



Review Article

A Systematic Review of Nurses' Emigration: Innovative Approaches towards managing it

Demilade Raqeebat Salam^{1*} and Temiloluwa Yasir Salam²
Faculty of Nursing Science, University of Ibadan, Nigeria
Ogun State Hospital Management Board

*Corresponding author: demiladesalam@gmail.com

Abstract

There has been increased concern about achieving universal health coverage in Nigeria. The migration of nurses to industrialized countries creates a vacuum in the origin country leading to insufficient professionals to manage the already poor health care situations. It is however important to note that adequately trained, fairly distributed and motivated health workers are impetus to improving the global health and achieving universal health coverage and sustainable development goal. An extensive systematic literature review was conducted according to the PRISMA guideline. Pubmed, Conchrane, Scopus, Global Health, Scientific Electronic Library Online and national news article was searched from 2006 to 2024. Studies related to nurses migration, its impact on the emigrating nurses and the general public were included. This review shows that there is massive migration of nurses globally especially in developing country such as Nigeria causing a significant brain drain, having its impact on the remaining workforce due to shortage, reduced quality of health to its citizen. Several factors which has been classified into pull and push factors has been implicated to be the cause, push factors such as poor remuneration and working condition, unstable economy and political environment, limited career and educational opportunity to mention a few. Pull factors namely attractive salary and retirement package, better employment opportunity and recognition of professional expertise. Nurses' migration to developed countries in search of better opportunities has caused brain drain in Nigeria which has reflected on the health sector. It is therefore important to address push and pull factors in achieving a universal health coverage. Favourable policies should be adopted with proper remuneration and non-monetary incentives to encourage professionals to stay in their country of origin and implemented to reduce the exodus of nurses leaving in large droves and achieve better health for all.

Keywords: Nurses, Emigration, Innovative Approaches, Brain drain, Pull factor.

Received: 20 July 2024
2024

Accepted: 30 September

This work is licensed under a [Creative Commons Attribution 4.0 Unported License](https://creativecommons.org/licenses/by/4.0/)

ISSN: 3043-6087. Science and Education Development Inst., Nigeria

Introduction

A significant hurdle to Africa's development is emigration of its skilled workers to developed country (Olorunfemi, Agbo, Olorunfemi and Okupapat, 2020). It is not a new occurrence that trained personnel from under developed and developing countries migrate to developing country (Olorunfemi et al., 2020). Olorunfemi et al., 2020 furthermore opined that there is high demand for nurses resulting in massive migration to high income countries. Several definitions exist on who a nurse is, a nurse is a person who has completed a basic nursing education and has been authorized by the appropriate regulatory body to practice in his or her own country (International Council of Nurses, 1987). Also, several models have been used to describe nurses and nursing. According to D'Antonio, Beeber, Sillsc and Naegled (2014), using the Hildegard Peplau's model, a nurse is one who performs duty related to patients' therapy to restore his health. Dorothy Orem's model defined nursing as a social service that involves caring for those unable to do it for various reasons (Queiros, Vidinha, Filho, 2014). Wasik (2020) opined that the mission of nursing is to help individuals and group achieve mental, physical and social potential in the environment in which they operate daily. Furthermore, it was stated that the profession of a nurse comprises primarily of recognizing health and nursing need of patients, planning of care activities, providing prophylactic, diagnostic, rehabilitation and therapeutic service, advocating prevention and health promotion activities, involving in scientific research activities (Wasik,2020).Unfortunately, the high rate of migration has led to shortage of nurses in their origin country and has significant effect on the above stated functions.

