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Compromise and complicity in international student mobility: the ethnographic case of Indian medical students at a Chinese university

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ABSTRACT
Existing scholarship on international student mobility (ISM) often draws on Bourdieu to interpret such mobility as a strategy of capital conversion used by privileged classes to reproduce their social advantage. This perspective stems from and also reinforces a rationalistic interpretation of student mobility. A shift of focus to interAsian educational mobilities involving non-elite individuals and institutions can reveal logics of behavior and of social interaction that are at discrepancy with the dominant perspective, thereby advancing the theorization of educational mobilities. This paper examines a case of Indian youths of less affluent backgrounds pursuing English-medium medical degrees (MBBS) at a provincial university in China. Through ethnography, the paper illustrates how various parties – individual, organizational and institutional – to this somewhat ‘unlikely’ project of knowledge mobility follow the discrepant logics of compromise and complicity to seek to realize their educational desires, social aspirations, and organizational objectives amidst realities of class disadvantage and resource inadequacy.

KEYWORDS
International student mobility; MBBS; medical education; China; India

Introduction: an ‘unlikely’ case of international student mobility (ISM)

One morning, March 2014, in the southeastern Chinese city ‘CN’, I sat among some 40 international students – mostly from Jordan and India – in a lecture hall in CN city’s major higher education institution, CN University (henceforth ‘CNU’). It was 9.18 am, or 18 min after the lesson had started, but students were still slowly trickling in. Most late arrivers were young men: without exception, they walked into the classroom with a relaxed gait, showing little sign of hurriedness or being apologetic for being late.

Their lecturer, ‘Dr Singh’, paid no attention to the late-arriving students, and carried on lecturing in an Indian-accented English, against a blackboard that reflected light in such a way that – at least from where I was sitting – whatever written on it was difficult to read. This was a pharmacology lesson, and the students were in their third year of CNU’s English-medium international Bachelor of Medicine and Bachelor of Surgery (MBBS) programme. They belonged to the 2011 cohort of 160 students, which were split about equally between Jordanians and Indians. Dr Singh himself obtained his MBBS degree from a similar programme in the southern Chinese megacity of Guangzhou previously. He was one of the three Indian nationals hired jointly by CNU and an Indian educational agency – ‘India–China MBBS Education’ (henceforth ‘ICME’) – to teach on the programme at CNU, because students from India represented a major clientele.
The Jordanian students and Indian students sat separately from each other, forming their own blocks. Dr Singh directed his attention to the Indian block most of the time. At one point, he raised a technical question, expecting an answer from the Indian block. None came. Then he admonished: ‘You are about to become doctors in India and you are not answering my question. What I’m telling will be examined in the MCI exam.’ MCI, or the Medical Council of India, administers the Foreign Medical Graduate Exam (FMGE), which is compulsory for Indian doctor candidates who obtained their training in foreign countries other than USA, UK, Australia, New Zealand, and Canada. Perhaps because of Dr Singh’s bias in favour of the Indian students, or due simply to his ‘Hinglish’, the Jordanian students were visibly disengaged – chit-chatting, bantering, playing pranks among themselves, making quite a noise. But the Indian students were not doing much better: some took notes on makeshift pieces of paper; some sat still, hands in pockets, with wooden facial expressions; others were chatting or snoozing. As soon as the mid-session break was announced, most Jordanian students left the classroom and started chatting loudly while smoking cigarettes in the corridor outside. The pungent smoke wafted into the classroom. The class reconvened later than it ought to, but ended at 11.17 am – 43 min earlier than it was supposed to.

As the students filed out of the teaching building, I walked with a few male Indian students to their dormitory for lunch. On our way, I queried whether the lesson was too noisy for them to concentrate on, to which one of them replied: ‘No, this is already much good! The Chinese teachers are even worse – their English we cannot understand!’ In the dormitory CNU allocated to international MBBS students, the day was only beginning. On the male floor, some young men were still in their pajamas, having slept in due to watching Bollywood movies into small hours of the morning. The corridor was filled with the melodies of Indian pop songs and the aroma of curry – students were actually forbidden to cook in their rooms but they did so anyway and CNU turned a blind eye towards it. It was for economical reasons: cooking their own meals allowed some Indian students to spend as little as 200 RMB (29 USD) per month on living expenses. This saving meant a great deal to some of them as they struggled with paying tuition fees on time alongside their mobile phone bills.

