Contradictory Mobilities and Cultural Projects of Afropolitanism

African Immigrant Nurses in Vancouver, Canada

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Abstract: I explore the relationship between social class and race, through an examination of how Black nurses enact Afropolitan cultural practices to negotiate contradictory class mobilities in Vancouver. While this paper reflexively draws from my family's lived experiences to begin thinking through the nuances of Afropolitanism, I hone the discussion in contextual reference to the class-making practices of African-born nurses. The nurses channel Afropolitan class-making projects, through which they develop a flexibility and openness of mind that enables them to reject taking on the role of victim in their contradictory mobilities. Afropolitanism refers to "an expansive politics of inclusion that seeks to position actors as part of a transnational community of Africans of the world" (Adjepong 2021, 1), to "imbue Africanness with value" (137). Merging the literature on anti-Black racism in nursing with scholarship examining relationships between social class, race, and culture, this paper draws out the promises and pitfalls of Afropolitanism through an exploration of how African immigrant nurses—part of a growing Black Canadian middle class—grapple with contradictory mobility in Canada's racialized terrain. It contributes to discussions of the Black middle class, in the context of a "relative newness of Black middle classes" (Rollock et al. 2012, 253).

Keywords: Black African immigrant nurses; Afropolitanism; cultural projects and class-making practices; contradictory mobilities; social class; race

Résumé : J'explore la relation entre la classe sociale et la race en examinant la manière dont les infirmières noires adoptent des pratiques culturelles afropolitaines pour négocier des mobilités de classe contradictoires à Vancouver. Bien que cet article s'inspire, selon une approche réflexive, des

expériences vécues par ma famille pour commencer à envisager les nuances de l'afropolitanisme, j'affine la discussion en me référant aux pratiques de création de classe des infirmières d'origine africaine. Les infirmières canalisent les projets de création de classes afropolitaines, à partir desquels elles développent une flexibilité et une ouverture d'esprit qui leur permettent de rejeter le rôle de victime lors de leurs mobilités contradictoires. L'afropolitanisme se réfère à « une politique d'inclusion expansive qui cherche à positionner les acteurs comme faisant partie d'une communauté transnationale d'Africains du monde » (Adjepong 2021, 1), pour « conférer une valeur à l'africanité » (*Ibid.*, 137). En combinant la littérature sur le racisme anti-Noir dans les soins infirmiers et les études sur les relations entre la classe sociale, la race et la culture, cet article met en évidence les possibilités et les obstacles de l'afropolitanisme, en explorant la façon dont les infirmières immigrantes africaines, qui font partie d'une classe moyenne noire canadienne en plein essor, sont aux prises avec une mobilité contradictoire sur le terrain racialisé du Canada. Il contribue aux discussions sur la classe moyenne noire, dans le contexte d'une « relative nouveauté des classes moyennes noires » (Rollock *et al.* 2012, 253).

Mots clés : Infirmières immigrées noires africaines ; Afropolitanisme ; projets culturels et pratiques de création des classes ; mobilités contradictoires ; classe sociale ; race

Reflections and Recollections

It has been nearly 20 years since we landed at the Ottawa Macdonald-Cartier International Airport. My family, Kenyan immigrants with landed permanent residency in Canada, were the dependent applicants under the sponsorship of my father, a plant molecular geneticist trained in the United Kingdom. Prior to my family's migration to Canada, my uncle, an impressionable man in his mid-sixties known for wit and ominous humour, predicted the inconsistencies my family would face ahead. In his admonition, my uncle suggested that migrating to Canada meant abandoning a sense of security and status offered by professional occupations, warning this would dislocate us psycho-socially, if not materially and financially.

With a sense of humour that infused everything he did, my uncle retold his usual run-of-the-mill joke that we would be abandoning good jobs in place of a precarious life of work he pejoratively termed "professional bottom cleaning." Despite the ill-suited quip, my uncle applied the term professional bottom cleaning as a proxy to the devalued work and working conditions historically

relegated to racialized bodies in Western countries, regardless of skills training or professional qualifications.

Several months after arriving in Ottawa, and true to my uncle's predictions, I would watch as my mother, a trained clinical psychologist, took up work as a Personal Support Worker in a retirement facility in the downtown area. In turn, my father settled for a post-doctoral fellowship to work with a research scientist based at a university in Quebec, a far cry from the executive administrative position he had been shortlisted for at a university in Ontario fell through. While the socio-economic returns on my mother's back-breaking work paled in comparison to my father's potentially prestigious but, ironically, precarious academic status, both trod a well-worn path of downward social mobility faced by Black and other racialized immigrants to Canada (Block et al. 2019).

In Canada, the downward trajectory of the socio-economic status of Black African immigrants paradoxically coincides with their upward trends in educational levels (Block et al. 2019; Creese and Wiebe 2012). To cope with this contradictory class positioning, my family leaned in on my father's optimistic but perhaps overused life philosophy: "Every constraint is an opportunity." Despite its possible misuse, this saying not only helped rationalize the "survival jobs" we took up as a pragmatic recourse for acquiring what we heard referred to as the "Canadian experience" (Creese and Wiebe 2012), but also enabled us to adopt a "diaspora consciousness" through which we negotiated the daily discontents of our downward social mobility (Mensah and Williams 2015).

