

THE “JAPA” SYNDROME AND ITS TOLL ON THE HEALTH SECTOR: A THEMATIC ANALYSIS OF THE DAILY TRUST AND VANGUARD NEWSPAPERS’ REPORTAGE OF THE MIGRATION OF HEALTH WORKERS IN NIGERIA

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Executive Summary

The study focuses on the newspaper reportage of the migration of medical health practitioners and the toll it has on Nigeria’s health sector from January 2022 to April 2024. Health workers migration is a huge Labour loss for the nation and has contributed to the decline of the health system. The study aimed to examine the nature of coverage of health workers migration stories in the Daily Trust and Vanguard newspapers. Agenda setting theory served as the theoretical framework and thematic analysis served as the methodology. Five variables were chosen as the units of analysis. They are- Positive Government Response (PGR), Negative Government Response (NGR) Neutral (N), Labour Loss (LL) and Labour Gain (LG). The study discovered that Vanguard newspaper has more stories on health workers migration (24) than Daily Trust newspaper (12). Vanguard newspaper also has harsher tones in its coverage than Daily Trust. It was recommended that the health gap created by health workers migration portends danger to the health sector in Nigeria and the cry by health workers should be attended to, to discourage their migration

Keywords: Migration, Health Gap, Labour Loss, Labour Gain, Global Future

Introduction

Living things-both animals and humans migrate. Reasons could range from searching for basic needs like food, water, shelter, safety or better living condition. Since the Bible days, humans have always migrated to better places for better life. In Nigeria, the exodus of people to other countries like the United States, Canada, Britain, Dubai,

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Saudi Arabia and even neighbouring countries like Ghana, Togo and Benin republic have increased exponentially. Over 2000 doctors migrate to the United States every year. (Obinna, 2019). For skilled health workers to migrate for unaddressed issues like human rights as stipulated in the Sustainable Development Goals (SDG) on health is a cause for concern. In a recent publication in a Nigerian Daily newspaper- *The Punch*, it reported that “Nigeria needs 10 years to replace 500 migrating doctors. (Muntari, 2023). The number of highly skilled Nigerians in the diaspora is increasing on a daily basis, while the health sector in Nigeria keeps depleting after huge investments on educating the medical practitioners. With no better incentives for them, many of them are migrating to greener pastures in other countries. This migration has led to the coinage of the term “Japa” which means escape for safety in Yoruba Language. This is labour loss for Nigeria and labour gain for these countries. This study intends to extrapolate the “Japa” syndrome in Nigeria and its resultant effect on the health sector in the Daily Trust Vanguard newspapers and examine what this portends for the future.

The global attention that the media locally are giving to issues of health care migration is a matter of urgent consideration by the disadvantaged countries. The mass media in Nigeria is agog with news stories about contending national issues ranging from politics, insecurity, economy, and etc. in the heat of a dire economic disarray, the ripple effect has trickled to other sectors especially the health sector, leading to migration by health practitioners in Nigeria to first world rated countries.

Dragon, (2019), defines the term ‘migrant’ to cover several categories of population. Amongst these we find, first, all people who voluntarily and legally, left their country of origin in order to work and settle in another country. The first international conventions on migrants were adopted by the International Labour Organization (ILO) in the 1930’s to protect this category of persons. They define a migrant worker as someone who migrates from one country to another with a view to being employed otherwise than on his own account.

It is a clear fact that Nigeria produces medical and health practitioners, year in year out due to the number of medical schools in Nigeria. It is also a thing of pride for a Nigerian family to produce a medical practitioner. Parents go the extra mile to cajole their children to study nursing and medicine because of the prestige it portends. The competitive nature of securing admission to study medicine or nursing in Nigerian universities make those institutions put a high benchmark on those courses. Hitherto, the amount of money that goes into funding, learning and preparing these potentials for optimal healthcare delivery becomes a futile exercise due to health care migration to

countries that can give them better lives. With the economic hardship in Nigeria and the lack of political will to make the health sector better for her citizens and the practitioners- health tourism and health care migration is the order of the day. This has led to the best hands migrating to other countries and a resultant labour loss for the nations that have trained their people. The thrust of this paper is to assess the implication of this loss to Nigeria as a nation as a wake- up call to the government to reconsider revamping the health sector to reduce this health care migration.