Achieving Universal Health Coverage is an agenda in the Sustainable Development Goal that is individual having uninterrupted access to healthcare service without financial hardship (World Health Organization, 2023). An important tool to achieving it is adequate human resource for health (World Health Organization, 2023). In recent times, there has been increased concern about achieving universal health coverage in Nigeria

due to increased trend of skilled health worker migration (Yakubu, Shanthosh, Adebayo, Peiris and Joshie et al., 2023). Its intensity in Africa is significant and calls for immediate action, as emigration poses a great challenge to the overall development (Czaika and Haas, 2015). There has been speculation of shortage of 4.5 million nurses by year 2030 (Boniol , Kunjumen, Nasir, 2020) with the greatest gap in Africa, South East Asia, Eastern Mediterranean region and some part in Latin America (Boniol et al., 2020). Between 2002 and 2021, 60,729 Nigerian nurses migrated to the United Kingdom and a steady increase from 1,393 to 5,543 occurred in a span of 19 years (Organization for Economic Co-operation and Development, 2022). This massive migration has had immense effect such as increased work load, reduced quality of care and rise in mortality and morbidity rate (Olorunfemi et al., 2020).

This review will provide an overview of the nurses' migration and factor influencing it. It will stimulate the government to take proactive action to retaining nurses in their home country. This review will also help policy maker make positive decision that will favour the health professionals and the general public as a whole by proxy. The aim of this article is to examine existing literature on the rate of nurses' migration, the push and pull factor of migration, its effect on the migrating nurse and the country as a whole. To achieve this, existing literature on nurses' migration, factors influencing the nurses' migration, positive and negative effect of migration, and the solutions to the high rate of nurses' migration will be reviewed.

Overview of Nurses' Migration.

The role of nurses cannot be overemphasized, they serve in various capacity and have important role in health care (Pooja, 2020). Though these roles have changed over time due to the advent of technology but despite this, their importance is evident in health care (Pooja, 2020). Nurses' role has moved from just comforters to modern health care professional hinged on evidenced based practice (Pooja, 2020). The year 2020 marked the year of Nightingale and COVID -19 crisis and nursing was in the public eye more than ever (Cingel and Brouwer, 2021). The role of nurses during the pandemic era of COVID -19 cannot be over emphasized as nurses were at the front line of hospital care and also played vital role in mitigating transmission of the virus responsible for COVID -19 (Fawaz, Anshashi and Samaha, 2020).

The world population has experienced drastic economic growth due to industrialization and globalization (Okafor and Chimeze, 2020). Nigeria can be classified under lower middle income economies because the gross national income per capital in 2021 was

This work is licensed under a [Creative Commons Attribution 4.0 Unported License](https://creativecommons.org/licenses/by/4.0/)

ISSN: 3043-6087. Science and Education Development Inst., Nigeria

between \$1036 and \$4045 (World Bank, 2022) thus making registered nurses in developing countries to work in developed countries like United Kingdom and United State of America (Kadel and Bhanderi, 2019). In 2023, the National Association of Nigeria Nurses and Midwives stated that 75,000 nurses left the country in 5 years to seek greener pastures (Punch, 2024). Between 2019 to mid-2022, an approximate of 4,460 nurses migrated to the United Kingdom according to data from Development Research and Project Center (Premium Times, 2022). The World Health Organization recommended skilled health worker density of 4.45 per 1000 to achieve health related sustainable development goal (Scheffler, Cometto, Tulenko, Bruckner, Liu et al., 2022). According to the World Health Organization (2021), Nigeria has skilled health worker density of 1.83 per 1000. Different factors have been linked to skilled health worker migration but the national and sub national government has been unable to address it.

According to Konlan, Lee and Damiran (2023), emigration is the act of leaving one's own country to settle in another one for better condition. Higher income, improved living standard, access to cutting edge technology and safe political environment are driving forces to advanced and industrialized countries (Bimal and Kaur, 2016). According to Okafor and Chimereze (2023), there are two basic types of migration namely, internal migration that is change of residence within national boundary and international migration which means change over national boundaries. According to Konlan et al (2023), the migration of nurses to industrialize creates space in their home country leading to insufficient professionals to manage the already poor health care situations. It is essential to note that adequately trained, fairly distributed and motivated health workers are impetus to improving the global health and achieving universal health coverage and sustainable development goal (Ahamat, Okoroafor, Kazanga, Asamani, Millogo et al., 2022).

