of business...so  
31 because of that, I paid all the debts off, and we had some money in the bank and  
32 farming being like it was at the time, I didn't really want to start putting money back into  
33 the practice again... it became more of a business and cattle were just like livestock  
34 units, and if they weren't performing, they was like... you know, [farmers] wouldn't  
35 bother treating them because it wasn't worth it; they'd just get rid of them. Um, all the  
36 farmers before that, you know, they had their own favourite cows that they'd spend a  
37 fortune on even though you'd tell them it's not financially worth it...I think after 20 years,  
38 I'd kind of just had enough of it all, you know” (L1, Male, 2007)  
39

40 Others referred to these kinds of changes as 'bare bones poverty farming' in  
41 which marginal farming was made worse by falling milk prices and European  
42 Union regulations. This compounded the impact of diseases like BSE and FMD,  
43 suppressing any 'youthful, vigorous [or] positive young blood from coming  
44 through' (C1, Male, 2001). The consequences were that farmers were retiring  
45 and veterinary work disappearing. Farms were bought and used as livery yards.  
46 Whilst still requiring veterinary services, becoming an equine vet and working  
47 with 'horsey' people was anathema to these traditional farm vets. Moreover, as  
48 vets were one of the few people to visit the remaining farms, farmers' attempts  
49 to cope with the mental stress of poverty farming was off-loaded onto them:  
50

51 “as the vet you were one of the few people that go on farm, and perhaps they saw you  
52 as a doctor in another guise, so they'd offload a lot of the mental problems onto you as  
53 well. So you'd spend time listening and you know you can't help but have that... it can't  
54 help but have an effect on you. Day after day, after day... So I just came home one

1 night and said [to my wife] “look, fuck it”, I’d seen an advert you know, in the Vet  
2 Record...and it was now or never” (C4, Male, 2001)  
3

4 Other disease outbreaks also impacted upon the kind of veterinary work that  
5 vets could undertake. In particular, testing for bTB was seen to represent the  
6 worst kind of work: routine, monotonous and dangerous. With no solution to  
7 bTB on the horizon, vets became fed up with the consequences of giving bad  
8 news to clients to whom they had close emotional attachments. Younger vets  
9 reported trying to avoid work in areas of the UK where the disease was endemic  
10 (such as south-west England) to avoid having to bTB test, whilst others cited it  
11 as one of the main reasons for their disillusionment with practice and their move  
12 to New Zealand:

13  
14 “TB testing I found really demoralizing. We would TB test, you know, four days a week,  
15 so Monday, Tuesday injecting, reading Thursday, Friday, um, and you were just  
16 constantly, you know, condemning cattle. Every single bloody day, and you know, after  
17 being the vet for these farmers for five years, they were not clients, they’re friends, and  
18 close friends...and I felt that nothing was done about it...and I was thinking I don’t want  
19 this for another 10 years. I would have happily stayed, but not condemning cattle four  
20 days a week. Its not what I signed up for” (R7, Female, 2015)  
21  
22

### 23 *Accidental Migration*

24

25 If migration was related to disruptions to veterinary subjectivity, one  
26 commonality, however, was that international migration was rarely planned.  
27 The kinds of new veterinary roles that vets came to assume, although being a  
28 reaction to the dominant James Herriot ideal, were not actively searched for but  
29 discovered by accident. Adverts for work in NZ were chanced upon or passed  
30 on by friends or partners. Despite NZs representation in popular culture as a  
31 lifestyle and wilderness destination, captured in its own “100% Pure” marketing,  
32 NZ was not a destination chosen by migrants, but emerged from vets’ social  
33 relationships. Having friends and family already in NZ was one route into work  
34 in NZ, or having colleagues who knew people working in New Zealand.  
35 Migrants therefore referred to themselves as being lucky or finding jobs by  
36 chance, reflecting Stockdale’s (2014) suggestion that migration happens more  
37 by chance and luck than rational planning. However, it also highlights how,  
38 following [Granovetter \(1973\)](#), those moments of luck are made through the  
39 strength of weak ties. It was through these connections and networks that those  
40 ‘chance’ emails and contacts became relevant. A crucial factor in many moves  
41 was having a supportive partner whose work and family circumstances allowed  
42 them to move. Vets’ partners could take the lead in looking for overseas jobs,  
43 or bring up the idea of moving or spending a period of time travelling.  
44

