

**Government's Anti-Labour Practices and Migration of Nigerian Health Care Professionals to the United Kingdom  
(Effect on Sustainable Development Goal 3 in Nigeria)**

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**Abstract:** *In recent years, the pervasive problem of excessive anti-labour practices by the Nigerian Government has given rise to a series of far-reaching consequences. Among these, a prominent outcome is the increasing emigration of highly skilled professionals from Nigeria to various corners of the globe. The relationship between governmental policies, labour practices, and the exodus of skilled workers emphasizes the necessity for a comprehensive investigation and deeper understanding. This study investigated the Government's anti-labour practices and the migration of healthcare professionals to the United Kingdom. The study adopted the documentary data collection method and employed qualitative descriptive analysis to analyze the secondary data. The theoretical framework of push-pull theory was adopted to explicate the issues above. The study found that the Government's anti-labour practices, such as poor remuneration and poor enforcement of labour laws, have contributed to the increased migration of healthcare professionals to the United Kingdom. The study also discovered that this mass exodus of healthcare professionals hurts the health sector in Nigeria and has become a concern on how the country will meet the Sustainable Development Goal of providing good health and well-being for all in the year 2030. As a corollary of the above, this study recommends; Advocacy and implementation of comprehensive labour reforms in Nigeria, involving the revision of existing laws, constructive dialogue with stakeholders, and the strengthening of enforcement mechanisms to ensure fair working conditions, competitive wages, job security, and the protection of skilled professionals' rights through monitoring and reporting mechanisms. To improve the "brain gain," the Government should continue to step in and create an atmosphere that supports the success of healthcare professionals. To lessen the exodus of medical personnel, Nigerian governments at all levels should ensure that financial incentives are available to enhance the financial security of healthcare professionals. Raising wages, providing incentives, and ensuring that payments are made on schedule.*

**Keywords:** Anti-labour practices, migration, health care professionals, United Kingdom, Nigeria, Sustainable Development Goal

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## INTRODUCTION

Nigeria, renowned for its cultural diversity, rich resources, and dynamic populace, has significantly contributed to global labour migration flows with complex political dynamics and socio-economic challenges. The country has experienced large internal and external migration flows since its independence. In the 1970s, the oil boom attracted foreigners, and the country saw more people immigrating than emigrating (Adepoju, 2000). However, in the 1980s, the number of Nigerians leaving the country increased as a consequence of the economic downturn and political instability. Since then, the net migration rate has stayed negative (Sasu, 2023). Nigerians are said to have a reputation for being ardent migrants from time immemorial, migrating to different countries for several reasons. However, the United Kingdom, renowned for its historical ties to Nigeria and its economic opportunities, has been a significant destination for Nigerian migrants since its inception. Statistics from official reports of Nigerian nationals resident in the UK from 2008 to 2021 signify an exponential increase in migrants. In 2008, there were 90,000 Nigerian residents in the UK. This number maintained a numerical progression but leapt significantly to 102,000 in 2017 and, after that, experienced a geometrical surge in 2021 to 178,000 (Sasu, 2023). Approximately 178 thousand Nigerian nationals resided in the United Kingdom in 2021, a significant increase from the ninety thousand (90,000) Nigerian nationals in the United Kingdom in 2008 (Sasu, 2023). Official data show that the number of Nigerians who received UK worker visas rose to 13,449 in 2022 from 1,993 in 2019, representing a 574.8 percent increase (Bailey, 2022). Scholars have diagnosed several reasons to be responsible for this upward migration trend, including economic instability, insecurity, and unemployment (Adigwe & Nwosu, 2021).

Nigeria's poor economic circumstances are the primary cause of the country's rising migratory trend. Nigerians' salaries no longer correspond with the cost of living, highlighting a notable disparity. This depressing situation is worsened by a shaky democratic system that has not adequately empowered the younger generation (Adigwe & Nwosu, 2021). Indeed, the traditional employment avenues for the youth have dwindled, resulting in a distressed economic landscape. A comprehensive examination of the economy reveals a stark surge in the prices of essentials, further exacerbating the challenges citizens face.

Adigwe and Nwosu (2021) emphasize a pivotal catalyst for Nigeria's relentless wave of migration, which they referred to as the rampant insecurity plaguing the nation. This insecurity has escalated alarmingly, impeding the ordinary activities of farmers and traders who cannot conduct their businesses without fear. The multifaceted challenges of economic constraints, insecurity, kidnapping, and systemic barriers have collectively hindered the advancement of the nation's youth. Ultimately, the scholars underscore the critical role of leadership and governance in shaping the trajectory of Nigeria's prospects. Thus, the fluctuation between progress and regression hinges profoundly on the effectiveness of governmental mechanisms.

Regardless of the known negative consequences/effects labour migration has on the sending country, Nigerians have continued to leave the country in hordes, with those left in Nigeria desperately searching for opportunities to leave. This raises the question, "Why are Nigerians eager to leave Nigeria at all costs? Several scholars have answered this question. NBS (2020) attributed this phenomenon to limited job opportunities. It highlighted that Nigeria's high unemployment rate has made it difficult for skilled professionals to find suitable jobs that match their qualifications and experience, thus propelling them to leave Nigeria for better opportunities abroad. Also, according to World Bank (2020), the increase in migration could be attributed to poor remuneration of skilled professionals in Nigeria, inadequate infrastructure, political instability, and lack of social amenities. However, one major factor that has not been adequately explored is the role of state anti-labour policies and practices on labour migration in Nigeria.

This study endeavours to shed light on the relationship between the Nigerian Government's anti-labour practices against healthcare workers and the migration of healthcare professionals to the United Kingdom. By unravelling the motivations, challenges, and outcomes of this migration trend, the research contributes to our understanding of how anti-labour practices influence healthcare professionals' migration decisions and shape the experiences of those who undertake this journey. Through its insights, the study aims to foster informed discussions, advance academic knowledge, and influence policy decisions in migration, human rights, and international relations.

The study underscores the significance of addressing the interconnected issues of governance and labour migration in our rapidly changing world. As a result of the significant increase in the number of Nigerian healthcare professionals migrating to the United Kingdom for work, the UK as a country shall constitute the geographical scope of this research. Despite the high cost of living, several attempts have been made to proffer an explanation for the existence of this rising trend, but for the sake of this study, the focus was laid on the influence of the Nigerian Government's anti-labour practices on the migration of health care professionals to the United Kingdom.

This paper is divided into nine (9) parts: the first is this introduction, followed by the literature review; the third part deals with the theoretical framework for the study; the fourth part is the methodology, and this is followed by anti-labour practices against health care professionals in Nigeria, the sixth is on the migration of health care professionals to the United Kingdom, the seventh part analysed the effect of this migration on the achievement of SDG 3 in Nigeria, the eighth and ninth part is the conclusion and recommendations respectfully.