Generally, nearly all countries are challenged by large deficit and inequitable distribution of health workers (World Health Organization, 2016). Ifediba (2024) opined that the Nigerian health work force is experiencing an unprecedented surge of migration to the global North. "Brain drain according to the Cambridge dictionary is defined as situation in which large number of educated and very skilled individual leave their country of origin to live in a better one in terms of remuneration and living condition (Okafor et al., 2020). The term "brain drain" was coined by the British Royal Society in response to large professionals leaving the country (Quadri, 2018). "The concept of immigration is colloquially referred to as brain drain" (Qi and Chimenya, 2015). It can also be referred to as human capital flight, in which there is mass exodus of human resources (Quadri, 2018).

This work is licensed under a [Creative Commons Attribution 4.0 Unported License](https://creativecommons.org/licenses/by/4.0/)

ISSN: 3043-6087. Science and Education Development Inst., Nigeria

Causes of Nurses' Migration

According to Adebayo and Akinyemi (2021), the National Health Service employs approximately 3.9% of 137,000 personnel from 202 countries. Ambiguous career option, low income, increased work load, poor working condition, insufficient medical condition and training opportunities are driving force for emigration (Adebayo et al, 2021). Highly qualified and educated professionals migrate for several reasons but specifically for improved economy (Kadel and Bhandari, 2019). This has been linked to push factors such as low remuneration, poor government policies, poor working condition to mention a few and pull factors by the developed country in form of good working condition and better pay (Okafor et al., 2020). The low compensation of wage is evident in Nigeria with the minimum wage compared to countries like United State of America, United Kingdom and Australia to mention a few thus causing nurses to move to where their services will be valued (Okafor et al, 2020).

Inadequate educational opportunities due to lack of study leave, epileptic educational system and incessant strike can make a Nigerian nurse who wants to get to peak of the profession leave the country (Okafor et al., 2020). Furthermore, it was stated that poor job satisfaction involving frequent schedule change, work overload, increased paper work, unfavorable shifts, lack of appreciation and underpayment for services rendered as nurses are push factors for migration (Okafor et al., 2020). According to the International Centre of Nurse Migration (2008), lack of personal safety due to political unrest and social vices are primary reasons for moving to the developed country. In Nigeria, insecurity from Boko Haram, Fulani herdsmen are high factors for nurses to move to a secured environment (Okafor et al., 2020).

Alubo and Hunduh (2016), expounded on the fact that supremacy in health sector characterized by rivalry between doctors and other health care workers can cause migration of nurses. The push factors for nurses cannot be overstretched, it is also important to note that pull factors also can cause nurses migration namely job availability and attractive wages, professional and career advancement, recognition of professional expertise, stable socio political environment and good working environment to mention a few (Okafor et al., 2020).

Positive Effect of Nurses' Migration

Brain drain has positive effect on the individual and the home country of the migrant (Okafor et al., 2020). It causes flexible scheduling, safe working environment, team support and job security (De Varies, Steinmetz, and Tidjens, 2016), lighter work load,

enhanced quality of life, autonomy and decision making(Okafor et al., 2020). According to Raji, Joel, Ebenezer and Emmanuel (2018), migration has positive effect on home country in form of remittance that is sending money to family members to improve their quality of life. Reports from World Bank and European Commission (2011) shows that among the first 25 remittance-receiving countries, Nigeria is the only country within Africa. The origin country of the migrating personnel can benefit when the migrant nurse spread health related knowledge and improved practices after receiving high quality training from advanced country (Uche, 2014).