45 Moreover, the NZ disease ecology also helps put luck and chance in context.  
46 In particular, the legacy of colonialism to the veterinary profession in NZ means  
47 that UK vets can move to NZ relatively easily. Compared to countries like the  
48 United States of America, UK veterinary qualifications are accepted in NZ  
49 without the need to sit further examinations. Moreover, as vets are in short  
50 supply in NZ, the profession is on the list of occupations for which obtaining a  
51 work visa is relatively straightforward. At the same time, the colonial legacy has  
52 created important distinctions between veterinary work in NZ and the UK. On

1 the one hand, the NZ economy is dependent on maintaining biosecurity such  
2 that government veterinary work is important. On the other hand, colonial vets  
3 deregulated aspects of veterinary work creating a professional division between  
4 private vets and lay technicians. The effect was to remove much of the kind of  
5 mundane work like bTB testing from vets' workload. The NZ prototypical  
6 veterinary subjectivity is therefore much more in tune with UK vets' imagined  
7 ideal. This is not to say that vets in NZ do not encounter mundane work, but the  
8 organisation of agriculture in NZ makes that work attractive in other ways. For  
9 example, the seasonality of dairy farming in NZ provides a concentrated cycle  
10 of 2-3 month periods in which vets might only perform calvings, or pregnancy  
11 testing. This seasonality affords the time to develop the kinds of embodied skills  
12 needed for these tasks in a short space of time not available in the UK. Involving  
13 hard, physical and repetitive work, they also provided a temporality to migration:  
14 vets talked about how initial plans would involve 'going for the season'. This  
15 seasonal temporality to veterinary work provided natural checkpoints to  
16 reassess career options, become permanent residents, or return or move to a  
17 new location. Finally, it is also important to recognize that one aspect of the  
18 disease ecology in NZ that made veterinary jobs easy to come by was the  
19 expansion of the dairy industry during the late 2000s/early 2010s. This boom  
20 was connected to the creation of the NZ dairy cooperative Fonterra and its role  
21 in expanding NZs position in the global milk market ([Gray and Le Heron, 2010](#)).  
22 This expansion created not just more job opportunities, but the kind of  
23 veterinary subjectivities that these vets were looking for: focused on managing  
24 the challenges of herd health in a supportive team environment, rather than a  
25 lonely existence of routine disease testing.

### 26 27 28 *Therapeutic Subjectivities*

29  
30 [Halfacree and Rivera \(2012\)](#) argue that migration research often overlooks  
31 decisions to stay in favour of the decision to move. This final section considers  
32 how the disease ecology of NZ restores the veterinary way of being by providing  
33 a broader sense of social security. A key difference between the UK and NZ  
34 veterinary life is in working culture. In NZ, working hours were perceived to be  
35 shorter because out of hours rotas were less demanding, and working late  
36 frowned upon resulting in a better work-life balance and lifestyle. The contrast  
37 with the UK and NZ's culture of outdoor living meant that veterinary migrants  
38 began taking part in activities that they had had no time for before. Participation  
39 in sports was revived, and regular hours meant that routines could be  
40 established allowing them to participate in team sports or community activities  
41 on a weekly rather than haphazard basis. For example:

42  
43 "you will always have that day...where you don't leave at the end of work, but 95% of  
44 the time I do, and that's really unusual for me. Particularly as a smallies vet, because  
45 there's always things on drips, and there's always something going on, and most of the  
46 time I come into work at 8.00, and I go home at 5.30, and I'm not on call. And you can  
47 go down to the beach, or we can go [skiing]. I was on call at least one night a week,  
48 and probably one in four, if not one in two weekends, and all of a sudden, now, as a  
49 smallies vet, I'm on one in nine or ten. And the largies guys are on one in 18 weekends.  
50 They'll be mad through spring, when it's calving...but then the rest of the year, nothing  
51 happens. It's great! So you're busy in the day...but the phone doesn't ring when you're  
52 on call and it's summer" (C3, Female, 2014)

1  
2 If veterinary life provided a form of therapy to UK veterinary life and its identity  
3 anxieties, then it was also provided through a broader sense of 'ontological  
4 security' ([Giddens, 1991](#)) afforded by what were perceived as traditional ways  
5 of living, found in both NZ veterinary and rural life in general. The antithesis of  
6 poverty farming in the UK was the ingenuity of the practical Kiwi farmer  
7 captured by their 'number 8 wire mentality' – a mythical ability to fix any farming  
8 problem situation using standard sheep fencing wire. Number eight wire was  
9 more than a material fix for practical problem solving: it was symbolic of a  
10 simpler life in which the traditions of hard work, community and nature were  
11 elevated above modern living. Participating in the community afforded a sense  
12 of social security and a memory of 'how Britain used to be years ago'. On  
13 returning to the UK for funerals or weddings, these differences were reinforced.  
14 Home, and for some nationality, become situated in these dense and secure  
15 gemeinschaft-like relations.