Mensah and Williams (2015) define diaspora consciousness as the "refusal of fixity" (40), which they describe as the ways in which immigrants adopt mentalities of "being double" (39) to navigate ties between their homelands and host lands. Reflective of these multiple lenses, the concept of diaspora consciousness symbolizes the intentional awareness and mentality immigrants adopt to navigate the fixities that constrain and restrain them from success. In my family's case, for instance, while insecure employment and encouragement from social networks impressed upon us the need to find alternative forms of work, adopting a diaspora consciousness helped us stay the course.

While my mother actively made plans to follow in the footsteps of the countless family and friends in nursing and other care-related programs, my father took up an ever-expanding line of contingent research assistant roles. In line with these realities, not only did adopting a diaspora consciousness enable us to make sense of the survival jobs we took up, but also facilitated our ability

to enact the refusal of fixities that racialize and suppress Black bodies in "ways that place firm limits on their integration within societies of the north" (Mensah and Williams 2015, 40).

Introduction: Contradictory Mobilities

In this paper, I describe the refusal of hegemonic fixities that position Black African immigrants as outsiders of their social class, as an "[affirmation of] hybridity and seamless movement through different spaces" (Adjepong 2018, 3) and characterize these contestations as Afropolitanism. I borrow from Eze (2014), who, analyzing the cultural and economic consequences of globalization, re-examines shifts in notions of African identity from a cosmopolitan context, defining this moment as a "detachment from the bonds of nation-bound, culture-bound lives" (241). Relatedly, my discussion is also informed by Adjepong's (2021) characterization of Afropolitanism and its cultural projects, which they define as, "an expansive politics of inclusion that seeks to position actors as part of a transnational community of Africans of the world," to "imbue Africanness with value" (137).

Motivated by access to networks in the healthcare sector—a part of the service economy known for its overrepresentation of Black women (Houle 2020)—I explore the relationship between social class and race, through an examination of how African-born Black nurses enact Afropolitan cultural projects to negotiate their contradictory class mobilities in Vancouver. While the paper reflexively draws from my family's lived experiences to begin thinking through the nuances of Afropolitanism, I hone the discussion in contextual reference to the class-making practices of African-born nurses in Vancouver. As licensed professionals, I view the African immigrant nurses in this study as a sample of the Black middle-class professional, understanding their labour migration and integration in Vancouver as a signifier of their social mobility and middle-classness.

The nurses channel Afropolitan cultural projects and class-making practices by developing a flexibility and openness of mind that enables a favourable acceptance of their negative encounters, rejecting to take on the role of victim in their downward social mobility. Relying on their cultural capital, these nurses undertake Afropolitan class-making projects that include carrying out codes that signal middle-classness. In these projects, the nurses regulate their behaviour by staying polite, non-confrontational, and not being defensive or loud, as strategies to distance themselves from stereotyped images of Black

deficiency and ineptitude. While the nurses are constrained in their efforts to transcend the limitations of their socially constructed boundaries, they nevertheless show agency in opposing mainstream understandings that limit middle-classness as a recluse for white, "standard" English-speaking suburbanites (Rollock et al. 2012).

Conceptual Framing and Situating

African immigrants in Vancouver make up a relatively small but heterogeneous sub-group of Black Canadians. Of Vancouver's overall population, 41.7 percent identify as "people of colour," but only 1.3 percent identify as Black (Statistics Canada 2016). At an approximate total number of 29,830, the experiences of Black Canadians in Vancouver differ from those in cities such as Toronto, Montreal, and Halifax, which have a strong political and community presence (Kihika forthcoming). Because of their small population size, Black Canadians in Vancouver remain under-researched.

Moreover, scholarship on anti-Black racism in nursing has tended to focus on experiences among Black Caribbean nurses, particularly in Ontario and Quebec, where a relatively larger number of Black Canadian immigrants predominantly settle (see Calliste 1996;Cooper Brathwaite et al. 2022; Das Gupta 2009; Hagey et al. 2001), and in Nova Scotia with its distinctive role in Black Canadian history (see Etowa et al. 2009; Flynn 2011; Jefferies et al. 2022). In British Columbia, De Sousa et al. (2023) highlight the historical contributions of Black nurses predominantly from the United States and the Caribbean between 1845 and 1910, while Kihika (forthcoming) examines how systemic barriers located within the historical context of a racialized Canadian state policy continue to characterize the realities of African immigrant nurses in Vancouver in contemporary times.

With African countries now a steadily primary source of Black migration to Canada, I extend these works by examining how African-born Black nurses in Vancouver, a sample of the Black middle-class professional, enact Afropolitan cultural practices to negotiate their contradictory mobilities and re-assert their middle-classness. Although scholarship has looked at how the Black middle-class experience race in public spaces in America (see Lacy 2007; Pittman 2020) and as professionals in England (see Rollock et al. 2012), little has been said about the Black middle class in Canada particularly as it pertains to rapidly rising groups of African immigrant professionals (Statistics Canada 2016).