## **LITERATURE REVIEW**

Anti-labour practices refer to deliberate actions and strategies employers employ, often with support from governmental or corporate entities, to undermine or curtail workers' rights, bargaining power, and overall job security (Rodriguez & Romé, 2019). These practices manifest

as intentional efforts to weaken labour unions, suppress collective bargaining, and erode working conditions, ultimately impacting workers' economic, social, and emotional well-being (Biletta et al., 2021). Several scholars have identified several types of Anti-labour practices, including Union suppression and interference, a common type of anti-labour practice involving an employer's attempt to suppress or weaken labour unions, which are essential for workers' collective bargaining power (Barbash, 2017). Union suppression tactics include intimidation, illegal firings, and denying access to organising resources (Tilly, 2018). These practices stifle workers' ability to negotiate fair wages and improve working conditions. Vosko (2020) identified another anti-labour practice known as 'Precarious Employment,' which, according to him, is characterized by insecure work arrangements, such as temporary contracts, gig work, and part-time positions, that lack benefits and stability (Vosko, 2020). Such practices hinder workers' access to social protections and maintain consistent livelihoods. In the same vein, Stiglitz (2019) identified wage suppression as a labour practice that involves intentionally keeping wages low, often below the cost of living, to maximize profits while disregarding workers' basic needs (Stiglitz, 2019). This practice exacerbates income inequality and restricts workers' economic mobility. According to Cranford et al. (2019), Employers may engage in unfair dismissals, where employees are terminated without proper cause or due process, to silence dissent or curb union activities (Cranford et al., 2019). This tactic instils fear and discourages workers from engaging in organizing efforts. Some employers violate labour regulations, including minimum wage laws, safety standards, and working hour regulations, to cut costs and maximise profits (Dagdeviren et al., 2016). This compromises workers' health, safety, and overall well-being.

Scholars have offered diverse viewpoints on the nature and implications of anti-labour practices. Rodriguez and Romé (2019) propose a comprehensive framework that views anti-labour practices as a multidimensional phenomenon involving direct interference with workers' rights, unfair employment relations, and violations of labour laws. Their framework underscores the complexity of the issue and its multifaceted manifestations. Adeniran (2019), in an interview with labour activists, provided valuable insights into the life experiences of anti-labour practices. Adeniran's interview shed light on the perspective that anti-labour practices often arise from power imbalances between employers and workers, leading to the suppression of workers' collective efforts to improve their conditions; further. The International Labour Organization (ILO, 2020) maintained that anti-labour practices are actions that undermine workers' rights, lower labour standards, and impede social progress. This point of view emphasises the broader societal implications of such practices.

The implications of anti-labour practices are seen as profound, affecting workers and the broader society. These practices perpetuate income inequality, hinder social cohesion, and contribute to economic instability (ILO, 2020). Kimball (2007) posited that the roots of anti-labour practices could be traced back to the Industrial Revolution when mechanization and mass production gave rise to exploitative labour practices. These practices gained prominence as capitalists sought to

maximize profits by suppressing worker demands through tactics such as union-busting and imposing unfavourable work conditions. Additionally, interviews with labour activists in Johnson (2014) study reveal that anti-labour sentiments often stem from the desire to maintain a low-cost labour force, particularly in developing economies where regulatory frameworks might be weaker. Numerous scholarly reports underscore the adverse effects of anti-labour practices on workers' rights and well-being. A study by the International Labour Organization (ILO, 2018) highlights how anti-labour practices violate fundamental labour rights, including the right to organise and collectively bargain.

The roots of anti-labour practices in Nigeria can be traced back to the colonial era when exploitative labour systems were institutionalized (Olaniyan & Omotosho, 2015). This historical backdrop laid the foundation for modern-day challenges in labour relations. Interviews conducted by Adeniran (2019) with Nigerian labour activists reveal that these practices have evolved due to factors such as weak regulatory frameworks, ineffective enforcement mechanisms, and power imbalances between employers and workers. Numerous studies have documented the detrimental effects of anti-labour practices on workers' rights and well-being in Nigeria. According to Okafor and Nwankwo (2020), these practices result in inadequate wages, poor working conditions, and a lack of social protection mechanisms for workers. In line with these findings, Ogunnubi and Adewuyi (2018) highlight that anti-labour practices contribute to widespread job insecurity, leaving workers vulnerable to exploitation and impeding social and economic progress.

The involvement of Government and corporate entities in perpetuating anti-labour practices is a critical dimension of this issue. A study by Falana (2021) underscores the pivotal role of trade unions in resisting anti-labour policies and mobilising workers for collective action. The efforts of these movements are vital for raising awareness, pressing for policy changes, and holding Government and corporate entities accountable. Ogunkoya (2019) argues that fragmented labour unions and limited access to legal resources hinder effective resistance against these practices. Ovunda et al. (2018) emphasise the need for comprehensive policy reforms that stress the importance of strengthening labour laws, enhancing enforcement mechanisms, and promoting social dialogue between stakeholders. The issue of anti-labour practices extends beyond national borders, with global implications. Interviews conducted by the International Labour Organization (ILO, 2020) reveal that the migration of Nigerian workers to countries with stronger labour protections can partly be attributed to anti-labour practices at home.

Historically, skilled migration has been influenced by various factors such as economic opportunities, political stability, educational pursuits, and quality of life (Stark, 1991). Early skilled migration was often driven by colonial expansion, with professionals like doctors, engineers, and teachers relocating to colonies to fill essential roles (Docquier & Rapoport, 2012). In recent decades, globalization and the ease of international travel and communication have significantly facilitated skilled migration (Kuptsch & Pang, 2015). Bhagwati (2003) emphasizes

that globalization has profoundly impacted international labour mobility, making skilled migration more feasible due to improved communication and transportation (Bhagwati, 2003).

The economic impact of skilled migration according to Kerr (2018) is a subject of extensive research and debate. In host countries, skilled migrants often contribute positively to the economy by filling gaps in the labour market, driving innovation, and paying taxes. However, this comes at a cost to the countries of origin, where the loss of skilled professionals can impede economic development and exacerbate existing skill shortages. While analyzing the economic impact of skilled migration, Docquier and Rapoport (2012) focused on the potential benefits of migration, both for the host and origin countries. They emphasize that remittances from skilled migrants can positively influence the sending countries' economies. Meanwhile, Mountford (1997) probes into how skilled migration affects the labour markets of both sending and receiving countries. He discussed specifically the potential for complementarity rather than substitutability between skilled migrants and native workers (Mountford, 1997). Mayr et al. (2008) pointed out optimistically, how skilled migration can have a positive impact on technological progress and productivity. The trio argued that skilled migrants contribute significantly to technological advancement, spurring innovation in host countries. Winters (2011) provides insights into how skilled migration influences global inequality. He discusses how the emigration of skilled individuals can exacerbate inequality in sending countries, particularly in terms of access to education and healthcare. On the other hand, Crul (2016) expounded on skilled migration from the social and cultural points of view. According to him, Skilled migration has significant social and cultural implications. It can lead to multiculturalism and diversity in host countries, enriching society by bringing in varied perspectives and experiences (Crul, 2016).

However, in countries of origin, the departure of skilled professionals can result in a 'brain drain,' impacting education, healthcare, and other critical sectors (Beine et al., 2016). However, policies need to balance the benefits of attracting skilled migrants with the need to retain and utilize skilled professionals domestically (Khadria, 2017).