Statement of the Problem

Majorly, poor condition of service and inadequate equipment for proper medical practice is the bane of the health care sector in Nigeria. For instance, Obinna, (2019), reported that “the inadequacy of health workers in Nigeria is alarming as one doctor is to a population of 5000 Nigerians which is against one doctor to 600 people as suggested by World Health Organisation (WHO). Considering the standard given by the World Health Organisation on the ratio of a doctor to patients, the doctors are so be-laboured that their best medical practice is stifled. Consequently, the Millennium Development Goals (MDG’s) and subsequently the Sustainable development Goals (SDG’s) emphasis on health is a matter of urgency for a serious government or nation. This has made Nigeria to suffer for lack of implementation of these spelt out goals- leaving the teeming masses in the quagmire of suffering the consequence of such migrations. The elites on the other hand can engage in medical tourism to countries that can offer them best health care delivery. (Ojebola et al, 2020).

It has been reported that between 2008 and 2021, a total of 36,467 Nigerian doctors migrated to the United Kingdom. There was a steady increase from 1,798 that migrated in 2008 to 4,880 in 2021. A larger trend was observed for nurses. Between 2002 and 2021, a total of 60,729 Nigerian nurses had migrated to the United Kingdom. There was a steady increase from 1,393 nurses that migrated in 2002, to 5,543 in 2021 (Yakubu K. et al, 2023). This trend in history of migration for skilled health workers to leave their countries in search for a better life is a minus to their nation. Nigeria has witnessed several setbacks with the coming of democracy. Several political administrations have come and gone with promises to change the important sectors of the nation’s economy but to no avail.

Objectives of the Study

- a. To determine level of frequency ascribed to stories on health workers’ migration in the Daily Trust and Vanguard newspapers.

- b. To examine the government policies in place to mitigate health workers' migration in the Daily Trust and Vanguard Newspapers.

Significance of the Study

The study is significant because health migration is taking highly skilled workers away from the African nations due to poor condition of service. It will add to the body of literature and close the gap in knowledge regarding the huge data of health workers migration. The study will contribute in policy formulation and development; and bring the health and over all well-being of the nation and its implications to the front burner.

Literature Review

There is no serious nation that will invest in the education of her citizens and will not provide an enabling environment for those citizens to thrive. After the provision of the basic necessities of life – which are food, clothing and shelter, the next is health and security. While the emphasis of this research is pinned on beaming the search light of the mass media in reporting the dangers of health migration in the country, there is the need to understand what this portends to the fabric of the society. A Visit to government hospitals will leave one to wonder the crop of medical practitioners, particularly doctors who are attending to the medical needs of patients. Those with the right expertise are sought for abroad and the package given to them by the government is not juicy enough to keep them in the country.

Considering the yearly budgetary allocation on health clearly indicates the negligence of government in revamping the health sector in Nigeria. State governments on the other hand do not give the health sector the attention it deserves and so they give little or no attention to the Primary Health Care (PHC). Now the secondary and tertiary health institutions are facing the same negligent treatment, except for the intervention of NGOs and international donor agencies with their intervention projects. While there are numerous public and private health training institutions from medical schools, nursing schools and other health related institutions, and more in the pipeline. They are breeding grounds for people with the utmost intention of migration after successful completion of the studies. This has made the country to suffer more brain drain than brain gain. The fate of the ordinary Nigerian citizen and life expectancy keep reducing as a result of this. The 2024 World Health Organization (WHO) life expectancy rate in Nigeria is ranked the lowest with 56.05 years. While the country with the highest life expectancy as at 2023 is Monaco (Macrotrends, 2024). Those who can afford health tourism travel abroad for medical attention and surprisingly meet Nigerians to attend

to their health needs. This is a paradox that can be addressed if the government is willing to do so.