However, perhaps the Indian students felt somewhat justified flouting the dormitory rules, because they felt short-changed by CNU. Apart from what they regarded as poor curriculum design, poor instructional quality and/or instructors with poor English language proficiency, for example, the 2011 cohort also started their spring semester with a delay of more than two weeks due to the unavailability of instructors. When I returned to CNU a few months later in June, I learned to my shock that CNU had been disqualified to recruit international MBBS students in the future by the Chinese Ministry of Education (MOE) as the result of an inspection. (All names of individuals and institutions in this vignette and the rest of the ethnography are pseudonyms.)

The above is a snapshot of a thus-far little-known and arguably ‘unlikely’ case of ISM: Indian youths of less affluent backgrounds pursuing English-medium undergraduate medical education in China – at colleges that are sometimes not well prepared to offer such programs.

ISM in higher education has been a rising phenomenon. The past several decades saw the number of students enrolled in tertiary education outside their country of citizenship grow from 1.3 million in 1990 to 5 million in 2015 (ICEF Monitor, 2015). This figure has been projected to grow further to 8 million by 2025 (Institute of International Education, 2015). Since the majority of international students hail from Asia, whereas their destinations are typically Anglophone Western countries (UNESCO, 2013), existing scholarship has correspondingly focused largely on student flows from the developing world to the developed world (Brooks & Waters, 2011). While this ‘rest’-to-West focus of ISM research indeed reflects the uneven and unequal realities of global geographies of knowledge and
power among nation-states, arguably it also results in certain limitations to the theorization of ISM. Prevailing theorization of ISM tends to employ a Bourdieusian theoretical framework and sometimes assumes mobility to be ‘overwhelmingly pursued by privileged individuals’ (Waters, Brooks, & Pimlott-Wilson, 2011, p. 460). The underlying logic of ISM, according to this dominant perspective, is about using study-abroad as a ‘social alchemy’ to realize the conversion between economic, social and cultural capitals, thus ultimately to reproduce class advantage. Knowledge and student mobilities are often understood as elite practices taking place in elite spaces, and circulating through elite connections.

The case of Indian youths reading medicine at CNU, as sketched out in the vignette above, raises numerous points of discrepancy with this prevailing narrative. Most Indian MBBS (Bachelor of Medicine and Bachelor of Surgery) students I encountered at CNU came from non-affluent families in small-town or rural India, with little class advantage or ‘eliteness’ to speak of. The destination of their knowledge-seeking mobility – Chinese provincial capital city ‘CN’ – lies outside the coveted global spheres of elite knowledge production and circulation. There was also limited evidence – but abundant uncertainties – that their India-to-China mobility would eventually generate any meaningful ‘cultural capital’ for them, especially in view of the low success rates of China-trained doctors in the FMGE (Foreign Medical Graduate Exam) exam (details to follow). In short, this peculiar case of interAsian mobility lies at the little-explored margins of our existing knowledge about student/knowledge movement, and cannot be readily or satisfactorily explained with existing analytical frameworks and vocabularies.

This paper sets out to understand and articulate the logics or rationalities underpinning such a ‘discrepant’ case of ISM. In a nutshell, I shall argue that the mundane thought processes, decision making, behavioral patterns, and social interactions of the various parties to this case of India-to-China MBBS mobility can be understood in terms of what I call the logics of compromise and complicity. To best uncover and describe such ‘discrepant’ logics, this paper presents ethnographic notes from fieldwork.

In the following three sections, I first set out the contexts of the case from both the perspectives of China and India. I then discuss the relevant ISM research literature, arguing that a Bourdieusian perspective and a rationalistic assumption are prevalent in extant analyses of ISM although some recent work has added nuance to these. A few notes are then provided on the research fieldwork before the ethnography follows. In the conclusion, I consider the ways in which findings from this discrepant case of ISM relates to some recent scholarly thinking about aspiration, desire, optimism and mediocrity in connection with young people.

**Contexts: interAsian student mobility, China, India, MBBS**

Asia has seen increasing student mobilities within the region in recent years (e.g. Collins, 2013; Collins & Ho, 2014; Ziguras & McBurnie, 2011). China – whilst being indisputably the world’s top sending country of international students – has also caught up to become the world’s third largest importer in 2014, accounting for 8% of the 4.5 million international students globally (Institute of International Education, 2015). In absolute terms, the number of foreign students in China rose from a mere 14,000 in 1992 (Kuroda, 2014) to 397,653 in 2015 (CAFSA, 2016). The Ministry of Education China (2010) has further
targetted to host up to 500,000 international students by 2020. Without being exceptional to the market-driven logic of higher education internationalization worldwide, one key motivation for Chinese universities to encourage more international students is the fee revenue (Mok, 2000). Nowadays, it is estimated that 9 out of 10 foreign students in China are fee-paying (Haugen, 2013).