Negative Effect of Nurses' Migration

After exploring the positive effect of migration, it is important to expatiate on the negative influence of migration on the nurse migrants, they include;

Language and cultural differences due to accent, immigrant nurses have language difficulty even when native language is not different from the foreign country (Omeri, 2006). In some countries, the migrants are expected to learn new foreign language thus leading to career path change (Wojczewki, Poppe, Hoffmann, Peersman and Nkomazana et al., 2015). Discrimination in residing in foreign country affects job prospects (Wojczewki et al., 2015), lack of recognition of their skills and previous experience, a feeling of having competence questioned (de Varies et al., 2016). Some people having difficulty in securing jobs as health care provider (Wojczewki et al., 2015). High expectations and failure to meet hopes causes disappointment and disillusionment leading to forward migration to another developed country(Humphries, Tyrrell, Mcaleese, Bidwell, Thomas et al., 2013). According to Adhikari and Melia (2015), Visa uncertainty, loans and financial challenge due to vulnerable and inappropriate employment makes leaving the undesirable job difficult, then causing emotional distress, hopelessness ,depression and in extreme case suicide(Prescott and Nichter, 2014). Immigrants who have to wait long period before securing appropriate job experience deskilling due to non-use of skills (Wojczewki et al., 2015).

According to Yakubu et al. (2022), nurses' migration causes decline in international competitiveness due to loss of skilled labour thus affecting international exchange rate.It leads to loss of potential investment or discouragement of international aid donors due to lack of people to work with to implement essential policy and social change (Qi and Chimanya, 2015). It also has effect on training and retention of nurses causing increased enrolment in training institutions thus increasing the burden of training nurses in countries of origin (Tomblin-Murphy, Mackenzie, Waysome, Guy - Walker and Palmer et al, 2016), increasing pressure on facilities, poor training output for nurses and making

This work is licensed under a [Creative Commons Attribution 4.0 Unported License](https://creativecommons.org/licenses/by/4.0/)

ISSN: 3043-6087. Science and Education Development Inst., Nigeria

continuous investment in training nurses in developing countries yield minimal results (Tomblin Murphy et al., 2016).

Nursing training shifts to meet demands of migrating countries (Dimaya et al, 2012) as this can be seen in recent change of examination mode from pen on paper to computer based. It leads to reduction in quantity and quality of health care delivery (Kondal et al., 2023) this factor can be seen in shift of focus from disease prevention to curative and rehabilitation care (Kondal et al., 2023). Migration of nurses has also made recruiting and retaining staff a heinous task (Tomblin Murphy et al., 2016).

Solution to Curbing Nurses' Migration

Recently, the Nursing and Midwifery Council of Nigeria announced a new policy to curb migration of nursing work force (Ifediba, 2024). It is important to note that restricting migration violates an individual right to movement for further gain (Ifediba, 2024). Furthermore, it was stated that the International Covenant on civil and political rights recognizes individual's right to leave a country not excluding his home country and also has been recognized by Universal Declaration of Human Rights and African Charter on Human and People's Right (Ifediba, 2024). Regulating international migration of skilled man power distorts efficiency and limits chances of migrant health workers to return with their skills and expertise (Ifediba, 2024).

Twineamastsiko, Mugenyi, Kuteesa and Living Stone (2023) opined that health workers are likely to remain in their place of work if they are valued and respected by senior colleagues and mentoring. Mentoring encourages mutual respect and trust, creates conducive environment for advanced career progression and job satisfaction (Twineamastsiko et al., 2023). Employers should optimize recruitment and ensure spaces left are filled by the unemployed (Ahamat, Okoroafor, Kazanga, Asamani and Millogo, 2023). According to Ifediba (2024) advocacy effort should be strengthened in terms of better remuneration, working condition and smoother career progression. Also advocacy should be in form of encouraging private practice owners employing registered nurses rather than the untrained nurses (Ifediba, 2024).

Interventions to reduce nurse migration to prevent brain drain are numerous but to mention a few, policy should be enacted to control migration of nurses, the origin country should have an active role and responsibility in international labour migration and adhere to international code of ethics on migration (Williams et al., 2020). The sense of nationality should be inculcated in newly trained nurses (Dimaya et al., 2012). Skills of

This work is licensed under a [Creative Commons Attribution 4.0 Unported License](https://creativecommons.org/licenses/by/4.0/)

ISSN: 3043-6087. Science and Education Development Inst., Nigeria

newly qualified nurses should be honed to help them have other source of income (Dimaya et al., 2012). According to Konlan et al. (2023), it was advocated that health care system should be improved, appropriate equipment should be provided, better working condition, staff remuneration should be improved and encouraging nurses not to emigrate. Also according to Okafor et al. (2020), it was opined that increased remuneration, welfare and good working condition, decentralization of power in health sector, improved government policy can be positive ways of slowing down migration, attracting migrated nurses and reversing brain drain.