Adebowale-Tambe (2022), reported that “over 100 consultants from 17 hospitals left Nigeria in two years”. Also, statistics has shown that there is only one doctor to 10,000 patients as against the one doctor to 600 patients according to the World Health Organization standard (Dokpesi, 2024). Consequently, the statistics are so enormous and, in this case, there is always new data about health migration as the clock ticks not even considering other disciplines. One cannot help but become apprehensive to the global future of the health condition in Nigeria and Africa in the bigger light. Africans have put in the much-needed work to train its people but the West is gaining from these human capital investments, health wise. One may argue that some Africans after working outside their countries come back to settle in their mother lands and invest by building private hospitals with the state-of-the-art facilities. However, the common people do not patronize such health facilities because they are very expensive. Most governments now do not give subsidies to their masses on anything because it has been alleged that subsidies are a form of fraud (EFCC, 2024). The citizens are left to their fates to either seek alternative medication which is not government regulated or go for medical tourism abroad.

The Health Sector Laws in Nigeria

The National Health Act of 2014 carries all the health-related laws that will oversee the affairs of health related issues in Nigeria. Part 1, sub-section 1a, b, and c, are as follows:

- a. Encompass all public and private providers of health services;
- b. Promote a spirit of co-operation and shared responsibility among all providers of health services in the federation and any part thereof;
- c. Provide for persons living in Nigeria the best possible health services within the limits of available resources;

Hitherto, with the brilliant regulation on paper, there is little or no adherence to the Act by the government hence, the decay in the health sector. The human resources are aggrieved that government is not meeting their needs because what they offer is termed as “highly skilled”, this make their services to be highly demanded for by those who know their value. In addition, the political will to implement these policies is not there and the teeming population is left to bear the brunt while those who can afford patronize the countries that have invested in such human resources without any compromise.

Effect of Health Migration on a Nation

Hagopian et al (2005) in their study corroborate that “West African physicians have been migrating away from their sub-Saharan home countries since the first medical doctors were trained there in the middle of the 20th century. They go in search of what they describe as “greener pastures”—better working conditions, better pay, and better training and research opportunities. They leave behind communities in desperate need of not only the health services, but also of the leadership and stability that physicians provide to a health system's development”.

‘Physician migration generates three areas of concern. The first is a loss of health services available to the populace. The second effect of physician migration from Ghana and Nigeria is that it diminishes the health sector's ability to organize and expand. Health sector institutions rely heavily on physicians to lead, develop and promote them as they work to advance the public's health. The third problem is that physician migration depletes an important element of the middle class in West Africa. As in the US and UK, African physicians comprise an important segment in the social and economic make-up of the middle class. (Hagopian et al 2005).

The resultant effect this portends is that it makes the masses loose hope in the health sector and resort to alternative medication which will aggravate quackery and other health practices that may not augur well for the nation. Particularly alternative medications that are not proven to be globally acceptable, because of their inability to test the veracity of such medications. This will make the health sector to lose valuable data, hence inability to make informed decisions health wise. One important fact about the health migration is that the advanced countries get the best hands and leave the average ones who battle to attend to the overwhelming populace without the right kind of medication. A case in point is the wrong diagnoses of patients and the wrong administration of medication to patients who lose their lives and the relatives have nowhere to run to for justice

Maslow’s Hierarchy of needs at play

While man’s basic need is a priority that cannot be compromised, no matter the level of education man attains, it cannot replace the need to seek a moderate degree of comfort. Man can move to anywhere possible to feel valued and appreciated. In considering the Maslow’s order of needs, health workers who have put in the hard work to study have the need to self-actualize for personal and professional fulfilment. When there is no hope insight for the needs to materialize in one’s own motherland- migration for greener pastures set in, in order for man’s highest potential to be actualized. (Jones et al, 2023).