16  
17 This simpler way of life was also tied up in veterinary work and reflected in what  
18 were referred to as 'realistic' attitudes to animal welfare and treatment amongst  
19 both NZ farmers and the public in general. The UK veterinary profession was  
20 perceived to be overly bureaucratic and part of a moribund risk averse litigation  
21 culture. By contrast, vets arriving in NZ were soon confronted by different  
22 attitudes to animal care:

23  
24 "I remember going out to a station, and seeing a horse. I condemned the horse; I said,  
25 "no, the horse is stuffed, it needs euthanizing", and the guy goes, "yeah, all right, fine,  
26 no worries, I thought that was the case. I'll just dog tucker it", went and got a rifle out  
27 of his truck, bang! I was like, whoa... that was the first time I'd ever seen a horse being  
28 shot, um, the first time I'd ever seen an animal being shot, because the UK's a bit  
29 different to that, um, and then the fact that he was cutting up the horse for dog tucker,  
30 was just like, Jeez, is this how they do it in New Zealand? So, that took a bit of getting  
31 used to" (C2 Male, 2000)

32  
33 These practices could take some time to get used to. The shock of the old,  
34 however, came to be rationalised as a more responsible approach to animal  
35 welfare. Animals were no longer kept alive for the sake of their owners. Rather,  
36 owners were seen to be able to maintain an appropriate emotional distance  
37 from their animals when treating them. In a similar way, this simpler or  
38 traditional approach to animal welfare was reflected in some animals' reactions  
39 to treatment. For instance, dogs used for pig hunting would frequently be  
40 admitted with 'their insides hanging out' but would allow vets to perform basic  
41 surgery without complaining, stitch them back up in pragmatic fashion, and  
42 leave as if nothing had happened. Not only did these dogs embody traditional  
43 qualities of hard work and their acceptance of simple treatment 'heroic and  
44 brave', but reflected what was seen to be 'appropriate' veterinary care.

45  
46 Yet, it was by no means the case that these 'traditional' veterinary subjectivities  
47 were accepted uncritically by all migrant vets. Whilst some embraced the  
48 ontological security they offered, others struggled to reconcile the normalisation  
49 of NZ animal welfare practices with those found in the UK. Moreover, the signs  
50 of a circulation of new animal welfare practices and a reconstitution of NZ

1 veterinary practice were limited, held up by the traditional views of farming or  
2 veterinary professional interests:

3  
4 “things will be put on a drip, and then left, from when you leave work to when you come  
5 back in the morning...And it's actually frowned upon, and I've found that really difficult...  
6 It's the extra work, and the quality of life, and they put it under health and safety  
7 sometimes... but if I do it, it puts pressure on the other vets to do it...They don't see it  
8 as, oh, we want to improve standards. What they see it as is a criticism of other  
9 people's standards, which it isn't, but that's always how things are seen when you're  
10 pushing a limit. I've done nights, so I'm used to being up and walking dogs around if  
11 they need a pee, and so it's just... it's a different mentality. It's not a right or a wrong,  
12 it's just how... probably how the UK was 20, 25 years ago” (C3, Female, 2014)

13  
14 Overall, NZ's disease ecology and the professional veterinary identities within  
15 it could provide the ideal destination point for UK vets alienated from the master  
16 narratives of UK veterinary practice. This is not to suggest that NZ veterinary  
17 lifestyles are free from the kinds of anxieties UK vets are attempting to escape  
18 ([see Gardner and Hini, 2006](#)). Further research on veterinary migration by NZ  
19 vets and its links to professional subjectivity is required. Moreover, whilst the  
20 compromises to animal welfare and the slow pace of change could provide  
21 another challenge to migrants' professional identities provoking further  
22 migration, there may also be a broader range of reasons for return migration.  
23 Further research on return migration amongst veterinary migrants in the UK  
24 and NZ can help unpack these decisions, as well as identify their impacts such  
25 as the reconstitution of veterinary expertise and working practices.