Conclusion

Nurses' migration to developed countries in search of better opportunities has caused brain drain in Nigeria which has reflected on the health sector in general and specifically. Addressing factors (push and pull) is impetus to achieving a universal health coverage not in quantity but also in quality. The government and governing nursing body rather than forcefully limiting nurses from migrating with unfavourable policies, appropriate measures should be taken and implemented to reduce the exodus of nurses leaving in large droves.

Recommendations

Inflation of good and services should be addressed. Better enabling work environment should be provided and employment of young nurses into the government system. Insecurity such as insurgency kidnapping, killing and terrorism should be looked into to ensure safety of the citizen. Better remuneration of nurses should be ensured. An environment that allows enabling career and educational growth should be encouraged for nurses, nursing mentoring has to be practiced adequately and properly. More researches should be carried out on migration rate of nurses and creating enabling factors to stay in Nigeria.

References

- Adebayo, A. and Akinyemi, O. (2021). What are you really doing in this country? Emigration Intentions of Nigerian Doctors and their Policy. Implication for Human Resources for Health Management. *Journal of International Migration*. 20:1377-1396.
- Adhikari, R. and Melia, K. (2013). The (Mis) management of Migrant Nurses in the UK: A Sociology Study. *Journal of Nursing Management* 2(3):359-67.

This work is licensed under a [Creative Commons Attribution 4.0 Unported License](https://creativecommons.org/licenses/by/4.0/)

ISSN: 3043-6087. Science and Education Development Inst., Nigeria

Adovor, E., Czaika, M., Docquier, F and Moullan, Y. (2021). Medical Brain Drain. How Many, Where and Why? *Journal of Health Economics*. 76 102.409.

African Economic Outlook (2013). Obstacles and Needs of Young People in Africa Labor Market. <https://www.Africaneconomicoutlook.org>.

Ahamat, A. Okoroafor, S., Kazanga, I. Asamani, A. Millogo, J., Illou, M., Mwinga, K. and Nyonu, J. (2022). The Health Work Force Status in the WHO African Region: Findings of a Cross Sectional Study. *British Medical Journal Global Health*;7:e008317. http://gh.bmj.com/content/7/Suppl_1/e008317.

Alubo, O and Hunduh, V. (2016). Medical Dominance and Resistance in Nigeria's Health Care System. *International Journal of Social Determinants of Health and Health Service*. Volume 47, Issue 4 . <https://doi.org/10.1177/0020731416675981>.

Bimal, M. and Kaur, R. (2016). Factors Intend To Brain Drain Among Staff Nurse. *International Journal of Advances in Nursing Management*. 4(4):327-330.

Boniol, M., Kunjumen, T., Nasir, T.S et al. (2022). The Global Health Work Force Stock and Distribution in 2020 and 2030. A Threat to Equity and Universal Health Coverage. *British Medical Journal Global Health*. 7.e009316.

Cingel, M and Brouwer, J. (2021). What makes a nurse today? A debate on the Nursing Professional Identity and its Need for Change. *Nursing Philosophy*. 22(2).e12343.

Czaika, M and De Haas, H. (2015) .The Globalization of Migration: Has the World become more Migratory. *International Migration Review*. 48(2):283-323.

D'Antonio, P., Beeber, L., Sillsc, G., Naegled, M. (2014). The Future in the Past. Hildegard Peplau and Interpersonal Relations in Nursing. *Nursing Inquiry*. 21(4):311.