The Agenda Setting Theory

This theory postulates that the mass media as the fourth estate of the realm set the agenda for public discourse. Whatever the mass media choose to report becomes what the public will engage in socially. As developed by McCombs and Shaw in 1976, posits that “the mass media does not tell the public what to think, but they give the public what to think about. The agenda setting theory emphasizes the important role of the mass media in steering public discourse and social engagements that can influence governance and policy making. In this regard, the mass media shapes public opinion on how the health workers migration can affect health sector in Nigeria. It also raises awareness the calls for concerns on how to nib the situation in the bud by influencing government policies to drive collective action. (McCombs, 2023).

Methodology

Since this study is considering the media reportage of the migration of health practitioners in Nigeria and its coverage by the Daily trust and Vanguard Newspapers. The methodology suitable for the study is Content Analysis. In specific terms, thematic analysis and comparative and sentimental analysis were implored to extract frames that dwelt on the health workers migration in the Daily Trust and Vanguard newspapers.

Research Design

The study is on the *japa* toll and its implication on the health sector: the media reportage of the health workers migration and its implication on the Nigeria health sector. It is major objective examined the nature of media coverage of the health workers migration in Nigeria. The methodology adopted was content analysis while focusing on thematic analysis of newspaper contents (Daily Trust and Vanguard) from 1st January 2022- 31st April 2024. For coding, the themes used were Dates, Titles, Themes, Interpretations and Tones as the content categories. Positive Government Response (PGR), Negative Government Response (NGR) Neutral, Labour Loss and Labour Gain served as the units of analyses with values assigned to get the frequencies and compare how they were covered in the two national dailies.

Population of the Study

For the sake of this study, the two newspapers that were analysed were the Vanguard and Daily Trust Newspapers. The time under study is from 1st January 2022 to 31st April 2024. All Vanguard and Daily Trust newspapers within these years, not minding if they were weekday or weekend newspapers, were considered as part of the population. The reason for this is to find out the level of reportage of this health workers

migration, post-COVID, when the ban was lifted on travels. Hence, the population is 1,460 days under study. However, when the stories related to health workers migration were counted, 36 newspapers served as the population.

Sampling Technique and Size

For the sampling, purposive sample was used to gather all stories related to health workers migration in the VD and DT newspapers of the years under study. VD had 24 newspapers; while DT had 12 newspapers within the years under study (January 2022-April 2024) totalling 36 newspapers.

Content Categories

For the content categories, emergent content categories were used to get news stories related to health workers migration in the VD and DT newspapers sampled out were analysed whether they appeared as straight news reports, articles/ features, editorials, and interviews. They were categorised as:-

- a. *Labour Gain for Nigeria*: This refers to the tone of the stories that reflected some elements of positivity on the part of the nation gaining from the emigration of the health workers.
- b. *Labour Loss for Nigeria*: This refers to the tone of stories that reflected damage and impact the emigration will have on Nigeria's health sector
- c. *Neutral frames*: This refers to stories that are neutral or indifferent about the migration of health workers in Nigeria.

Units of Analysis

The unit of analysis comprises of the small unit of content to be coded in the content category. The unit of analysis adopted for the study based on the frames built in this study were stories on the health workers migration. Words and phrases that form sentences and paragraphs on the story were analysed. They will be analysed as:

- a. Positive Government Response, (PGR)
- b. Negative Government Response (NGR),
- c. Neutrality (N)

Instrument of Data Collection

The instrument used to collect data for the study was coding sheet. This was designed by the researcher and a coding guide was developed and nominal values assigned to highlight the options for measurement.

Method of Data Presentation and Analysis

The data were analysed using tables and bar charts to visualize how the stories were reported within the time range of the study in the Daily Trust and Vanguard Newspapers.