According to Kuroda (2014, p. 449), as of 2011, medicine was the second most popular subject for international students to study in China: with 38,750 foreign students enrolled, it accounted for more than 13% of all enrollments, falling only behind ‘liberal arts’. Furthermore, a significant portion – though exact numbers remain unclear – of these foreign medical students are on degree programs in clinical medicine (or MBBS) with English as the medium of instruction. The total number of MBBS seats in China for international students increased steadily from 2,095 offered by 24 universities in the 2007 admission year, to the high watermark of 6,020 places offered by 52 institutions in 2013 (Medical Council of India, 2015), before experiencing a notable decline more recently. In the 2016–2017 admission, 45 institutions offered a total of 3,470 places (Ministry of Education China, 2016).

Indian students started heading to China for MBBS in their ‘hundreds’ since as early as 2004–2005 (Aiyar, 2006). Over time, their numbers rose. No precise statistics are available, but the majority of the 16,694 Indian students in China as of 2015 (CAFSA, 2016) can be safely assumed to be on MBBS programs. This also makes students from India very likely the largest single-nationality group among foreign students pursuing English-medium MBBS in China. In fact, in recent years China has become the top destination for Indian students seeking medical training abroad (Mishra, 2012). During the 2011–2014 period, the largest group of FMGE candidates by their country of training was those from China (Banerjee, 2015).

However, as earlier batches of graduates returned home to attempt the FMGE, Indian media started to notice their low pass rates. In a Hindustan Times article titled ‘80% students flunk mandatory test after MBBS in China, Russia’, Bharti (2015) notes that between 2012 and 2014, the exam pass rate for China-trained candidates was only 18.9%. As more and more under-prepared medical doctor candidates returned, there is now a general realization in India that ‘foreign medical degrees are no longer fancy’ (Banerjee, 2015). Such outcomes highlight discrepancies between received notions of elite ISM and medical education on the one hand, and realities of the India-to-China MBBS case on the other. It is my aim in this paper to take such discrepancies as an opportunity to engage critically with existing analyses of ISM in literature, as I outline next.

Beyond Bourdieusian and rationalistic perspectives

A Bourdieusian theoretical vocabulary of ‘capital’, ‘class’ and ‘social reproduction’ dominates a significant part of the existing scholarship on ISM. Invoking Bourdieu’s (1986) seminal theorization of forms of capital, many scholars have analyzed educational mobility as a way to accumulate cultural capital which subsequently translates into employability, status, social networks, etc., all of which facilitate the reproduction of social class (e.g. Baláž & Williams, 2004; Findlay, King, Smith, Geddes, & Skeldon, 2012; King & Ruiz-Gelices, 2003; Waters, 2006, 2008). As Waters et al. (2011) assert, ‘[m]uch of the research on young people and education – particularly that which focuses on international education – emphasizes strategies of cultural capital accumulation’ (p. 456). In addition, there is also the associated
assumption that these strategies are ‘overwhelmingly pursued by privileged individuals’ (Waters et al., 2011, p. 460).

This Bourdieusian perspective may be viewed as aligned, at a more general level, with a rationalistic model of understanding educational mobility, which in turn has been influenced by neoclassical theories of migration (Raghuram, 2013). As Raghuram argues:

Decisions are seen as strategic and as being arrived at by weighing up the costs and benefits (direct and indirect) of moving from one place to another so that comparison between staying and moving becomes the driving force for migration. Although most research on student migration has distanced itself from neoclassical theory, aspects of it – variations of a push–pull analysis, the focus on individuals and a particular spatial imagination – continue to prevail. (p. 142)

In short, the dominant narrative about ISM is as a strategy used by relatively privileged social actors in rationalistic and calculative ways to convert different capitals across borders for the ultimate purpose of maintaining and maximizing social advantages. This notwithstanding, more recently some scholars have ventured beyond this narrative, in notably two ways.

First, with a number of accounts (e.g. Baas, 2010; Fong, 2011; Singh & Cabraal, 2010) now available, it is increasingly recognized that educational mobilities are pursued also by youths from not strictly speaking ‘privileged’ or ‘elite’ backgrounds. Yet, in most such accounts, the destination countries remain in the developed ‘West’, where residency rights or citizenship often constitute prominently an objective for the mobile youths (see also the notion of ‘education-migration nexus’, Robertson, 2013). The same cannot be said of the Indian students reading MBBS in China, which is manifestly not an immigration destination, and not regarded so by the Indian students in any case. In other words, making sense of this India–China case not only requires us to go beyond prevailing ISM theories; it must also be analytically distinguished from the small number of existing accounts of non-elite student mobility. This paper aims to identify those alternative and ‘discrepant’ logics that would assist such sense-making, without seeking necessarily to invalidate existing theories and accounts.