## 26 27 28 **Conclusion**

29  
30 Studies of international rural migration have the potential to reinvigorate  
31 migration studies, allowing for more nuanced rather than binary explanations of  
32 migration processes. In analysing the international migration of vets, this paper  
33 addresses a further gap: the need to account for highly skilled professionals in  
34 international rural migration. Drawing on biographical interviews, the paper  
35 argues that international rural migration is situated within and emergent from  
36 an interwoven set of relations – conceptualized in this paper as a ‘disease  
37 ecology’. Disease ecologies reflect the heterogeneous relations in which vets  
38 lives are entangled: between animals and diseases, partners and clients, and  
39 professional institutions and their versions of veterinary identity. By referring to  
40 a disease ecology the aim is to capture this heterogeneity, but also suggest that  
41 for vets, the natural and the non-human play significant roles in shaping  
42 migration decisions.

43  
44 In analysing how local disease ecologies shape migration patterns amongst  
45 vets, the paper draws attention to the relationships between disease outbreaks  
46 (such as bTB and FMD), and the cultural and institutional construction of  
47 veterinary master subjectivities resulting in tensions between becoming and  
48 being a vet. In responding to the realities of veterinary subjectivity, other studies  
49 have shown how survival practices are located within identity-based modes of  
50 learning to make work possible ([Enticott, 2012](#)). In this paper, the tension  
51 between becoming and being a vet are met with a different response: of  
52 escape. Thus, whilst [Thomson and Jones \(2016\)](#) suggest that international



1 migration precipitates identity crises due to the challenge of conforming to  
2 professional subjectivity master narratives, this paper suggests the opposite:  
3 that professional identity anxieties precipitate migration. The 'first job' narrative  
4 appears to be a significant challenge for the profession, accounting for  
5 disillusionment and exit from veterinary careers as well as migration ([Vet  
6 Futures Project Board., 2015](#)). Why the tensions between becoming and being  
7 leads some vets to migrate and others leave the profession requires further  
8 investigation. Moreover, these narratives open up other questions, such as how  
9 can other veterinary identities be normalised?

10  
11 Secondly, these tensions reveal the different ways rural representations are  
12 implicated in highly skilled international migration. On the one hand, the James  
13 Herriot veterinary master narrative of the mixed practice rural vet continues to  
14 act as a dominant 'veterinary subjectivity. However, in reacting against these  
15 institutionalised versions of professional subjectivity, it is a search for the 'anti-  
16 vet' rather than a secure rural idyll that informs veterinary migration. On the  
17 other hand, New Zealand's countryside provides a kind of imagined past  
18 English rural idyll in which a simpler life provides the conditions for ontological  
19 security absent from the UK. Whilst this version of the rural idyll helps to  
20 understand why international migrants stay in their destination, it is arrived at  
21 by accident: the locations to which vets migrate are happened across by chance  
22 and situated in historical colonial relations. In this way, the paper highlights how  
23 rurality is accommodated within narratives of international migration in new and  
24 unexpected ways. Further studies of other forms of international migration may  
25 reveal other ways in which the rural idyll is implicated.

26  
27 Finally, a focus on disease ecologies implicated in international migration also  
28 reveals how the natural and nonhuman are connected to migration choices.  
29 Disease prevalence helps shapes the kinds of veterinary identities vets are  
30 expected to assume but come to reject. At the same time, animals, their welfare  
31 and what counts as 'appropriate' care is also woven into accounts of veterinary  
32 migration. What is interesting about these accounts is their stability. For other  
33 scientific disciplines, migration is one way to ensure the mobility and circulation  
34 of ideas and expertise. In this paper, however, the circulation of expertise, as  
35 opposed to experts, appears to be minimal. Does this reflect the fixed power of  
36 veterinary and agricultural interests to resist the influence of migrating vets, or  
37 to direct overseas vets to discrete sub-sections of the profession? Either way,  
38 further research on the impact of international rural migration amongst highly  
39 skilled professionals can contribute to understandings of the circulation of  
40 expertise, professional identities and understandings of rural migration.

41

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