Merging the literature on anti-Black racism in nursing with scholarship examining relationships between social class, race, and culture (see Moore, 2008), this paper examines how African-born nurses—part of a growing Black Canadian middle-class—negotiate contradictory class mobilities through a cultural politics of Afropolitanism. The paper contributes to the larger discussion of the Black middle-class, in the context of a "relative newness of Black middle classes" (Rollock et al. 2012, 253).

As a central premise, my paper suggests that the class status of racialized migrants in the host land often differs from that in the homeland, resulting in their experiencing a contradictory class mobility, which Parreñas (2001) describes as, "the simultaneous experience of upward and downward mobility in migration" (150). Basically, while the financial status and living standard of migrants in host countries are likely to increase, their social status often declines due to isolating encounters that result in their sense of social dislocation.

I use the term "performing professionalism" in proximity to the concept of "professional distancing" (Showers 2015). According to Showers (2015), West African nurses in the United States craft and manage their professional identities as nurses by purposely distancing themselves from fellow West Africans and African Americans. These nurses practice professional distancing to dissociate from compatriots they argue do not exude the desired professional characteristics, or to gain an upper hand in the case of "employer preference for immigrant Blacks as opposed to African Americans in professional contexts" (Showers 2015, 1816).

Despite their efforts, Black middle-class attempts to reduce "status misrecognition" (Pittman 2020) and anti-Black bias (Rollock et al. 2012) rarely act as a buffer for poor treatment, which is attributable to social structural organization (De Sousa et al. 2023). On this basis, while Afropolitanism's racial politics critically carve out space for hybrid African identities, its class politics remain inattentive to the structural privileges of wealth and the systemic disparities it reinforces (Adjepong 2021).

To this effect, critiques of Afropolitanism argue that, at best, the unconstrained mobility associated with the term is the "sole province of an elite class... while Fortress Europe [or North America] builds its walls against most of the continent's inhabitants" (Ho 2021, 770). At worst, detractors indict the term as the latest in a slew of branding efforts intent on repurposing elite and middle-class Africans who portray, "just enough of Africa ... but not so much as to be *too* 'African'" (Musila 2015, 110).

The Politics of Afropolitanism

I employ the concept Afropolitan in reference to an African belonging to the world (Ede 2016; Eze 2014). By extension, borrowing from Mbembe's (2017) more elaborate formulation, Afropolitanism is "a way of being in the world, rejecting on principle any identity based on victimhood" (106). The concept of Afropolitanism is made possible by a postcolonial and contemporary global era that offers a cultural and aesthetic space in which a "hybrid, modern, transnational African 'self' can thrive" (Adjepong 2018, 248).

Explicit in these definitions is an emphasis of the Afropolitan as an African with access to geographic and social mobility as avenues of Black political agency. Black political agency is enabled by the cultural projects of Afropolitanism that complicate and resist hegemonic formulations of Blackness. In essence, the Black political agency afforded by Afropolitanism represents a countering epistemology that resists Western misrepresentation of the African sense of self and world (Ede 2016). Despite its optimistic potential, the politics of Afropolitanism are not without dispute.

On one end are scholars who praise Afropolitanism as a "rejection of the stereotypes and assumptions attached to African identity" (Adjepong 2021, 4). This scholarship sees Afropolitanism as an empowering conceptualization of Africa and the African Diaspora, in the context of a new global political economy that affirms possibilities and hybridity (see Eze 2014; Gikandi 2011; Mbembe 2017). On the other end are scholars who dismiss the term as overly commodified and simplistic for its association with Taiye Selasi's (2005) initial characterization. These critiques depict Selasi, a famed writer and self-described local of Accra, Berlin, New York, and Rome, as characterizing Afropolitans as the domain of "globetrotting, mixed-race Blacks and 'newly diasporized' Africans ... whose self-perception transcends geographies, nationalities, languages, or time-zones" (Ede 2016, 89). To be succinct, these scholars denounce Afropolitanism as a culturally commodified identity (See Adjepong 2021; Dabiri 2016; Musila 2016).

Nonetheless, opponents agree not to throw the baby out with the bathwater by accepting that Afropolitanism may prove to be a fruitful cultural instrument of Black political agency—if it remains unseduced by the single story of "progress" as defined by the capitalist culture of consumption (Dabiri 2017). Fundamentally, however, these opponents see beyond the celebratory veneer of Afropolitanism and shun the term as a subjective, individualistic position

that affirms only the Afropolitan cultural producer who holds symbolic and representational capital.

In effect, those who challenge Afropolitanism denounce it as a short-sighted, neoliberal ideological tool that reproduces the marginalization of Black immigrant populations and diasporas, reinforcing societal stratification. These critics caution that the individualistic self-empowerment of the socially mobile globetrotting Afropolitan subject ironically transforms into "a cultural negation of group agency" (Ede 2016, 90), in the sense that the Black population and diaspora do not collectively hold similar symbolic capital of social class mobility. Overall, the promises and pitfalls of Afropolitanism polarize on the lines of race and class.