Various reasons have been identified for the migration of skilled professionals, Smith (2018) identified economic prospects as a cogent reason, which often stand out as a primary driver of skilled migration. Skilled professionals, including engineers, doctors, and IT specialists, are attracted to countries with stronger economies and higher earning potential. As discussed in Smith's (2018) analysis, skilled professionals from developing countries often seek opportunities in advanced economies with the promise of better wages and career advancement (Smith, 2018). Education plays a pivotal role in skilled migration, countries like the United States and the United Kingdom are magnets for international students pursuing higher education, Gao et al. (2019) emphasise the allure of prestigious universities and access to cutting-edge research facilities. Many students remain in these countries post-graduation to leverage their newly acquired knowledge and skills (Gao et al., 2019). In another dimension to this, Taylor and Brown (2017) explore the

recognition of qualifications and professional growth prospects as a core influence of migration decisions among skilled professionals. They highlight the frustration of skilled professionals whose qualifications are not acknowledged or appropriately valued in their home countries. Migrants seek destinations where their expertise is recognised and rewarded (Taylor & Brown, 2017).

Exploring a different point of view, Chen (2021) recognizes family considerations as a driver of skilled migration. Chen illustrates how family reunification policies in Canada and Australia encourage skilled professionals to migrate with their families. The quality of life, including access to healthcare, education, and a safe environment, has also been identified as a compelling factor influencing skilled professionals' migration. Skilled professionals often seek destinations with well-developed social services and a high standard of living. Anderson (2019) has a different opinion on this issue as he insists that skilled professionals are increasingly mobile in an interconnected world, thus the ability to work remotely and collaborate across borders fosters a global outlook. In other words, Anderson (2019) highlights how advancements in technology and the rise of remote work options have expanded the opportunities for skilled professionals to seek employment beyond their home countries, propelling the migration of skilled professionals abroad.

## **THEORETICAL FRAMEWORK**

This study used the push-pull theory of Ernst George Ravenstein (1885) to elucidate migration patterns and motivations. Ravenstein's seminal work, "The Laws of Migration," introduced the concept that migration is driven by both "push" factors, which compel individuals to leave their place of origin, and "pull" factors, which attract them to new destinations (Ravenstein, 1885). In Ravenstein's original formulation, "push" factors encompassed adverse circumstances in the place of origin, such as economic hardships, limited employment opportunities, and unfavourable living conditions, which drive individuals to seek better prospects elsewhere (Ravenstein, 1885). These factors were foundational in shaping the theory and understanding of migration dynamics.

Over the years, scholars and researchers have built upon Ravenstein's work, expanding the theory to incorporate a broader range of factors influencing migration decisions. Economists like Lee (1966) emphasized the economic determinants in the Push-Pull Theory, meager wages and lack of employment opportunities, as significant push factors, further developing the economic aspect of the theory (Lee, 1966). Political instability and unfavourable political conditions have also been acknowledged as crucial push factors affecting migration decisions (Black, 1980).

The concept of "pull" factors was also enriched by scholars such as Gurak and Caces (1992), who emphasized the importance of higher wages and improved living standards in attracting individuals to migrate (Gurak & Caces, 1992).

In summary, the Push-Pull Theory has a rich historical foundation, originating from Ravenstein's work in 1885, and has been significantly refined and expanded upon by subsequent scholars, making it a vital framework for understanding migration patterns and motivations. The Push-Pull Theory provides a valuable framework for understanding migration patterns and motivations. It posits that migration is influenced by a combination of "push" and "pull" factors. "Push" factors are circumstances that compel individuals to leave their place of origin, while "pull" factors attract them to a new destination. Push factors represent the negative aspects of the place of origin that propel individuals to migrate. Economic factors are key push factors. High unemployment rates and low wages in the home country can drive individuals to seek better economic opportunities elsewhere (Lee, 1966).

Similarly, adverse living conditions, lack of essential services, and limited educational and healthcare facilities can prompt individuals to migrate (Ravenstein, 1885). Political instability and social unrest are significant push factors (Black, 1980). People may migrate due to fears for their safety and the desire for a more stable and secure environment. On the flip side, pull factors represent the attractions of a new destination that entice individuals to migrate. Economic opportunities, including higher wages and better job prospects, often are strong pull factors (Gurak & Caces, 1992). Improved living standards, access to quality education, and healthcare, and a better overall quality of life are additional pull factors (Zelinsky, 1971). Social and familial connections, as well as established immigrant communities, can be compelling pull factors (Taylor, 1999). The presence of a supportive community can ease the transition and integration process for migrants.

The Push-Pull Theory, an influential framework in migration studies, postulates that migration is driven by a combination of "push" and "pull" factors. These factors are crucial in understanding migration patterns, motivations, and the decision-making process of individuals regarding migration. According to Massey et al. (1998), Skilled migration can be attributed to a complex interplay of push and pull factors. These push factors in the home country include economic instability, political unrest, lack of opportunities, low wages, and inadequate working conditions. Pull factors in the host country encompass better career opportunities, higher wages, access to advanced technology and research facilities, political stability, and a higher quality of life (Gupta & Omonbude, 2019).

According to research by Salazar (2019), Low wages resulting from anti-labour practices are a significant push factor for migration. Salazar concluded that workers subjected to wage theft and unpaid overtime often struggle to make ends meet. In such cases, migration becomes a means to access higher-paying jobs (Salazar, 2019). Similarly, in an article by González and Martínez (2017), the absence of robust worker protections is a notable push factor. González and Martínez highlight how lax enforcement of labour laws allows employers to engage in exploitative practices without consequence. Migrants perceive countries with stronger labour regulations as more



attractive destinations (González & Martínez, 2017). In the same vein, Rodríguez (2018), in his article, emphasized that workers exposed to hazardous working conditions due to lax safety regulations and anti-labour practices may migrate to escape physical harm. Rodríguez discusses how workplace injuries and health risks drive workers to seek safer environments abroad (Rodríguez, 2018).

Some pull factors for migration have been identified by scholars, and they include; Job opportunities and better working conditions. According to Zhang et al. (2020), Destination countries with a strong demand for labour often attract migrants seeking better job opportunities and improved working conditions. Zhang et al. reveal that migrants are drawn to countries with robust labour markets and stricter adherence to labour standards (Zhang et al., 2020). In a similar manner, ITUC(2021) concluded that migrants also seek destinations with more robust legal protections and more tremendous respect for union rights. It highlighted how strong labour unions and legal mechanisms for addressing workplace grievances influence migrants' choices (ITUC, 2021).

The Nigerian Government's anti-labour policies, human rights abuses, political instability, and limited freedoms can create a sense of insecurity and instability. These unfavourable conditions act as strong push factors, compelling individuals to leave their home country for safety, political freedom, and a more secure environment, which aligns with the push factors outlined by the Push-Pull Theory. On the other hand, the United Kingdom represents a destination with attractive pull factors. Economic opportunities, a stable political climate, access to better healthcare, and quality education are major pull factors for migrants (Migration Advisory Committee, 2020). The UK's relatively higher standard of living, well-established social systems, and employment opportunities are all factors that draw individuals seeking a better quality of life and improved socio-economic conditions, aligning with the pull factors identified in the Push-Pull Theory. The migration from Nigeria to the United Kingdom involves a complex decision-making process, wherein individuals weigh the adverse conditions they face in Nigeria against the attractive prospects offered by the UK. The decision to migrate is influenced by personal circumstances, family considerations, and the perceived opportunities and advantages available in the UK (Massey et al., 1993). The evaluation of push and pull factors is integral to this decision-making process.

## **METHODOLOGY**

This study is qualitative research; the researcher adopted the documentary method based on documented evidence and secondary sources of data collection. The researcher used relevant academic literature, including textbooks, newspapers, government publications, research papers, journal articles, commission reports, seminar papers, official documents, and relevant databases such as World Data Banks. The study adopted the qualitative-descriptive method of data analysis. Qualitative-descriptive analysis verbally and visually summarizes research findings (Asika, 2006).