Table 1: Distribution of the Daily Trust newspaper stories on Health Workers Migration from 1st January 2022 -31st April 2024

Date	Title	Indicators (Main themes)	Interpretation	Tone
5-5-22	Nigeria lost over 9000 doctors in two years-NMA	N G R - P G R+	Labour loss	Harsh
25-8-22	Fact check: are there enough doctors in Nigeria	PGR+	Labour loss	Moderate
13-11-22	Brain drain: dearth of midwives often frustrate health workers in rural nigeria	NGR-	Labour loss	Moderate
5-12-22	How research will help address maternal mortality and health workers migration	PGR+	Labour loss	Moderate
16-4-23	Why UK’s restriction won’t stop brain drain.	PGR+ NGR-	Labour loss	Harsh
20-4-23	Reps move to stem brain drain of doctors raises dust	PGR+	Labour gain	Moderate
22-10-23	Nigeria- the returnees who leave again	NGR-	Labour loss	Harsh
17-1-24	Japa: Why we cannot leave Nigeria- doctors	N	Labour gain	Soft
10-3-24	Japa: FG prohibits leave of absence for health workers	PGR+	Labour gain	Harsh

11-3-24	Japa: UK bans health workers, others from bringing family	N	Neutral	Moderate
11-3-24	16000 doctors leave Nigeria in five years- Minister	NGR-	Labour loss	Harsh
4-4-24	Transformation of Nigeria's health sector	PGR+	Labour gain	Soft
Total	12			

Table 1 shows that DT newspaper from 1st January 2022 -31st December 2024 has a total of 12 stories.

Table 2: Distribution of the Vanguard newspaper Health Workers Migration stories from 1st January 2022- 31st April 2024

Date	Title	Indicators (Main themes)	Interpretation	Tone
24-08-22	Migration: FG to introduce policy to replace medical personnel	PGR+	Labour gain	Moderate