Musila (2016) lightheartedly highlights this polarization by likening the pairing of African and cosmopolitan—this global African by another name—to a Coke Lite or a lite beer, suggesting that "Afropolitanism seems to promise Africa Lite: Africa *sans* the 'unhealthy' …baggage of Africa" (2015, 110). Referring to Africa Lite as a form of "strategic exoticization," Musila (2015) argues that the desire to strike a "just enough of Africa," not only indicates prevailing anxieties about Africa (115) but also conveys tensions of Afropolitanism as "a mode of integration into a mainstream that …remains uneasy with cultural difference" (111).

In effect, the class binaries that structure the politics of Afropolitanism do not adequately capture the multidimensionality and "complexity of social class as lived experience and aspirational identity under globalization" (Ho 2021, 771). Afropolitanism does not definitively distinguish binaries such as those between the elite versus impoverished, and the diasporic versus continental Africans. Rather, as a cultural discourse of the political-economic conditions of capitalist globalization, Afropolitanism provides "representational texture to variegated social identities … and participates in the production of class through signifiers of status…" (Ho 2021, 771).

Drawing from a Bourdieusian conceptualization, Ho (2021) reminds us that capital goes beyond material wealth and is constitutive of the habitus of social class. In other words, class has economic, cultural, and social elements. This point is not only significant for its emphasis on class as a signifier of status, but also as a relational marker of differentiation. As relational markers of difference, class, like race, and other social constructs, are not "objective groups simply 'out there' to be empirically classified…" (Ho 2021, 771). Instead, social classes are "produced and contested in the field of representation" (Ho 2021, 771) and in "the

symbolic work of the fabrication of groups, [and] group-making" (Bourdieu 1987, Cited in Ho 2021, 771).

In this relational context of making and re-producing class, the tensions symbolized by global political-economic regimes underscore the realities of labour migration as a "process of engagement rather than escape" (Brigham 2015, 71). As a process of engagement, labour migration and social class mobility represent the transgression of socio-cultural histories, and the negotiation of pre-existing cultural and political spaces. To this extent, mobile subjects invoke and reimagine practices of social mobility and integration as processes for transforming subjectivity and space.

Effectively, troubling historical-cultural and political-economic frameworks enable mobile subjects to renegotiate and reconstruct socio-cultural spaces otherwise characterized by exclusion. However, while the new global political economy enables the renegotiation of socio-cultural spaces, it also unsettles social categories. These dynamics not only highlight the fluidity of class and race as intersecting categories, but the tensions brought about in the wake of global social transformations. In my family's case, for example, the tensions between our aspirations and "failure to belong" (Coe and Pauli 2020, 4) explicate the contentious political-economic histories we embodied and the global forces we grappled.

This politico-economic formulation reveals the endurance of global social structures and power relations, and their capacity to replenish themselves by reproducing uneven forms of social mobility, epitomized by subjects' "bodily capacities"—including class, gender, race, and ethnicity (Adey 2013, 14). Understanding the complexity and relationality of these constructs not only elucidates the "recognition that mobilities are always multiple and differentiated" (Adey 2013, 14), but also clarifies the epistemological challenge of how individuals "get 'a grip' on a highly differentiated mobile world" (Ibid.).

On contentious Locations

There is no standard immigrant experience or identity because gender, race, ethnicity, class, age, and other socio-political contexts differently shape everyday realities. To illustrate the uneven outcomes of economic migration as an element of social mobility, Creese (2011) draws comparisons between the near seamless account with which her own white immigrant family from the United Kingdom settled into Canada and, the profound dislocation experienced by

African immigrants. While this British family's immigrant background was visible, Creese (2011) notes that neither their London accents nor white skins proved a barrier to anything, citing the ease with which they settled as explicitly determined by their ethnic and racialized origins.

Contra to the minimal dislocation faced by white European immigrants in Canada, Black African immigrants traverse psychic, social and cultural borders as they engage in a lifelong process of negotiating "the very borders of 'Canadianness'" (Creese 2011, 4). Creese (2011, 5) associates the contrasting experiences immigrants face with the shifting terrain of Canadian immigration policies, declaring these a rethinking of "the kinds of bodies that migrated to Canada in different time periods" (5), in strategic alignment with a globally competitive labour market. More recently, Canada's relative change of heart from a history of exclusionary policies that preferred immigrants from Western Europe to those from previously "non-preferred" parts of the world, complements the nation's interest in population growth and increased production to secure its place in the global competition.

Although contemporary Canada now redefines itself based on multiculturalism and respect for cultural difference, these discourses are "superimposed on a white 'imagined community' that privileges 'difference' over substantive equality and anti-racism" (Mackey 2002, 16). To be clear, capitalist Canada's nation-building project remains fundamentally embedded in images of whiteness, maintaining a racialized hierarchy that continues to materially disadvantage Black, Indigenous, and other non-white people.

In these dynamics of racial capitalism, Black immigrants are deciphered through the lens of a hegemonic discourse of Blackness that renders them contradictorily hyper-visible and invisible (Creese 2011). The contradictory logics of this racialized social geographic paradigm are manifested in the ways in which Blackness is suppressed for its hyper visibility, and unrecognized for its invisibility. Thus, despite demographic changes reflective of immigration policies that claim to be attentive to diversity, where someone comes from still matters and continues to shape experiences of social mobility.