According to Nwanolue et al. (2018), qualitative-descriptive analysis is a descriptive verbal analysis that involves interpretation, description, and explanation of qualitative data from unstructured observation, interviews, documents, and quantitative data collected from documents. Also, appropriate tables and charts were utilized to convey the facts simply and logically to reveal the trends in the practices of the Nigerian Government and the overbearing issue of labour migration to the United Kingdom.

### **ANTI-LABOUR PRACTICES AGAINST HEALTH CARE WORKERS IN NIGERIA**

The migration of healthcare professionals, mainly from low- to high-income countries, is a complex and multifaceted phenomenon with significant implications for both source and destination countries (Buchan & Black, 2019; World Health Organization, 2020). This issue has remained a subject of concern over the past decade. Numerous reasons have been brought forward to be the cause of this ever-increasing phenomenon. These factors include;

#### **Poor Remuneration**

Remuneration is traditionally described as an individual's total income and may comprise a range of separate payments determined according to different rules. Remunerations may include salary and incentives. Incentives may be monetary or non-monetary. Money remuneration is one primary motivator of workers, and organizations have used it to attract, retain, and lure workers. (Adamu, 2023). Remuneration can motivate workers to be more committed at work. Duru (2021) also affirmed that remuneration increases morale primarily when the remunerations are judged as equitable. The resultant effect of poor remuneration of skilled health workers on migration shall be our focus in this section. Health workers are all people whose main activities are aimed at enhancing health. They include those who provide health services, such as doctors, nurses, pharmacists, and laboratory technicians. In other words, Joseph and Joseph (2016) described a healthcare worker as one who delivers care and services to the sick and ailing either directly or indirectly.

The inadequate compensation of healthcare workers has been a subject of ongoing debate in Nigeria, with healthcare professionals consistently expressing their concerns regarding this matter; this has gained significant attention in recent years due to its potential to contribute to the global phenomenon of healthcare professional migration. This issue is of utmost importance, as it involves both the well-being of healthcare workers and the quality of healthcare services provided to populations worldwide. According to Stilwell and Diallo (2018), remuneration is paramount and a central factor influencing a healthcare worker's migration. They argue that healthcare professionals, such as doctors and nurses, are drawn to countries with better compensation packages and working conditions, often resulting in a drain of skilled healthcare personnel from less affluent regions. Similarly, World Health Organization (2019), in its reports, emphasized the role of salary differentials and working conditions as key drivers of healthcare worker migration, affecting both developed and developing nations.

This excessive migration of medical professionals from Nigeria is not entirely surprising because, compared to other countries, Nigerian doctors earn far less than their colleagues working in other countries. This, amongst other factors according to Uduu (2023), has led to migration as doctors try to boost their incomes (Uduu, 2023). According to Uduu, The Federal Government increased its minimum wages for workers in 2019, which trickled down to all categories of workers under its payroll, including medical doctors. However, the amount paid to doctors is still a far cry compared to what is paid to counterparts in most countries Nigerian doctors migrate to. The table below presents the salaries of healthcare professionals in Nigeria compared to their counterparts in the UK.

**Table 1: Comparing the annual salary of healthcare professionals in Nigeria with their counterparts in the UK**

S/N	Healthcare Professional	Annual salary		Source	
		A. Nigeria	B. UK	A	B
1	Physician (Doctor)	₦2.9 Million	£62,497	Adamu, 2023	<i>Indeed, 2023</i>
2	Surgeon	₦3,000,000	£80,171	Adamu, 2023	<i>Indeed, 2023</i>
3	Nurse	₦1.4 million/year	£33,384	Adamu, 2023;	<i>Indeed, 2023</i>
4	Dentist	₦2.5 million/year	£80,000	Adamu, 2023	<i>Indeed, 2023</i>
5	Pharmacist	₦1.6 million/year	£48,937	Adamu, 2023	<i>Indeed, 2023</i>
6	Medical Laboratory Scientist	₦1.4 million/year	£30,165	Adamu, 2023	<i>Indeed, 2023</i>
7	Physiotherapist	₦1.7 million/year	£38,642	Adamu, 2023	<i>Indeed, 2023</i>
8	Public Health Physician	₦2.1 million/year	£78,037	Adamu, 2023	<i>Indeed, 2023</i>
9	Radiologist	₦2.3 million/year	£66,599	Adamu, 2023	<i>Indeed, 2023</i>
10	Optometrist	₦1.8 million/year	£64,604	Adamu, 2023	<i>Indeed, 2023</i>
12	Psychiatrist	₦2.2 million/year	£92,494	Adamu, 2023	<i>Indeed, 2023</i>
13	Veterinarian	₦1.9 million/year	£91,271	Adamu, 2023	<i>Indeed, 2023</i>

**Source:** Compiled by the Researcher (2024)

The table above shows a significant margin between what is paid to Nigerian doctors and doctors in the UK. The meagre amount of money paid to doctors in Nigeria, which cannot afford them a good life, has made them look for opportunities outside the country. As these healthcare professionals migrate, they move to countries where they can earn relatively more while rendering services. Data from the Organization for Economic Cooperation and Development (OECD) show that most Nigerian doctors are in the United Kingdom, the United States, Canada, Ireland, and Germany. The table below shows the distribution of Nigerian doctors across other countries (Onah et al., 2022).

**Table 2: Countries with higher number of Nigerian doctors**

Country	Year	Number
United Kingdom	2021	4880
United States	2016	3,634
Canada	2020	932
Ireland	2021	234
Germany	2020	133

**Source:** Dataphyte Research (2022)

From the table above, data shows that the bulk of the migrant Nigerian doctors are in the United Kingdom. The salaries of medical doctors in the country have seen some increment over the years. Data from the National Salary, Income and Wages Commission (NSIWC) show that in 2019 a medical doctor at entry level (2/1) received N1,812,600 (\$5,911.94) per annum. In 2010, doctors were paid N1,551,986 (\$10,464.47) annually. In 2011 it was N1,562,586 (\$10,292.36) annually, and N1,562,586 (\$9,987.77) in 2014. When compared to other countries, details show that salaries paid to medical doctors in Nigeria are far less than what those who migrated to other countries earn. Salary comparison in 2019, when the last minimum wage was effected, shows that Nigerian doctors' annual salary was \$5,912. However, those in Canada received \$75,460 the same year. In the US, it was \$79,400, but \$63,600 in the UK. In Germany, this was \$143,500; \$83,927 in France, and \$70,386 in Italy (Uduu, 2023).

### **Limited Enforcement of Labour Laws**

Labour laws, also known as employment or labour regulations, are a set of legal rules and regulations that govern the relationship between employers and employees. These laws are designed to protect the rights and interests of workers, ensure fair and safe working conditions, and regulate various aspects of the employer-employee relationship (Singh, 2007). Labour laws can vary from one country to another and even within different regions or states. Srivastava (2012) outlined some common elements and principles in labour laws, including Employment Contracts. Labour laws mandate that employers furnish employees with comprehensive written employment contracts delineating the terms and conditions of their engagement. These contracts encompass crucial aspects such as wages, working hours, and additional benefits. Minimum wage provisions

are instituted to ensure equitable remuneration, while regulations prescribe limits on working hours, encompassing provisions for overtime pay and delineations for daily or weekly work duration (Srivastava, 2012).