25-10-22	Brain drain; 50 doctors leave Nigeria every week	NGR -	Labour loss	Harsh
24-11-22	Curbing health sector brain drain	NGR- NGR-	Labour gain	Soft
12-1-23	Nigeria loses over 1800 doctors, health care	NGR-	Labour Loss	Harsh
23-1-23	Recruitment in health sector	PGR+	Labour gain	Soft
13-4-23	Groups of Nigerian doctors working in the diaspora have petitioned	NGR - N	Labour loss	Harsh
15-5-	FG kicks against bill to	PGR+	Labour loss	Harsh

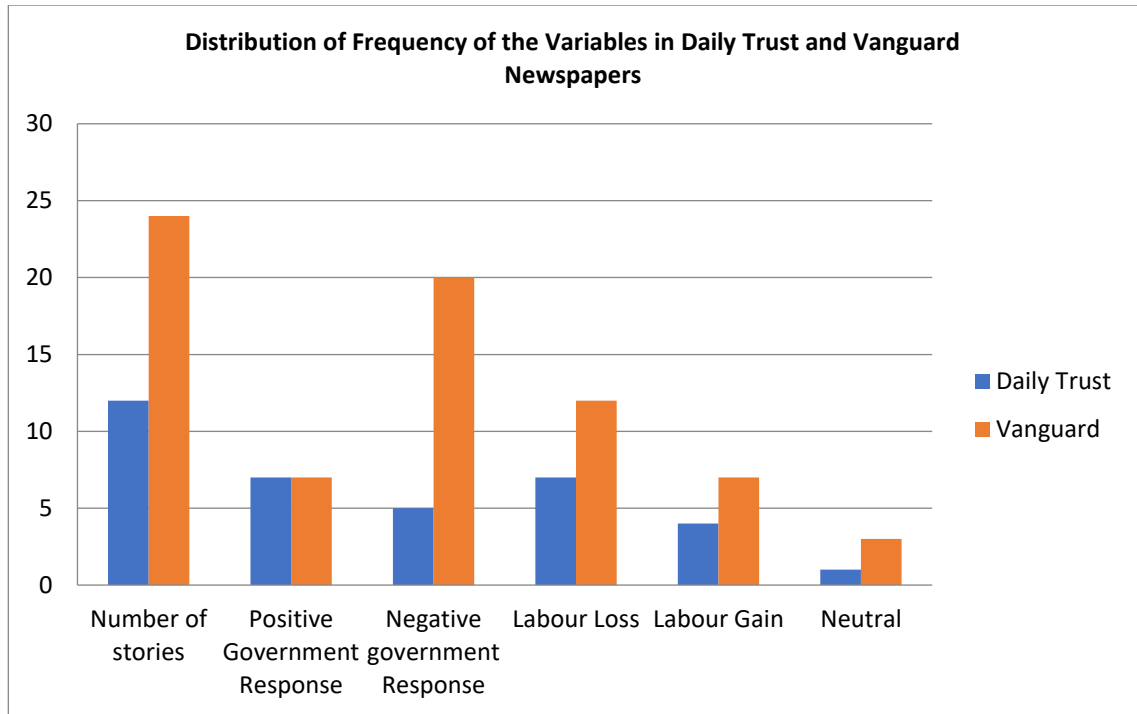
23	stop doctors’ migration	NGR-		
16-5-23	The FG, yesterday kicked against the bill	PGR+	Labour loss	Harsh
20-5-23	Why more Nigerian nurses will move abroad	NGR- NGR-	Labour loss	Harsh
21-6-23	62221 Nigerian doctors lost to UK in 6 years	NGR-	Labour loss	Harsh
17-8-23	Work ongoing to stop Nigerian nurses from migrating	PGR+	Labour gain	Moderate
21-8-23	Brain drain: show us we are valued, appreciated	NGR-	Labour gain	Moderate
12-9-23	Confronting the doctors brain drain	NGR-	Labour gain	Harsh
29-11-24	Japa: reps raise alarm as LUTH shuts down 5wards over doctors’ shortage	NGR- PGR+	Labour loss	Harsh
5-12-23	UK announces stricter measures to reduce migration	NGR-	Neutral	Harsh
9-10-23	Africa contributes over 50% of world health workers deficit	NGR-	Labour loss	Harsh
13-2-24	Over 42000 Nigerian nurses migrated abroad in the last three years- NMCN	NGR-	Labour loss	Harsh
29-2-24	Japa:2497 doctors recruited in last six months	NGR-	Labour gain	Moderate
6-3-24	2023 was deadliest year for migrants in a decade	NGR-	Labour Loss	Harsh