Anti-Black Racism in Nursing

As discussed earlier, while my uncle predicted the labour market devaluation and status paradox my family would experience, these issues long preceded our arrival in Canada. Historically, Black immigrants are overrepresented in

employment that is peripheral to the primary economy, largely situated in service-oriented labour (Creese 2011; Houle 2020). In healthcare, for instance, despite their citizenship status or educational achievement, Black females make up 33 percent of the workers, compared to 21 percent of the general female population (Houle 2020). In nursing, more specifically, a professionalized field where workers reportedly enjoy higher status and prestige than in other service care work, such as home care-aides, data indicates Black nurses are underrepresented in leadership and in specialized care positions (De Sousa et al. 2023; Jefferies et al. 2018; RNAO 2020).

Conversely, Black nurses are overrepresented in non-specialty areas considered the occupational ghettoes of the profession (Jefferies et al. 2018; Kihika forthcoming; RNAO 2020). These practices create a racialized Black nursing workforce that describes, as Etowa et al. (2009) caption, "surviving on the margins of a profession." Established as a white, middle-class, female occupation associated with respectability and purity, the archetypical Victorian ideals of "true womanhood" historically associated with nursing (De Sousa et al. 2023) not only excluded Black women (Flynn 2009), but also continue to dictate who is perceived as a real nurse (Das Gupta 2009).

Thus, in the context of a labour market historically segmented along racialized, gendered, and classed lines—that intersect with other forms of oppression—Black nurses are made readable through discourses of Blackness which position nurses, supervisors, and managers as aides to white nurses who are considered the real nurses (Das Gupta 2009). This ideology of real nurses versus Other perpetuates Black nurses as subordinate, inferior and less valuable regardless of their professional training or experience. Below, I discuss the empirical findings of my research to contextualize how Black nurses engage in Afropolitan class-making projects, as they negotiate their contradictory mobilities and reassert their professionalism and middle-classness.

A Methodological Note

The findings in this article are drawn from a feminist autoethnography conducted from June 2013 to June 2014. Feminist autoethnography is a methodology and analytical framework that supports the study of social life in socio-cultural contexts "… using the self as an instrument of knowing" (Ortner 1995, 173). Relying on a participatory-immersion approach, I attended African community events in Vancouver where I made observations and recruited participants with whom I conducted semi-structured interviews. Driven by

Black feminist sensibilities that centre Black women's realities and knowledge, I attended these events as both researcher and participant to carve out the analytical frameworks shaping the social context and material life of "our" locations (Wane 2009; Wane and Massaquioi 2007).

I recruited five Black African immigrant nurses. Four of the nurses were female, and the fifth was a male nurse who was selected for purposes of drawing out comparisons. Three of the female nurses worked in the ICU departments of three separate hospitals, while the fourth worked in the pediatric unit of another hospital. The male nurse worked in the Emergency Room (ER) of one of the local hospitals. The nurses had migrated from various African countries: Kenya, Nigeria, Zimbabwe, Somalia, and Eritrea, and had lived in Canada for periods ranging from three to twenty years at the time of the interviews. Participants varied in age from 30 to 55 years old. Three of the five participants had moved to Vancouver from other Canadian cities, and all five had lived in a different host country before settling in Canada.

Although the nurses in this study self-identified as African immigrants, Black feminist theory questions identity as a choice that is "fully 'ours' to make," arguing there is "conflict between the frames one uses to define oneself and the frames society uses to define them" (Wane 2009, 150). Underscoring this Black feminist premise of the complexities that shape identity, I refer to the participants as Afropolitan subjects, underlining that despite their being typecasted in limiting frames, the nurses question and subvert fixities that suppress their identity as middle-class professionals (Rollock et al. 2012).

Making Meaning: A Theoretical Framing

I suggest that the favourable acceptance of the negative experiences of downward mobility expressed by my family and the Black nurses in this research—through Afropolitan cultural projects—may perhaps be interpreted as a portrayal of the good immigrant in contrast to the ungrateful immigrant (Wilson-Forsberg et al. 2020). This notwithstanding, I ask, just as Turrittin et al. (2002) ask: how do we understand racism in the emotional cool of those who simultaneously name it and aspire for better futures?

To ponder this, Thorkelson (2016) compels us to critically think beyond the politics of concepts and consider their politically unconscious function. In effect, Thorkelson's political-economic framing urges us to reflect on the straightforward but profound likelihood that people may not want to identify

as precarious or victimized, granted the political implications of being a victim. Thorkelson (2016, 475), therefore, asks us to assess: "What are the politics of precarity? Who gets to invoke the concept and when? What if precarious others do not want to identify as precarious?"