Second, a number of scholars have presented analyses that de-centre or at least give further nuance to the portrayal of ISM as a highly calculative and rationalistic process. Carlson’s (2013) study, for instance, shows that educational mobility takes shape processually, over long time, and rarely in a moment of rationalistic calculation. Beech (2015) resonates with Brooks and Waters (2010) in both arguing that extended social networks, in addition to individual students and families, often play decisive roles in the shaping up of choices and decisions about educational mobilities. What these authors collectively highlight is a sense in which the logics or rationales of educational mobility can be more various, diffuse and socially embedded, instead of being located restrictively in rationalistic cost–benefit or investment-return calculations. My arguments in this paper will follow this thrust.

Finally, it may be observed that overall, existing literature has paid limited attention to uncertainties and contingencies in ISM (though for a recent exception see Phan, 2016), even though Bourdieu (1986) points out from the outset that the conversion between different forms of capital is far from guaranteed, but entails risks of wastage and/or failure. So, what happens in cases of ISM where things do not quite work, where breakdowns or failures are imminent? With ethnographic materials, I shall illustrate the delicate
yet precarious social logics with which students, parents, intermediaries and the host institutions manage and negotiate such uncertainties and contingencies, and sustain an otherwise ‘unlikely’ educational endeavor.

**Ethnographic fieldwork**

My ethnographic fieldwork took place over three phases. In March 2014, I made my first inquiries into the international MBBS program at CNU by spending a week visiting the university daily. Because students from the southern Indian state of Tamil Nadu were the most numerous, I interacted most frequently with them, shadowing several small groups to lessons as well as spending leisurely time with them over meals and chats. These interactions afforded me insights into the Indian MBBS students’ academic and social lives at CNU, and allowed me to establish friendly relationships with some of them.

The following June, I visited CNU again and managed to interview a CNU official who provided me with rare glimpses into the Chinese side of the story. Then, for two subsequent weeks in July, I traveled in India, visiting the homes of four Tamil students whom I had become closer with. My trip covered mid-sized/small Tamil towns such as Thanjavur, Tiruchchirappalli (a.k.a. Trichy), Salem, and Ooty, in or near which the four students’ homes were respectively located. This exercise threw me deep into the circumstances from which the Tamil MBBS students came and gave me better understanding of their educational endeavor in China. In Trichy, I also met and interviewed the recruitment agent for Tamil Nadu.

Lastly, in January 2016, I traveled to India again, this time on the invitation of the agency ICME. During this visit, I was received by the owner-managers of ICME in Kolkata and Bangalore, and was provided valuable information on the agency’s operations. While the previous two field trips respectively focused on the Chinese provider of MBBS education and the Indian students and their families as the consumers, this last trip made the jigsaw puzzle complete by locating the key intermediaries that linked up the two.

**Ethnography: compromise and complicity**

**Compromise**

*The Indian students and their parents*

In India, medical education offered by government-funded institutions is academically rigorous and highly affordable, but extremely competitive. According to a male student from the northern state of Uttarakhand, more than 200,000 candidates competed for 180 seats in government medical colleges in his state. As a consequence, a significant for-profit private medical education sector has developed (Sood, 2008) – a sector characterized by lower academic admission standards but exorbitant tuition fee levels. My informants never failed to display vivid astonishment and anguish when it came to speaking about the costs associated with studying MBBS in private colleges in India. According to one Kolkatan student, in the state of West Bengal the ‘capitation fee’ (a donation to the college for admission) amounts to INR 27,00,000 (equivalent to USD 41,490), in addition to INR 8,00,000 (USD 12,293) per academic year in tuition fees. A student from Tamil
Nadu told me a private college in his state would ask for INR 40,00,000 (USD 61,467) in 'capitation' and INR 5,00,000 (USD 7,683) in annual tuitions. CNU, in stark contrast, merely charged an annual tuition fee of RMB 24,000 (USD 3,485) and an annual accommodation fee of RMB 4,600 (USD 668). Given the drastic differences in cost, it could be said that coming to CNU, China for MBBS was primarily a compromise made by a group of Indian doctor-aspirants who are academically excluded from state-subsidized medical education in India, and whose families could not afford local private medical colleges. My Indian informants typically described themselves as having come from ‘middle class’ family backgrounds, although perhaps ‘non-affluent middling class’ would characterize their positioning more accurately. Through visiting their homes, I found that their parents typically worked in petty civil service jobs, small trades, the service sector, and sometimes rural farming. In fact, a number of informants could hardly pool together enough cash to pay the pre-departure fees without their family taking out some loans, either from financial institutions or from social networks. Some students also have difficulties subsequently paying tuition installments on time in China.