De Varies, D.H. Steinmetz, S. and Tidjens, G, K. (2016). Does Migration Pay off for Foreign -Born Migrants Health Workers? An Exploratory Analysis Using the Global Wage Indicator Dataset. *Human Resources for Health* 14:40.

Dimaya, R, M. McEwen, M.K. Curry, L.A. and Bradley, E.H. (2012.) Managing Health Worker Migration: A Qualitative Study of the Philippine Response to Nurse Brain Drain. *Human Resources for Health*. 10(1):1-8.

Fawaz, M., Anshashi, H., and Samaha, A. (2020.) Nurses at Front line of Covid-19: Role, Responsibilities, Risks and Right. *The American Journal of Tropical Medicine and Hygiene*. 103(4): 13341-13342.

Federal Government of Nigeria National Migration Policy 2015 (cited 2022. Available from https://publication.int/system/file/pdf/national_migration policy

Humphries, N. Tyrrell, E. Mcaleese, S. Bidwell, P. Thomas, S. Normand, C. et al. (2013) . A Cycle of Brain Gain, Waste and Drain-A Qualitative Study of Non EU Migrant Doctors in Ireland. *Human Resources Health*.11:63-4491-11-63.

ICN (1987). International Council of Nurses: Nursing definition. Available from <https://www.icn.ch/nursing-policy/nursing> -definition. Accessed 15th July, (2020).

Ifediba, N. (2024). Will deterrents to Migration Strengthen the Health Work Force in Nigeria. *British Medical Journal Global Health*. Accessed 15th March, 2024 BMJ GH blog.

International Center on Migration (2008). Return Migration of Nurses. <https://www.intnursemigration.org/Assests/pdfs/returnimmigration> fact sheet

Kadel, M and Bhandari,M. (2019). Factors intended to Brain Drain among Nurses Working at Private Hospitals of Biratnagar Nepal. *BIBECHANA*.16:213-220

Konlan, K.D, Lee T.W and Damiran.D. (2023). The Factors that are Associated with Nurses Immigration in Lower and Middle Income Countries. An Integrative Review. *Nursing Open*. 10:7454-7466

Olorunfemi, O, Agbo, D, Olorunfemi, O and Okupapat, E (2020). Impact of Emigration of Nurses on Health Care Delivery System in Selected Hospitals, Benin-City, Edo State, Nigeria. *Journal of Integrative Nursing*. 2 (3):110-5.

Okafor, C and Chimereze, C. (2020). Brain Drain among Nigerian Nurses: Implications to the Migrating Nurse and Home Country. *International Journal of Research and Scientific Innovation*.7 (1):1-8

This work is licensed under a [Creative Commons Attribution 4.0 Unported License](https://creativecommons.org/licenses/by/4.0/)

ISSN: 3043-6087. Science and Education Development Inst., Nigeria

Omeri, A. (2006). Workplace Practices with Mental Health Implications Impacting on Recruitment and Retention of Overseas Nurses in the Context of Nursing Shortages. *Contemporary Nurse*: 21(1) 50-61.

Organization for Economic Co-operation and Development. Health Work Force Migration (cited 2022, 30th July). Available from: <https://stat.oecd.org/index.aspx?DataSetCode=Healthwfmi#>

Pooja, T.P. (2022). Role of a Nurse. <https://news-medical.net/health>

Premium Times (2022). Brain Drain: Like Doctors, Nigerian Nurses are Migrating, Many to UK. Assessed 27th October, 2022

Prescott, M. and Nichter, M. (2014). Transnational Nurse Migration: Future Directions for Medical Anthropology Research. *Social Science Medical*. 107:113-23

Punch (2024). 3173 Nigerian Nurses and Midwives moved to UK in One year. Assessed 3rd August, 2024.

Quadri, B. (2018). Brain Drain as a Function of Modernization, Westernization and Globalization. <http://www.researchgate.net/publication/326403073>

Queiros, P., Santos Vindinha, T.S, Almeida Filho, A.J. (2014). Self-Care: Orem's Theoretical Contribution to the Nursing Discipline and Profession. *Revista de Enfermagem Referencia*. IV (3):157-163.