While Thorkelson's discussion is in reference to the political concept of precarity—with a specific focus on the functions of its *political unconscious* (emphasis added)—I argue that this analysis raises similar questions about race and class and, in the process, troubles racism and other othering processes. Like Thorkelson (2016), therefore, I urge the rhetorical questions: "What are the politics ... [of race and racism] who gets to invoke these...and when..." (475). These questions provide revelatory insights that suggest that although Black nurses—like my family had—articulated the contradictory mobilities they faced, they were less interested in identifying as precarious or as victims of racist and classist practices.

Perceptions of Anti-Blackness

This was the case with Ekinya, an ICU nurse in her mid-fifties who was originally from Kenya, whom I interviewed one evening in May 2014, when she recalled the first time a patient coded under her care. Coding refers to critical medical emergencies that result when a patient suffers from possible cardiac arrest. As part of the required level of care for coding patients without a do-not-resuscitate decision, Ekinya had gone to turn on the defibrillator:

> I went to turn on the defib [defibrillator] because I needed to defibrillate this person. All of a sudden, I heard, "Hey! What the heck are you doing? Don't touch it! Do you have that in Africa?!"

In a similar account Eli, a senior pediatric nurse who was also originally from Kenya, shared her bewilderment in an encounter where a supervisor had overlooked her for a patient care coordinator position and awarded it to a junior nurse she had trained:

> I had an instant where our patient care coordinator was away, and I was the next senior nurse on the line, and yet a junior nurse was asked to step in for her, while it should have been me stepping in for her. So, again I had to question that decision.

Similarly, Konene, a male nurse from Nigeria working in the ER, described how a trauma nurse attempted to pass him over from attending to a case that his colleagues were called in to help with:

> ...the trauma nurse goes: "Okay. You, you, and you go in. You [referring to Konene] I don't know if I should let you go in because I don't know if you know what you are doing."

In addition to the incident above, Konene also shared the following encounter he had with a patient:

> This one time, I was about to assess a patient. Patient was in pain, and I was about to give him some narcotics, and the patient says to me, "Can I just get another nurse? Nothing against you but can I just get another nurse?" Then he asked me, "Do you know what you're doing?" Like, "Did you go to school for nursing..."

In the cases cited above, Black nurses endure isolating and humiliating experiences as colleagues, supervisors, and patients challenge their professional credibility and competency. Specifically, the ICU nurse is publicly shamed for attempting to use the defibrillator on a coding patient under assumptions that, as a Black African woman, she is unfamiliar with medical technology: "Do you have that in Africa?!"

Similarly, the senior pediatric nurse is passed over for the patient care coordinator which she describes as a desired position since it entails administration rather than bedside care. Likewise, despite the impropriety, a trauma nurse jokingly conveys that Konene is not qualified and openly considers bypassing him from a work opportunity, sending an implicit message that the peers who are selected are better equipped—real nurses—whereas Konene is not. Here, Konene's experience is nearly identical to that cited above in which a patient discounts his expertise as a nurse.

In addition to his being Black, Konene's experiences, where a colleague and a patient both imply that he is unqualified to work, may also be attributable to his being male in a historically gendered and racialized occupation that is predominantly female. Konene's experiences show us how gender and race, as intersecting axes of oppression, operate simultaneously and reinforce one another to discount his being a "real" nurse.

Without a doubt, Black nurses were qualified for the respective roles they were obstructed from participating in. Ekinya, the ICU nurse, described her expertise using the defibrillator as follows:

> I taught stations during our ACLS practices [Advanced Cardiovascular Life Support] in the hospital because I used to be a preceptor too. I

taught this thing inside out. I knew it blindly and could tell you which button does what.

Equally skilled, Eli the pediatric nurse highlighted her competency, questioning the supervisor's decision to overlook her:

"Why is she doing it and I can do it?" Really better than her because I have worked here longer, and I know the ins and outs and I have a better understanding than her. I trained her!

Konene also unequivocally asserted his qualifications: "Yes. I went to school for nursing. Four years of nursing school…"

Although nurses described episodes in which supervisors bypassed them for opportunities while colleagues and patients undermined their professional skills, they rejected interpreting these negative encounters as racial discrimination. In my speculations, I came to understand the nurses' responses as a mechanism of self-defence that enabled them to persevere or, as Konene, the male ER nurse, had summed up, "keep keeping on."

Even though nurses declined to label the negative experiences they shared as being racist like in the case of Eli, the pediatric nurse who argued, "racism is a strong word," they were keen to highlight the strategies they relied on to negotiate these recurring events. Eli, the pediatric nurse, for instance, spoke of staying professional, and not "[seeing] the need to dwell too much on the why," while Sisane, an ICU nurse, emphasized the " need to be qualified and to work hard," as Faha, who also worked in the ICU, suggested "not to let your own personal insecurities—what it means to be Black—interfere," because "it's not a colour … or a race thing."

Politicizing the Political Unconscious

Rather than view these nurses'—or my own family's—often favourable interpretations of contradictory mobilities as driven by a false or weakened consciousness, I see them as strategic understandings motivated by Afropolitanism, underpinned by a critical ideological perspective of race and social class as political concepts. In this undertaking, I think along the lines of Thorkelson (2016), whose study of the politics of concepts examines their functionality as othering categories in a context where Othered groups do not want to identify with the baggage of being labeled Other. As Thorkelson (2016, 475) suggests, while political concepts work as "a category of otherness … covertly fulfilling political functions" (475), they also offer spaces of possibilities

and negotiation "beneath [their] seemingly straightforward empirical and moral surface".