One prominent way through which this state of compromise manifested was the manner in which the Indian students and their parents settled upon the destination country and institution. Contrary to an informed, calculative and careful decision-making process, choices were often made in a haphazard way, shaped by elements of chance and contingency. I remembered Tamil student Prakash’s words vividly – he told me that coming to China and CNU was totally a ‘blind choice’, because initially he was headed for Armenia (not a destination he knew much about anyway), but due to delays related to travel documents, the only place that was finally left for him to go was China and CNU, about which he knew absolutely nothing. He had his doubts, but if he was to cling to his hope of becoming a doctor, China and CNU was the only option. Prakash was by far not alone in this regard among the Indian students I met; most of them to some degree had made ‘blind choices’ insofar as they knew very little about their destination country, city and institution, and had few means of finding out. (Interestingly, parents’ involvement in their children’s study-abroad decisions were also minimal – a fact to be analysed in more detail under ‘complicity’.)

The Chinese college’s compromise

The Chinese institution offering Indian students the hope of becoming doctors had its own compromises. Despite being a decent university by domestic measures, CNU’s international MBBS program suffered from compromised admission screening and compromised quality in general. Dr Mei, a Chinese woman in her early 30s with a PhD in engineering from the UK who was in charge of CNU’s international programs, admitted to me that she had no way of ascertaining the caliber of the students sent her way by the Indian agency, ICME. ‘On paper, almost every student got “A”s and above 90 per cent for all subjects,’ she complained, ‘but if you look at them, you know straightaway they are not good [sic] students.’ In fact, Dr Mei was completely at a loss regarding India’s complex education system and certification nomenclature – ‘so whoever the agency sends, we grant admission’.

Dr Mei also revealed that up to a third of the MBBS students, mostly from India, could not pay tuition fee installments on time. As a result, she had to constantly chase for fee arrears, which was to her not only an irritating task, but also a crude reminder that this
so-called project of ‘higher education internationalization’ – in theory desirable for both the prestige and the fee incomes it was supposed to generate – was not quite what it might sound like. Dr Mei said ruefully,

We were just experimenting as well, and the CNU leadership currently is taking a dim view of the international MBBS program, because it’s not really generating the kind of reputational gains or financial gains that we were expecting; so… we might in time just let this program wither.

At the time this frank conversation took place, CNU had already been struck off the list of colleges eligible to run international MBBS degrees by the Chinese MOE – a fact that Dr Mei was surprisingly upfront about. She admitted to me that CNU had not been doing enough to ensure program quality, and even selflessly cautioned me against generalizing what I observed at CNU to other international MBBS programs in China.

The compromised quality of CNU’s MBBS program manifested in mundane yet sometimes unsettling ways. For example, according to informants of the 2013 cohort, seven students arrived from Bangladesh in May 2014 to commence studies due to excessive delays owing to troubles with travel documents. Despite having missed almost the entire academic year, these students were asked by CNU to join the cohort who arrived in December 2013 (which was itself a delay of three months), and to take final exams together with them in June. The Bangladeshi students were said to have been so lost and frustrated that they simply did not bother to attend any lessons. The qualification of the teaching staff was another issue. To compensate for the problem of Chinese teachers’ typically poor English communication skills, CNU and ICME hired several Indian-background instructors to contribute to teaching. As illustrated in the introductory ethnographic vignette, this led inadvertently to the alienation of international students from other backgrounds. Sometimes, as students also related to me, the instructors did not possess the appropriate teaching qualifications.

In sum, for tuition fee revenue and supposed prestige of ‘internationalization’, CNU compromised its admission standards to accept Indian students (among other nationalities) who were themselves operating on a logic of compromise due to their own circumstances. Meanwhile, due to resource inadequacy and lack of preparation, CNU was only able to offer an education of clearly compromised quality.

**Complicity**

Complicity lays the foundation for another discrepant logic, that of *complicity*. My use of the notion complicity draws from social anthropologist Steinmüller’s (2010) work on rural China, in which he defines a ‘community of complicity’ as one characterized by *shared embarrassing (self-) knowledge*. Steinmüller argues that the sharing of embarrassing (self-) knowledge reaffirms a sense of community membership and sociality amidst contradictions and social tensions.