Qi, B. and Chimenya, A. (2015). Investigating The Determinants of Brain Drain of Health Care professionals in Developing Countries. *Net Journal of Business Management*. 3(2):27-35.

Raji, A., Joel, A, Ebenezer, J.T., and Emmanuel Y.A. (2018). Effect of Brain Drain on Economic Development of Developing Countries. *Journal of Health and Social Issues*. 7(2): 67-76.

Scheffler, R., Cometto, G., Tulenko, K., Bruckner, T., Liu J., Keuffel, E. et al. (2022). Health Work Force Requirements for Universal Health Coverage and Sustainable Development

This work is licensed under a [Creative Commons Attribution 4.0 Unported License](https://creativecommons.org/licenses/by/4.0/)

ISSN: 3043-6087. Science and Education Development Inst., Nigeria

Goal. Background Paper N.I to the WHO Global Strategy on Human Resources for Health Work Force 2030. Human Resources for Health Observer. Cited 7th April, 2022.

Tomblin Murphy, G., Mackenzie, A., Waysome, B., Guy -Walker, J., Palmer, R., Elliot Rose, A., Rigby, J., Labonte, R. and Bourgeault, I.L. (2016). A Mixed Method Study of Health Worker Migration from Jamaica. *Human Resources for Health*. 14(1), 89-103

Twineamatsiko, A., Mugenyi, N., Kuteesa, Y and Living Stone, E. (2023). Factors Associated With Retention of Health Workers in Remote Public Health Centers in Northern Uganda: A Cross Sectional Study. *Human Resources for Health*. 21:83.

Uche C.I and IOM Nigeria (2014). Migration in Nigeria; A Country Profile. International Organization of Migration.

Wasik, M.S. (2020). The Role of the Nurse in Improving the Quality of Health Care. *Journal of Education Health and Spirit*. 10 (4):68-74

Williams, G.A., Jacob, G., Rakovac, I, Scotter, C and Wismar, M. (2020). Health professional mobility in the WHO European Region and WHO global code of Practice. Data from the joint OECD/EUROSTAT/WHO-Europe Questionnaire. *European Journal of Public Health*. 30:5-11.

Wojczewski, S., Poppe, A., Hoffmann, K., Peersman, W. Nkomazana, O. Pentz, S., and Kutalek, R. (2015). Diaspora Engagement of African Migrants Health Workers- Examples from five Destination Countries. *Global Health Action*. 8(1), 29210

World Bank. World Development Indicators (2022). The World Bank Middle Income Countries. Overview: Development news, research data/ World Bank Last. Updated, August 29, 2022.

World Health Organization. Universal Health Coverage (UHC). (2023). [https://who.int/news-room/fact-sheets/details/universal-health-coverage-\(uhc\)](https://who.int/news-room/fact-sheets/details/universal-health-coverage-(uhc)). Accessed 5 October 2023

World Health Organization Nigeria In: Global Health Observatory Data Repository Geneva, Switzerland 2009 (Updated 2nd September, 2018, cited 2021, <https://apps.who.int/iris/bitstream/10665/250330/1/9789241511407>.

This work is licensed under a [Creative Commons Attribution 4.0 Unported License](https://creativecommons.org/licenses/by/4.0/)

ISSN: 3043-6087. Science and Education Development Inst., Nigeria

Yakubu, K. Durbach, A., van Waes, A., Mabunda, S.A, Peiris, D , Shanthosh, J., and Joshi,R. (2022).Governance Systems for Skilled Health Worker Migration, their Public Value and Competing Priorities: An Interpretive Scoping Review . *Global Health Action*. 15(1), 2013600.

Yakubu, K., Shanthosh, J., Adebayo, K., Peirris, D. Josh, R. (2023). Scope of Health Workers Migration Governance and its Impact on Emigration Intentions among Skilled Health Workers in Nigeria. *PLOS. Global Public Health*. 3(1).e0000717.