8-3-24	NLC urges FG to remove impediments to health workers	NGR-	Neutral	i.	Moderate
12-3-24	UK unemployment rises amid ban on foreign health workers from bringing dependents	NGR-	Neutral	ii.	Harsh
9-04-24	Nigeria struggles with exodus of doctors and nurses	NGR- PGR+	Labour loss		Harsh
<hr/>					
Total	24				

Table 2 shows the number of stories on health workers migration in the vanguard newspaper from January 2022 to April 2024. It has a total of 24 newspapers.

Table 3: Distribution of Frequency of the Variables in Daily Trust and Vanguard newspapers

Newspaper	Daily Trust Vanguard	
Number of stories	12	24
Positive Government Response	7	7
Negative government Response	5	20
Labour Loss	7	12
Labour Gain	4	7
Neutral	1	3



In table 3, the frequency of coverage-Vanguard has 24 articles covering multiple themes. The Vanguard newspaper also has more Negative related response on government action than the Daily Trust newspaper.

In comparing the theme of the newspapers, Vanguard Newspaper has a broader and wider perspective while the Daily Trust focuses has lesser and narrower in perspective and in the total coverage of the news stories on health workers migration.

Table 4: Distribution of Frequency of the Tone in Daily Trust and Vanguard Newspapers

Newspaper	Daily Trust	Vanguard
Harsh	4	16
Moderate	5	5
Soft	2	2
Total	11	23

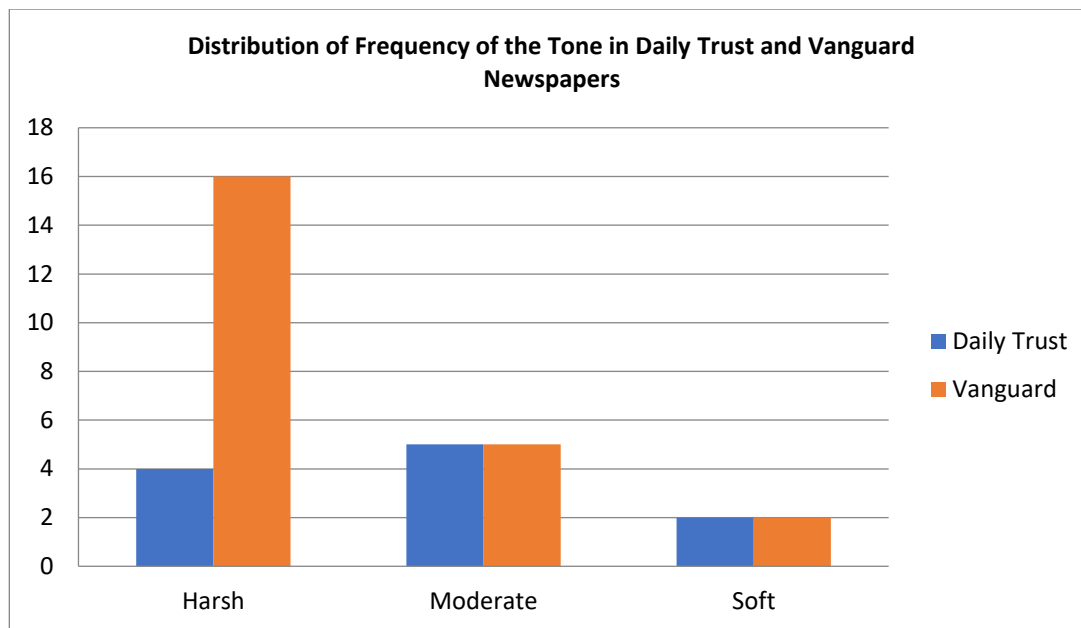


Table 4 describes the tone the stories in the DT and VD which are Harsh, Moderate and Soft tones. VD has harsher tones in their stories than DT. Though the two dailies had the same number of soft and moderate stories, this means that the Harsh tone in the VD newspaper is an emphasis for the government to consider the issue of health workers migration as a contending national problem.

Discussion of Findings

What is the level of Frequency ascribed to stories on health workers' migration in the Daily Trust and Vanguard newspapers?

The VD newspaper has more stories (24) compared to DT (12). Considering the fact that these two dailies represent the southern (VD) and northern part (DT) of Nigeria, they have different editorial policies and national focus. This indicates the type of agenda the two newspapers can choose to give prominence. However, the keyword “Japa” was used considerably in coinage of health workers’ migration in the Daily Trust and Vanguard newspapers

What are the government policies in place to mitigate the migration of health workers in the Daily Trust and Vanguard newspapers?

Section 43, articles (e) and (f) of the National Health Act of 2014 states that-

(e) Prescribe strategies for the recruitment and retention of health care personnel within the health care system from anywhere outside Nigeria.

(f) Ensure the existence of adequate structures for human resources planning, development and management at national, state and local government levels of the National health system in conjunction with the National Council on health

These clauses state the intentions of the Nigerian government to care for the health workers and possibly recruit health workers outside the country for Nigerians. However, the needs of the health workers in Nigeria that will dissuade migration were not stated. So, with every labour loss, there is a huge health gap for Nigeria and a resultant health labour gain and health prosperity for the advanced countries. Unfortunately, the brilliant health policy on paper does not translate to better health care for Nigerians. From the number of story titles in the DT and VD, and the statistics revealed by the government and other studies, it shows that government policies have done little or nothing to mitigate health workers migration in Nigeria.

Conclusion

The study of the health workers migration reportage in the Daily Trust and Vanguard newspapers and the results it has shown indicate that there is a considerable number of agenda setting carried out by the media to draw the attention of the government. From the frequency of the stories, the consequence of labour loss than labour gain cannot make a serious government to turn a blind eye to the plight of its citizens. It behooves on the media to continue to set agenda while the government act on the agenda to draw out policies and implement them to the latter. This can help the nation to achieve its set objectives. The conditions of service demanded by the health workers should be met by the government to discourage health workers migration and bring about health security.

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