I argue that the various parties to the India-to-China MBBS project can be regarded as forming a community of complicity of sorts. As I illustrate ethnographically below, complicity entails embarrassment that is mutually known, but unspoken to preserve the veneer of normalcy and respectability. Its ultimate aim is mutual accommodation and conflict avoidance.
**Between Indian students and CNU**

The delicate socio-psychological logic of complicity first struck me when I once criticized CNU’s poorly-run program in front of a few Indian students in order to elicit their response. Instead of joining me in criticizing CNU as I was expecting them to do, however, one student replied me with an ambivalent and sheepish smile – ‘In fact we are not top top students also, so we cannot have too much high expectation. They also know that, so they are also just … So we both are like that …’

The hesitation, inarticulacy, and ellipses in this student’s reply, together with his ambivalent and sheepish smile, betrayed a sentiment of embarrassment – an embarrassment that is perhaps best kept unarticulated, or one that may well be inarticulable. Although both Dr Mei and the Indian students displayed occasional traces of such embarrassment to me because of my identity as a transient outsider, between them the logic of unspoken complicity prevailed. Maintaining this complicitous silence helped them avoid situations of awkwardness and conflict where both parties could be greatly embarrassed or indeed provoked should their respective compromises be exposed.

I locate traces of such a logic of complicity in mundane aspects of international MBBS students’ academic and social life at CNU. For example, according to a number of students who spoke to me independently, prior to their semester-end exams, the teachers, especially the Chinese ones, would conduct ‘review sessions’ during which the exam questions would essentially be leaked out. This practice ensured that, despite the often problematic nature of teaching and learning in the program, most students still managed to pass exams and advance their studies. Another mundane example would be CNU’s turning a blind eye towards various things that are not supposed to happen, such as Indian students’ habit of cooking in their dorm rooms. Arguably, CNU’s egregious treatment of the seven late-arriving Bangladeshi students could also be interpreted as the former’s confidence in the complicitous relationship between the two parties.

**Between students and their parents**

Existing scholarship has portrayed affluent and middle-class Asian parents as savvy and highly involved in engineering their children’s overseas education projects (e.g. Ong, 1999; Waters, 2008). Again, the Tamil parents in my fieldwork transpired as a case of discrepancy. Instead of diligently gathering information and meticulously designing the educational trajectory of their children, the Tamil parents generally seemed content enough to know the simple fact that their financial support, however limited, is enabling their children to pursue an education somewhere – indeed anywhere – that could possibly lead to the prestigious medical career. Furthermore, while it would seem a natural and rational thing to do for these parents to make effort to know details of their children’s experiences of studying medicine in China and the subsequent career prospects, there seemed little communication between children and parents in this regard, and the parents exhibited little desire in inquiring about such. There was almost a sense in which having too much detail about what happens in the MBBS programs in China would risk complicating or even unsettling these non-affluent parents’ belief that they are doing their best for their children.

With reference to Jakimow’s (2016) recent work on lower-class Indians’ educational pursuit, I interpret these observations in terms of complicity between the students and
their parents. Interrogating the meaning of education for poor rural families in India, Jakimow writes, ‘even as hopes are seemingly unrealistic, their almost impossibility establishes an obligation for parents to invest in education to keep open the slim prospect of children achieving social mobility’ (p. 12, emphasis in original). She argues that, for people of the lower classes who perceive education to be the only way to realize the precarious hope of upward social mobility, it becomes a moral duty for the parents to provide their children an education, largely regardless of the plausibility and prospects of the educational project. Parents thus ‘go through the motions to give their children hope when they have none’ (p. 27; emphasis added).

If indeed Indian parents are ‘going through the motions’ to fulfill their moral obligations of providing their children an education regardless of the possibility of success, then, it seems equally valid to argue that the Indian students are obliged to keep to their side of the deal. Thus, when they accept the conditions of the CNU MBBS program they found themselves in (through ‘blind choice’) and continue with the program despite its problematic nature, they can be seen to be fulfilling their moral obligation to their parents, i.e. to pursue social mobility with parents’ investment in their education. In other words, the students in a sense also ‘go through the motions’ of studying regardless of the likelihood of success. As a result, none of my informants could bring themselves to disclose to their parents CNU’s disqualification by the Chinese MOE – a ‘heartbreaking’ fact (as one informant put it) that would rudely shatter both sides’ performances of their duties, owed to each other. To avoid such a crisis scenario, a complicitous silence and lack of detailed communication prevailed between the students and their parents.