Occupational health and safety laws are in place to safeguard employees within a secure working environment, stipulating the requisite safety equipment, training protocols, and preventative measures to avert workplace accidents (Hughes, 2011). The overarching objective of labour laws is to preclude workplace discrimination, addressing variables such as race, gender, age, religion, disability, or sexual orientation and actively confronting issues like sexual harassment. Furthermore, these laws govern employee entitlements, including provisions for paid leave, maternity and paternity leave, and retirement plans (Duru, 2021). Parameters for termination and severance are intricately defined within these legislative frameworks. Collective bargaining is facilitated, enabling the resolution of labour disputes. Robust child labour laws delineate age limits and circumscribe the types of employment suitable for minors. Unemployment benefits find their establishment through these legal provisions, and whistleblower protections are enacted to shield employees from retaliatory actions. Workers' compensation laws obligate employers to remunerate employees for injuries or illnesses stemming from work-related incidents. In sum, these statutes collectively form a comprehensive regulatory tapestry that strives to uphold the rights and well-being of the workforce (Fudge, 2017).

Our study discovered that for the past 10 years in Nigeria, there were various challenges and criticisms related to Nigeria's enforcement of labour laws. Some of which include labour rights and union activities. Labour unions in Nigeria, such as the Nigeria Labour Congress (NLC) and the Trade Union Congress (TUC), have often criticized the Government for its lack of commitment to workers' rights and welfare. They accused the Government of not adequately enforcing labour laws and not addressing issues like minimum wage adjustments and workers' rights (Nwoko, 2009). The criticism from labour unions in Nigeria regarding the Government's commitment to workers' rights and labour law enforcement was a recurring issue. Some of the critical concerns and criticisms raised by these unions include the adjustment of the national minimum wage. Labor unions demanded higher minimum wages to reflect the rising cost of living, while the Government sometimes needed to respond to these demands. Negotiations and sometimes strikes pressure the government to increase the minimum wage to better meet the workforce's needs (Nwoko, 2009). According to Nwoko, Labour unions accused the Government of not protecting workers' rights and improving their overall welfare. This encompassed issues such as fair working conditions, job security, and access to social benefits. High unemployment rates and a lack of job security were significant concerns. Reports from the Nigeria Labour Congress (NLC, 2017) highlight instances where government policies and actions have favoured corporations over workers' rights. In addition, an interview conducted by Adereti (2016) with industry insiders suggests that some corporations leverage their influence to undermine labor regulations and suppress workers' demands. In response to anti-labour practices, labour movements, and civil society organisations

have emerged as key players in advocating for workers' rights in Nigeria. Workers often faced precarious employment conditions, and the Government was criticized for not implementing policies to create more stable job opportunities. The labour unions also raised concerns about the continued prevalence of child labour in some sectors, despite laws against it (Thévenon, 2019). They urged the Government to take more rigorous measures to combat exploitative labour practices. Solaja (2015) highlighted the criticism of labour unions against the widespread use of casualization and contract labour, which often denied workers job security and access to benefits. They called for stricter regulations and enforcement to address these issues. Solaja also said that a common complaint from the labour unions was the perceived weak enforcement of existing labour laws and regulations. According to him, Labor unions often point to corruption, inadequate resources, and a lack of government commitment as reasons for the ineffective enforcement of labour laws (Solaja, 2015).

### **MIGRATION OF HEALTH CARE PROFESSIONAL TO UNITED KINGDOM AND OTHER COUNTRIES**

Historically, Nigeria has been a significant source of skilled migrants to the UK. According to scholars like Igwe (2017), the British colonial legacy and the strong historical ties between the two countries have contributed to this migration pattern. Igwe argues that the legacy of British education and institutions in Nigeria has created a skilled workforce proclivity for migration to the UK (Igwe, 2017). Nigeria's status as a British colony for much of the 20th century laid the foundation for the migration of skilled professionals. The colonial administration established educational institutions in Nigeria that mirrored British systems. Scholars like Smith (2015) emphasise that this legacy of British-style education in Nigeria has led to the development of a highly educated population, particularly in fields such as medicine, engineering, and law (Smith, 2015). Historical ties between Nigeria and the UK extend beyond education. The cultural and economic exchanges between the two nations have deep historical roots. A report by the Migration Policy Institute (MPI, 2018) highlights the enduring links between Nigeria and the UK, emphasising that cultural familiarity and shared language contribute to the attractiveness of the UK for Nigerian migrants. The report further notes that these ties have facilitated migration patterns (MPI, 2018).

Economic opportunity is one of the primary factors driving skilled migration from Nigeria to the UK. A report by the International Organization for Migration (IOM, 2020) notes that the UK's strong economy, higher wages, and access to better job opportunities make it an attractive destination for Nigerian professionals. Interviews with Nigerian migrants conducted by BBC Africa (2019) confirm that economic prospects are a significant pull factor, with skilled workers seeking better financial stability and career growth in the UK. According to Adeyemi (2018), education is a critical driver of skilled migration. The Nigerian educational system produces many graduates with advanced degrees, many seeking further educational and career opportunities in the UK. Research by Adeyemi (2018) highlights the appeal of UK universities and their reputation for

providing high-quality education. Adeyemi notes that Nigerian students often remain in the UK after completing their studies to gain work experience and access to global job markets (Adeyemi, 2018).

The migration of healthcare professionals is a particular concern for Nigeria. Interviews with healthcare workers, as documented by Ogunbekun et al. (2019), reveal that factors like inadequate infrastructure, low salaries, and challenging working conditions drive healthcare professionals, including doctors and nurses, to seek better opportunities abroad. The resultant brain drain has severe implications for the Nigerian healthcare system, which struggles to retain skilled workers (Ogunbekun et al., 2019). The exodus of healthcare professionals is driven, in part, by the challenges they face within the Nigerian healthcare system. Scholarly works like Osinubi's (2018) analysis underscore Nigeria's inadequacy of healthcare infrastructure. Osinubi argues that the lack of modern equipment, outdated facilities, and limited access to essential resources make it difficult for healthcare professionals to deliver quality care (Osinubi, 2018). Low salaries and financial constraints further incentivise healthcare professionals to seek opportunities abroad. A report by the Nigerian Medical Association (NMA, 2017) discusses the challenges of low remuneration for doctors in Nigeria. The report highlights the financial strain healthcare professionals' face in a system where salaries often are not commensurate with their qualifications and responsibilities (NMA, 2017). Working conditions and job satisfaction are central to healthcare professionals' migration decisions. Interviews conducted with Nigerian healthcare workers, as documented by The Lancet (2019), reveal that many professionals are dissatisfied with the working conditions characterised by long hours, heavy workloads, and inadequate support systems. These challenges erode job satisfaction and drive healthcare workers to seek better opportunities abroad (The Lancet, 2019). The migration of healthcare professionals directly impacts healthcare delivery in Nigeria. A Health Systems Nigeria (HSN, 2020) study highlights the shortage of healthcare workers resulting from this migration. HSN notes that the reduced availability of doctors and nurses in Nigerian healthcare facilities leads to increased patient loads, longer waiting times, and compromised quality of care (HSN, 2020).

The number of Nigerian-trained doctors practicing in the United Kingdom has climbed to 11,001. Between February 2 to March 15, 2023, 162 Nigerian-trained doctors were licensed to practice in the UK (Adejoro, 2023). According to Adejoro, a total of 15 doctors were licensed to practice in the UK in three days, from March 16 to March 18, 2023. The report is according to the register of the General Medical Council of the UK.