In this respect, politicizing concepts as othering systems and processes demystifies their avoidance, as they are elucidated as "othering categories that create a social place that is abject and difficult to identify with…" (Thorkelson 2016; 481). To this point, the fact that the nurses readily described their negative experiences but rejected framing this as part of the structural racism that victimized them shows their responses as an intentional and willful resistance against the politically unconscious function of the concepts of race and class—as systems that Other—and an opportunity for their strategic repositioning.

For instance, although Eli, the senior pediatric nurse, shares that she was overlooked for a patient care coordinator position, which led her to wonder: "Am I being treated like this because I'm Black?" she nevertheless argues: "I wouldn't call it racism or discrimination. These are strong words…" Similarly, while Faha, the ICU nurse, voiced her annoyance at nursing student peers who "would say… when are you going to have more attitude and get ghetto," she discounted experiencing racism, declaring, "I'm thinking of a better word." In these politicized formulations, Black nurses drew on Afropolitan sensibilities to enable oppositional frameworks through which they challenged their subaltern position, reclaiming their sense of self as empowered middle-class professionals on their own terms.

In determining their terms of belonging, Afropolitan subjects vie for a seat at the table of the global middle class by drawing on social and cultural capital that demonstrates their status in the world as the "same as anyone…" (Adjepong 2021, 158). As "cultural brokers" or "cultured people" (Ede 2016), Afropolitans leverage their belonging to the world by forming a cultural politics that is paradoxically informed by discourses of Blackness, and the post-racial logics of post-coloniality (Adjepong 2021).

In these political contexts, nurses confront their contradictory mobilities by affirming their racialized Black African identities while simultaneously and conversely engaging in post-racial colour-blind logics. For example, having successfully challenged the supervisor's decision and been re-assigned the care coordinator position, Eli explained that although she did not find any reason to probe her experience further, she did at the back of her mind wonder why it happened:

... as a professional, I didn't see the need to dwell too much on the why. It was mostly, "This is happening. It's not right. Look into it!" She looked into it and it was reassigned. I didn't push further. I just kinda left it at that, but I did, in the back of my mind, wonder why... Is it because I'm Black?"

Not only does Eli identify as a professional, she also associates her professionalism with the reason why she "didn't see the need to dwell... ." However, that Eli "did, in the back of my mind, wonder why..." shows us the contradiction that exists between her awareness: "Is it because I'm Black?", and the indirect colour-blind logics compelling her to brush this off with: "...kinda left it at that" as if to undermine the experience or "need to dwell ... ."

In a similar occurrence, although Faha recognizes the systemic nature of racism, saying: "I know I can't change the world and its constructs," she later individualizes this: "... but I know what I can change is myself...," arguing: "I put the onus on myself ... what can I do to achieve what I want... ." More concisely, Faha states: "I don't think my being a Black woman in any way prevents me from those 'I think if I want to, I can,'... it's not a colour thing or a race thing." Like Eli mentioned earlier, Faha's assertions indicate that while she recognizes the material effects of systemic racism in the lives of Black nurses, she also contradictorily maintains colour-blind logics that suggest "it's not a colour thing or a race thing."

Rather than being confrontational, Black nurses adapted these diplomatic stances as a measure of professional demeanour. While Eli, the pediatric nurse, resolved not to "dwell too much on the why... as a professional," Ekinya, the ICU nurse, argued professionalism enabled her to "...ignore...completely... that kind of attitude," pointing out that "communication ... becomes purely professional... ." As Ekinya described:

When I realize someone has that kind of attitude, I ignore them completely. I do my work. Communication between me and this person or family becomes purely professional. In fact, this is how I put it: "I'm going to give you this medication. This is Metoprolol. It is a beta blocker that will help you slow down your heart rate and reduce your blood pressure. It is used to manage angina and hypertension." I speak to them like I'm teaching them something. I put it in a way that they'll understand that I know what I'm talking about. I just have to show them that I know what I'm doing. I went to school!

Although referring to "… that kind of attitude" suggests that Ekinya experiences racism, she nevertheless refrains from naming this encounter, explaining this as a decision that is determined by her professionalism: "communication between me and this person or family becomes purely professional." However, while performing professionalism enables Ekinya to reject and avoid being the victim of racism, her role as a professional also leads her to leaving racism unnamed, only referring to it ambiguously as "that kind of attitude." Responding to "that kind of attitude" by "[ignoring] them completely," Ekinya turns a blind eye to the perpetrator and to the racist encounter at a significant social and political cost.

The hesitation of Black nurses to name racist experiences shows us how the status quo subjugates by normalizing one-sided requirements for tolerance and politeness, presented as normative standards of professionalism in the workplace (Essed 1991). Importantly, these subjective experiences reveal the insidious nature of racism in Canada's liberal multiculturalism society (Kihika 2022), as a function of its systems, and its practices and policies of governmentality (Willmott 2021). While rooted in well-meaning frameworks, this pervasive racism that makes it difficult for Black nurses to name their experiences is associated with the racial battle fatigue syndrome Black immigrants develop in the context of the contradictions of liberal ideology (Daniel 2021).