**Between students and the educational intermediaries**

Lastly, a complicity also exists between the students and the educational intermediaries that facilitate their mobility – ICME and its local agent.

Set up in 2000, India–China MBBS Education (ICME) claims to be the pioneer in the field of sending Indian students to China for MBBS. According to ICME company brochures, over the 2004–2014 period, it sent a total of 3,464 students to MBBS programs in 16 universities in various parts of China. Among them is CNU, for which ICME has acted as the sole agent in India. Of all the foreign students CNU had taken in under its international MBBS program up to the time of fieldwork, 399, or over 80%, were Indian youths recruited by ICME.

Owned by Mr and Mrs Gupta (husband and wife), and with Mrs Gupta acting as the CEO, ICME is headquartered in Bangalore with a staff of about 20 people. There is also a small branch office in Kolkata, and another office in the southern Chinese metropolis Guangzhou run by the couple’s daughter. In India, ICME uses a field agent in each of the 21 states where they recruit students. The field agent is usually a resourceful local man, who is paid commissions by ICME. In Tamil Nadu, ICME’s field agent is Mr Rajiv, whom I met and interviewed in the town of Trichy. A semi-retired state enterprise employee, Mr Rajiv in fact used to be a customer of ICME, having sent his younger daughter to China for medical education in 2004. But his sharp business acumen prompted him to enter into agreement with ICME to act as a field agent the very next year after his daughter went. According to Mr Rajiv, students’ parents often approached him after having read ICME’s adverts on local newspapers or after word-of-mouth referrals. Admission is done strictly on a ‘first-come-first-serve’ basis, and interested students must pay up a ‘seat-booking fee’ of INR 50,000 (USD 770) before the process commences. For the 2014
cohort, recruitment was ongoing as I visited India in July. ICME had a total quota of 215 all over India, out of which 45 were allocated to Tamil Nadu. However, because exam results were released earlier in Tamil Nadu than most other states, 75 Tamil students had already paid the fee and booked their seats.

I found a complicitous cordiality and familiarity in the Indian students’ relationship with Mr Rajiv. When I visited Mr Rajiv’s office, which consisted of two rooms on the second floor of his three-storey house in a Trichy suburb, there happened to be, by complete coincidence, two students from CNU’s 2012 International MBBS cohort. Natives of Trichy, they were back in town for summer vacation, and happened to be hanging around at the office to kill time that afternoon. Despite these students, including the four juniors from the 2013 cohort who accompanied my India fieldtrip, being Mr Rajiv’s customers and having paid cash to him to end up in MBBS at CNU, the relationship between them and Mr Rajiv seemed very cordial and relaxed, middling between the friendly and the familial. As far as I could tell, there was no sign of tension or bad blood between them, even though the quality of the program at CNU and the student experience were known to all parties, as was the fact that CNU had recently lost its license. In fact, the students’ relationship with Mr Rajiv was comfortable enough for them to lounge about in the latter’s office. Clearly, this relationship could not be simplistically understood as a formal and legalistic one between customers and a service provider.

Between ICME and the students directly, there seems to be evidence that complicity overrides the legalistic transactional relationship too. As time went by and earlier batches of China-trained MBBS students returned to India to attempt the FMGE, it became widely known that some Chinese universities offered more rigorous programs than others, leading to higher chances of passing the exam. The most reputable Chinese university that ICME sends students to is one located in Guangzhou, and many students now approached ICME with the explicit wish of enrolling in this particular institution. When students failed to get their desired choice, thus, it became crucial for the agent to pacify them and persuade them of the merit of (usually less desirable) alternatives (such as CNU) in order to retain the students as fee-paying clients. Expecting some form of tension or conflict to arise in such a situation, I was surprised by how easy this persuasion was accomplished. At ICME’s Kolkata premises, I witnessed an ICME officer explaining to one student who failed to get a place in the Guangzhou program that the alternative he got was ‘even better’. The ICME officer cited the reason that the alternative university put a stronger emphasis on Chinese language learning and the Indian student was ‘guaranteed to gain a strong grasp of the language as a result’. Having previously heard time and again from Indian students at CNU that they found learning Chinese language incredibly difficult and a sheer waste of time because it was useless towards their medical educational objective, I was not expecting the student to accept this as a satisfactory answer. But he did. With a deferential shake of the head, he seemed more than ready to settle with the alternative and not to insist on the Guangzhou-based university any more.