The International College of Surgeons, Nigerian Section, ICS-NS, has said the country lost no fewer than 6,221 doctors to the United Kingdom in the last six years. According to the college, this has made it difficult for over 40 million Nigerians to see a doctor, as the patient-to-doctor ratio has risen sharply. President of the college, Prof. Akanimo Essiet, and the Secretary-General, Prof. Lucky Onotai, said: "The 'JAPA' phenomenon has drastically reduced our healthcare workforce"

(Bankole, 2023). Studies show that about 87 per cent of the Nigerian workforce are dissatisfied and wish to emigrate to greener pastures. According to Bankole (2023), in 2022, Nigeria had a ratio of 1 doctor to 4,000 patients whereas the WHO recommended standard is 1 doctor to 600 patients. Bankole further observed that Evidence shows that this gap increases daily as the number of registered Nigerian doctors in the UK rose from 4,765 in 2017 to 10,986 in 2023 (Bankole, 2023). Thus, a whopping 6,221 doctors were lost to the UK in the past six years, therefore suggesting that over 40 million Nigerians will find it harder to see a doctor. With the devaluation of our naira currency and the increased discrepancy between the Nigerian naira to dollar, the Nigerian healthcare professionals now earn one-fifth to one-tenth of what their foreign counterparts earn (Bankole, 2023).

At least 5,600 Nigerian medical doctors have migrated to the United Kingdom (UK) in the last eight years (Adebowale, 2022). In 2015, 233 Nigerian doctors moved to the UK; in 2016 the number increased to 279; in 2017 the figure was 475, in 2018, the figure rose to 852, in 2019 it jumped to 1,347; in 2020, the figure was 833 and in 2021 was put at 932,” (Adebowale, 2022). He also said a total of 727 medical doctors trained in Nigeria relocated to the UK in six months, between December 2021 and May 2022 (Adebowale, 2022).

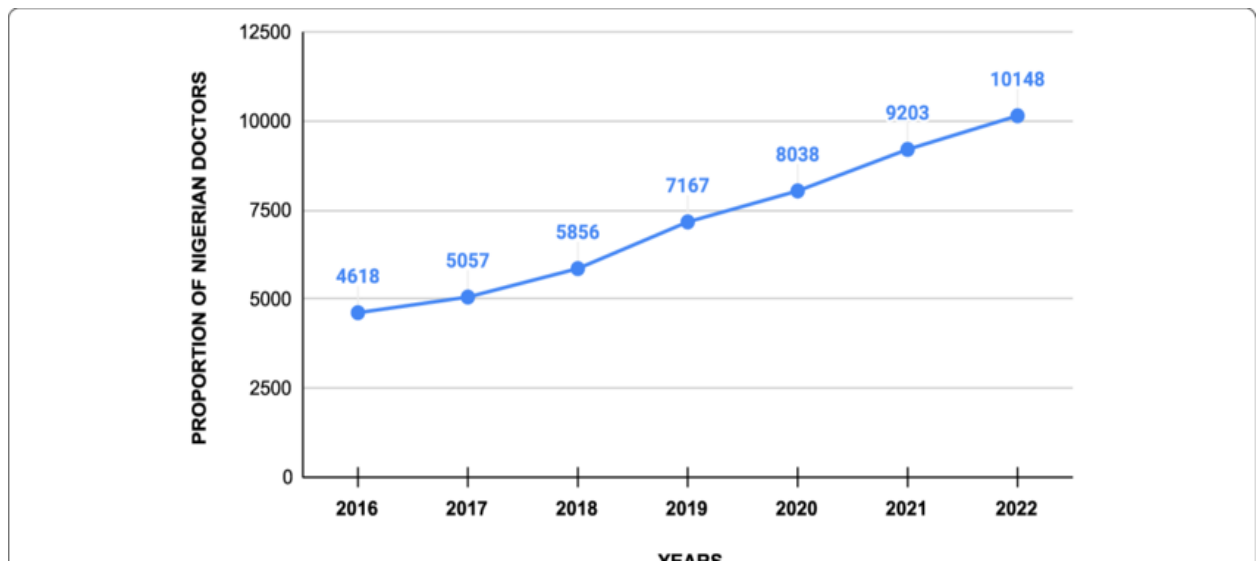


Figure 1: Number of Nigerian doctors on the General Medical Council (UK) Register  
Source: International Journal for Equity in Health (2023).

Similarly, Ekekezie & Ezenekwe (2017) examined the migration of Nigerian nurses and midwives. They highlighted low salaries and poor working conditions as key drivers of migration, leading to



a shortage of healthcare professionals in Nigeria. Ekekezie and Ezenekwe (2017) emphasised low salaries and poor working conditions as drivers of nurse and midwife migration from Nigeria.

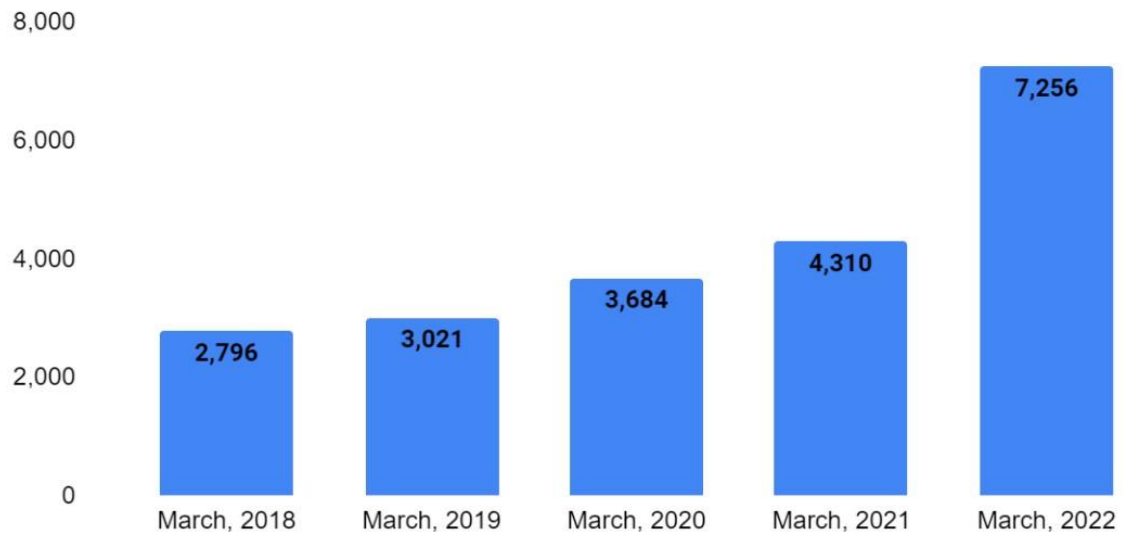


Figure 2: Number of Nigerian Trained Nurses on the Permanent Register of the UK

Source: UK Nursing and Midwifery Council 2022 Report. <https://www.dataphyte.com/latest-reports/7256-nigerian-trained-nurses-japa-to-the-uk-highest-number-in-5-years/>

According to a report from the United Kingdom (UK) Nursing and Midwifery Council (NMC), the tally of Nigerian-trained nurses now listed on the UK permanent register has seen a notable rise, reaching 7,256 as of March 2022 (Amata, 2022). This figure has significantly surged from 2,796 in March 2018, indicating a substantial increase over the last four years. Notably, between March 2021 and March 2022, there was a remarkable addition of 2,946 Nigerian-trained nurses to the UK's permanent register, marking a substantial 68% increase compared to March 2021 and representing the highest number recorded in the past five years. In March 2018, the count of trained nurses on the UK permanent register was 2,796. This number saw an 8% rise to 3,021 in 2019, continuing to escalate annually, ultimately peaking at 7,256 nurses in March, underscoring the strain on a deficient nursing workforce within the country. The difference of 4,460 nurses between the registered numbers in 2018 and 2022 constitutes a significant 61.5% of the total 7,256 nurses currently listed on the UK permanent register (Amata, 2022).