Racial battle fatigue syndrome refers to the persistent racialized stressors that prevent Black people from developing wholesome emotional and physical health (Daniel 2021). The stress and racial battle fatigue Black nurses experience due to tensions between their racialized realities and the myth of a post-racial society is aptly captured by Eli's wistful comment:

> …I've wondered whether it's discrimination or it's just a genuine mistake. There's a fine line…People are very nice to you, so you don't think they'd be discriminating you, but then again, the actions point to exactly that.

While Black nurses implemented a cultural politics through which they challenged racial structures and repositioned themselves as empowered Afropolitan subjects "on par with 'others'" (Adjepong 2021, 158), their social class practices seemed ideologically conditioned to a "post-racial Black identity" (138) and an inherent individualism. It is in this respect that Adjepong cautions that Afropolitan racial politics can "reproduce structures of exclusions via individualistic post-racial logics that reify other forms of anti-Blackness" (2021, 158).

Moreover, studies addressing the durability of race and intersecting forms of discrimination in North America hold that irrespective of socio-economic status or where they are born, Black people are often reduced to stereotypical caricatures about laziness, lack of intelligence, incompetence etc., (Creese 2013; Lacy 2007). This pervasive typecasting is given as a reason why Black people are perceived to modify their behaviours by emphasizing ethnic particularities in attempts to gain upward mobility (Showers 2015).

More specifically, the Black middle class that is not particularly burdened by poverty engages in exclusionary and inclusionary boundary work, relying on cultural capital, including mannerisms, language, and credentials to signal their middle-classness (Lacy 2007; Pittman 2020; Rollock et al. 2012). Inclusionary boundary work refers to efforts the Black middle class makes to emphasize similarity and shared experience with white people, while exclusionary boundary work signifies their strategies to distance themselves from characteristics assumed to be associated with Black people.

For example, Sisane, the ICU nurse who began working as a nurse in Zimbabwe and would later go on to practice in the United Kingdom before migrating to Canada to continue with her nursing career, detailed an encounter she had with an Asian colleague who lamented that promotions were disproportionately awarded to the white nurses on their floor. Sisane responded to her colleague: "The best thing is to be educated… Do it so that they will not have a reason to not just promote their people but to promote you as well."

In her aspiration "to be educated…so that they will not have a reason to just promote their own people but … you as well," Sisane engages in inclusionary and exclusionary boundary work. Sisane assumes and envisions that attaining additional credentials would provide a reason for her and her Asian colleague to be promoted like the white nurses. By implication, Sisane's remarks suggest that a limited educational background barred Black nurses from promotions; an assertion that Canada's segmented labour market, known for sustaining racialized disparities regardless of skill or qualifications, discounts (Block et al. 2019).

Conclusion: Thinking Back

Twenty years after my family's migration to Canada, I continue to reflect on the relationship between social class and race, and how middle-class African immigrant professionals challenge their racialized experiences through Afropolitan cultural projects. While Canada is considered not as extreme and

"not so bad" (see Kihika 2020), in Canada, like the United States, "racism shapes the meaning and structure of class" (Moore 2008, 493). Like their American counterparts, African immigrants in Canada arrive already constructed, imagined, and positioned through hegemonic discourses about Blackness, refracted through the "omnipresent and largely pejorative images of the African American diaspora that resides across the border" (Creese 2013, 174). The dominance of American popular culture imposes archetypical and anti-Black images which middle-class African immigrants in Canada, shown by the Black nurses in this study, seek to disrupt and distance themselves from by performing professionalism.

To be clear, even as Black nurses are licensed and skilled professionals, they engage in Afropolitan projects through which they perform professionalism, to denounce formulations that construe them as deficient and inferior for their Blackness. In performing professionalism, these nurses aspire to overcome the "malady of Afro-pessimism … the dominant idiom through which African experiences are recuperated and understood" (Gikandi 2011, 9). However, while the nurses perform professionalism by enacting Afropolitan projects, the middle-class status they seek to convey to negotiate their contradictory mobilities does little to buffer experiences of anti-Blackness, as these are embedded in underlying social, cultural, and political structures (Pittman 2020; Rollock et al. 2012).

Although Afropolitan cultural projects may, at best, enable middle-class Africans to negotiate a better life, at worst, they leave undisturbed the colonial habitus that sustains the hierarchies embedded in logics of racial capitalism. In essence, in its capacity as a marker of relationality, Afropolitanism contributes to the re-production of class through cultural projects that operate as signifiers of status difference (Ho 2021). Consequently, although Afropolitanism may help carve out space for privileged African identities, its conceptualization of class remains inattentive to the structural disparities that wealth sustains. As a relational marker of difference, Afropolitanism is unattuned to the logics of social difference in "the symbolic work of the fabrication of groups" (Bourdieu 1987, Cited in Ho 2021, 771).

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Acknowledgements

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