**Conclusions**

Existing scholarship on ISM has often drawn on a Bourdiesian theoretical framework to analyse ISM in terms of capital conversion in the service of social class reproduction. This implicitly portrays educational mobility as a highly calculative and rationalistic
investment behavior pursued generally by privileged individuals and families. Even the few existing accounts of educational mobilities of less privileged youths have so far not looked beyond the developed West as mobility destinations. By investigating a discrepant case of less affluent Indian youths reading English-medium medical degrees at a provincial Chinese university, this paper shifts attention to an inter-Asian form of knowledge-seeking mobility that involves non-elite subjects – both academically and socioeconomically speaking – and non-elite institutions that lie outside the valorized Anglophone core spheres of global knowledge production and circulation.

Ethnographic data emerging from this seemingly ‘unlikely’ case of student mobility illustrates distinct and discrepant ways of enacting social aspiration and educational desire by the Indian youths and their families. Their behaviors and experiences seemed at times to border on the ‘irrational’ in light of conventional wisdom in existing scholarship, but I have tried to argue that these discrepancies should be understood as having social logics and rationales of their own. Specifically, the notions of *compromise* and *complicity* are used to describe and explain some of the mentalities, behaviors and social interactions of and between various parties to the India–China MBBS mobility case. ‘Compromise’ captures the very preconditions of this case and fundamentally underpins most actors’ behaviors. ‘Complicity’, on the other hand, sheds light on the ways in which this mobility project is held together and sustained despite its multiple inherent implausibilities, breakdowns, and sometimes failures. I do not claim that compromise and complicity are logic unique or exclusive to this case study – indeed the time-tested rationalistic ‘push-pull’ analysis (e.g. Mazzarol & Soutar, 2002) also reveals compromises in decision-making about international education, and some elements of complicity may well be present in the most elite forms of education. I merely suggest that compromise and complicity manifest so prominently in the present case study that they warrant theorization on their own. In the final analysis, the discrepant logics of compromise and complicity arise on the one hand as matters of pragmatism, but, on the other hand, they may also be interpreted as ingenious solutions devised by social actors who try to materialize their educational desires, social aspirations and organizational objectives amidst realities of class disadvantage and resource inadequacy.

More broadly, this exploratory ethnographic study intersects with and adds to the fast-evolving scholarship on student and knowledge mobility in several ways. First, through highlighting the problematic and sometimes unethical practices and behaviors of organizations and institutions hosting and facilitating knowledge mobility projects, this paper joins recent scholarship in thinking about the ethical and political implications when certain emerging forms of educational internationalization and transnationalization in Asia seem to produce ‘mediocrity’ (Phan, 2016).

Second, by dwelling on the uncertain and indeed precarious nature of the Indian youths’ educational endeavor in China, this paper has sought to underscore the possibly unproductive, even cruel, consequences of education as a ‘container of hope’ (Jakimow, 2014, 2016). Such awareness of ‘mediocrity’ and ‘cruel optimism’ (Berlant, 2011) as possible consequences of educational mobilities for certain social groups helps to disrupt and unsettle hegemonic imaginaries and narratives that fuel educational desires.

Thirdly, while it is clear that projects of migration and mobility rely heavily on elaborate physical, social, and institutional infrastructures (Xiang & Lindquist, 2014), to date there has been limited study of educational mobility infrastructure, especially regarding the roles
played by educational intermediaries (but see Collins, 2012). This paper takes a step towards filling this research gap by offering ethnographic descriptions and analysis of the social infrastructural enablement (e.g. ICME and its field agent) as well as constraint (e.g. CNU’s resource inadequacy) that shape the lived experiences of knowledge mobility at the present moment.

Finally, echoing the overarching argument of this special issue, I stress that ‘discrepancy’ – whether in terms of discrepant experiences or logics/rationailties as I describe them in this paper – are not to be understood simplistically as outside or contradictory to the dominant formation. Instead, discrepancy stands in relation to the dominant. Indian youths studying MBBS in China, in many ways, are emulating more elite forms educational mobility and the underlying logics, driven by the social aspiration and desire for the human subjectivities and trajectories characteristic of the ‘elites’. However, as Jeffrey and Mcdowell (2004) presciently pointed out more than a decade ago: ‘as Western ideals of youth transitions have been exported outside Euro-America, it has become increasingly difficult for young people in Third World setting to emulate these ideals’ (p. 137). This paper captures some of the ways in which global structures of power and resource inequalities continue to produce differential experiences and outcomes for youths differently situated in terms of both geography and social class.

Disclosure statement

No potential conflict of interest was reported by the author.

References