Publication of the European Centre for Research Training and Development -UK

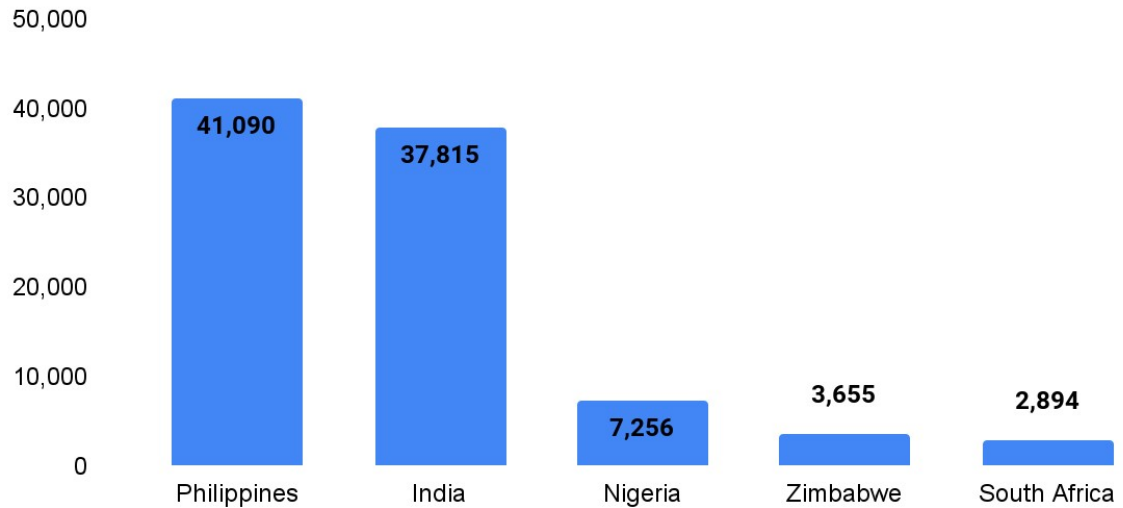


Figure 3: Top 5 Countries in the World whose Trained Nurses are on the UK Permanent Register  
Source: UK Nursing and Midwifery Council 2022 Report <https://www.dataphyte.com/latest-reports/7256-nigerian-trained-nurses-japa-to-the-uk-highest-number-in-5-years/>

A further review of the data shows that the number of Nigerian nurses who emigrated to the UK between March 2021 to March 2022, and who were not trained in the European Union/European Economic Area are among the top 5. The number of Nigerian trained nurses who left for the UK were the third-highest in the world and highest in Africa. This mass relocation of trained nurses no doubt has enormous implications for the healthcare sector, which is already understaffed (Atama, 2022)

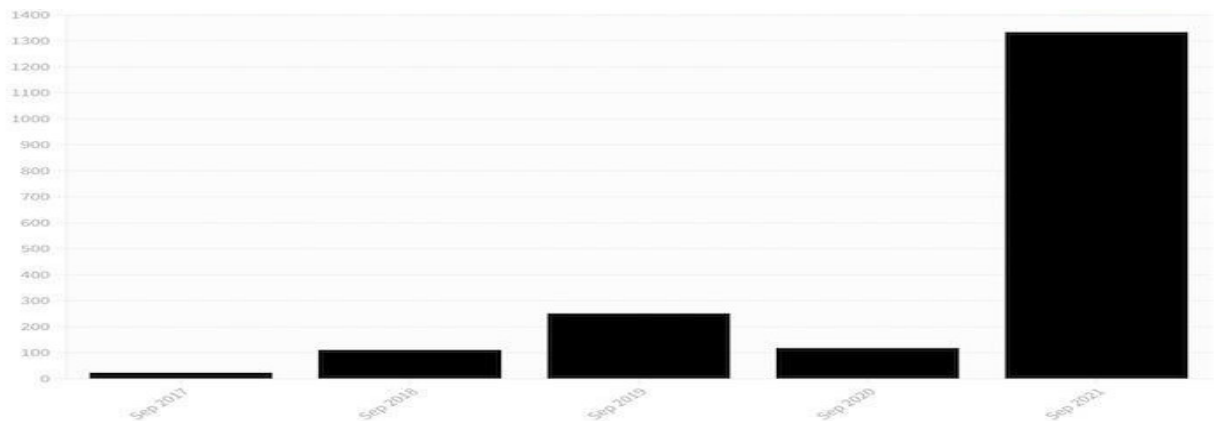


Figure 4: The rate of Nurses Leaving Nigeria for UK  
Source: UK Nursing and Midwifery Council: Business Day Analysis (2022)

The number of Nigerian nurses that joined the UK workforce in the six-month period from April to September 2021, is more than any time in history and this is despite a ban on ‘active recruitment’ of health and social care personnel from Nigeria (Ojewale, 2021).

According to Ojewale (2021), a record 1,334 Nigerian-trained nurses joined the workforce between March and September 2021. For context, within the same period of 2017, only 23 Nigerian-trained nurses joined the UK workforce. With the recent addition, there are now 5,612 Nigeria-trained nurses in the UK, a 51 percent increase within four years from 2,792 as of March 2017. Ojewale noted that remuneration issues such as; poor pay, which is often also paid late, unsatisfactory conditions of work, perceived low appreciation, and the generally poor quality of life in Nigeria have made seeking employment in places like the UK attractive for nurses and other health workers in Nigeria. The pay is also in many cases, more than 10 times what they currently earn in Nigeria.

According to Adamu (2023), a total of 39,912 doctors were available in Nigeria in 2017, the number of doctors increased to 44,021 in 2018, but this number reduced drastically to 24,640 in 2019, that means a whopping 19,381 doctors left the country within the space of one year. Such a drastic reduction in the number of trained medical personnel could pose a threat to any nation. A report by the World Health Organization revealed that for every 10,000 persons in Nigeria, there are 4 doctors available to treat or attend to them, which is fatal. The WHO puts the doctor-to-patient ratio at 1:600 standard, However, Nigeria’s doctor-to-patient ratio of 4:10,000 falls below the global recommendation. This has exacerbated Nigeria's healthcare issues by causing a medical brain drain that has left many people in need of medical advice from Nigerian doctors. The Guardian reports that the major cause of the decline in the number of doctors in Nigeria is the migration of Nigerian doctors abroad. According to the Nigerian Medical Association (2022), no fewer than ten thousand, two hundred and ninety-six (10,296) Nigerian-trained doctors are currently practising in the United Kingdom. It posited further that Nigeria has the third highest number of foreign doctors working in the UK after India and Pakistan. Further, the International College of Surgeons, Nigerian Section, (ICS-NS), said that the country lost no fewer than 6,221 doctors to the United Kingdom in the last six years, and the number of registered Nigerian doctors in the UK rose from 4,765 in 2017 to 10,986 in 2023. This meant that 6,221 doctors were lost to the UK in the past six years. This suggests that over 40 million Nigerians will find it harder to see a doctor (Onyegbula, 2023). The President of the Nigerian Medical Association (NMA), Dr. Faduyile, highlighted a pressing concern: out of the 75,000 Nigerian doctors registered with the NMA, a staggering 33,000 have departed the country. This exodus has resulted in a mere 42,000 doctors remaining to oversee the management of all healthcare institutions nationwide (Adamu, 2023) Moreover, Dr. Faduyile revealed a disconcerting reality about the distribution of medical professionals. In rural areas, the doctor-to-patient ratio stands at an alarming 1:22,000, indicating a severe shortage. In urban centers, the situation isn't much better, with a ratio of 1:10,000 to 1:12,000 Nigerians per doctor. Dr. Faduyile firmly attributed this persistent departure of medical

practitioners to a constellation of factors, including the alarming prevalence of insecurity, diminished job satisfaction, inadequate remuneration, high unemployment rates, and a beleaguered healthcare system.

### **EFFECT ON SUSTAINABLE DEVELOPMENT GOAL 3**

The migration of workers due to anti-labour practices has implications for home countries (Ong, 2019); the departure of skilled and unskilled workers can result in a loss of talent and productivity. Countries with high levels of emigration due to anti-labour practices may experience economic challenges and brain drain (Ong, 2019). The departure of skilled professionals can lead to declining productivity and innovation within key sectors, such as the health sector. Chiquiar and Hanson (2005) provide evidence that skilled migration can negatively impact the economic growth of home countries. Their research indicates that the emigration of highly educated workers can reduce a nation's human capital and hinder technological progress (Chiquiar & Hanson, 2005). This is the current situation in Nigeria; with the level of professional healthcare migration, there is a big concern as to how the country will achieve the Sustainable Development Goal of attaining good health and well-being for all.

Sustainable Development Goal 3 aims to attain optimal health and well-being for individuals across all demographics and age groups. Within Nigeria, the healthcare system is confronted with significant obstacles, including inadequate or deteriorating healthcare facilities and infrastructure, exorbitant costs associated with healthcare services that are unaffordable for the average citizen, substandard environmental conditions, and insufficient support for healthcare professionals. As if that was not enough, the healthcare sector is also experiencing a significant deficiency in personnel, as many medical practitioners emigrate annually in pursuit of improved working conditions abroad. For example, as reported in the Vanguard online news on March 11, 2024, approximately 16,000 doctors departed from the nation over five years, equating to an annual average of 3,200. This phenomenon has consequently undermined the provision of healthcare services within the country. The country's capacity to achieve both Universal Health Coverage (UHC) and the Sustainable Development Goals (SDGs) by 2030 is doubtful as a result of this, as the skilled health worker-to-patient ratio is 1:9,000, much below the WHO target (Nigerian Health Watch, 2024).

According to Yakubu, Shanthosh, Adebayo, Peiris, and Joshi (2023), The World Health Organization recommends a skilled health worker (SHW) density of 4.45 per 1000 in order to meet the health-related Sustainable Development Goals (SDGs). There exist apprehensions regarding the ramifications of the migration of social health workers (SHWs) on the healthcare infrastructure of Nigeria. Such ramifications encompass a rise in the clinical workload, a decline in the quality of care provided by the remaining SHWs, and an escalation in mortality and morbidity trends attributable to insufficient access to fundamental healthcare services. Nigeria already has one of the lowest life expectancy rates at birth worldwide (UNICEF, 2022). According to the report by

UNICEF (2022), Nigeria continues to have very low maternal and child health outcomes, mainly as a result of a weak health system and socioeconomic variables affecting the health of mothers and early children. Because of this, the nation's mother and child health status is still among the worst in sub-Saharan Africa, has not improved much, and has gotten worse over the previous ten years in several regions, especially the northern ones.

President Bola Ahmad Tinubu recently signed the National Policy on Health Workforce Migration, marking a significant step in tackling the nation's brain drain. Nigeria's Minister of Health and Social Welfare, Professor Muhammad Ali Pate, introduced the policy document, which emphasizes the shared commitment to addressing the complex issues raised by the migration of health workers. "This policy is born out of a collective resolve to address the complex dynamics of health worker migration, ensuring that the exodus of our skilled healthcare professionals does not compromise the integrity of the health system and the well-being of our citizens," he wrote in the policy document (Nigerian Health Watch, 2024). In order to lessen the detrimental consequences of health worker migration in the nation, the strategy also focuses on specific themes. These include the following: Research, Innovation, and Strategy, including Governance and Leadership; Equality; Strengthening Health Workforce Education and Training; Safety of Health Workers; Capacity Development; Health Diplomacy; and Ethical Recruitment. Despite all these efforts, more needs to be done, as the condition has remained unabated.

## **CONCLUSION**

Broadly, the study examined the increased migration of healthcare professionals, especially to the United Kingdom, focusing on the Nigerian Government's anti-labor policies as a reason for labor migration. From the analysis of the broad objectives, the study observed that anti-labour policies in Nigeria comprises different variables, and they stem from poor remuneration to limited enforcement of labour laws, which has led to the continued migration of health care professionals (comprise of medical doctors and nurses) in Nigeria. Thus, labour migration is a reactionary measure born out of the nature of Nigerian government policies.

In addition to the above, the study discovered that this mass migration has dealt a big blow to the health sector in Nigeria, drastically reducing the available healthcare care professionals to cater for the teeming population in the country, thereby crumbling the health system and making the achievement of the Sustainable Development Goal 3 nearly impossible in Nigeria.

## **RECOMMENDATION**

In turn to all the findings above, the study recommends the following;

1. Advocacy and implementation of comprehensive labour reforms in Nigeria, involving the revision of existing laws, constructive dialogue with stakeholders, and the strengthening of enforcement mechanisms to ensure fair working conditions, competitive wages, job

security, and the protection of skilled professionals' rights through monitoring and reporting mechanisms.

2. To improve the "brain gain," the government should continue to step in and create an atmosphere that supports healthcare professionals' success. If this isn't done, the health industry will become paralyzed, and the brain drain will increase.
3. To lessen the exodus of medical personnel, Nigerian governments at all levels should ensure that financial incentives are available to enhance the financial security of healthcare professionals. Raising wages, providing incentives, and ensuring payments are made on schedule. Thailand implemented this strategy, which improved the country's healthcare system and decreased the temptation to go outside in search of higher-paying employment. This strategy not only encouraged medical staff to remain, but it also strengthened their dedication to the community's healthcare system.

## REFERENCES

- Adamu, A. (2023, October 12). *Salary structure for healthcare jobs in Nigeria*. Ginsau. <https://ginsau.com.ng/salary-structure-for-healthcare-jobs-in-nigeria/>
- Adebowale, N. T. (2022, October 19). Brain Drain: Over 5,000 Nigerian doctors move to UK in eight years. *Premium Times - Nigeria leading newspaper for News, investigations*. <https://www.premiumtimesng.com/news/headlines/560511-brain-drain-over-5000-nigerian-doctors-move-to-uk-in-eight-years.html>
- Adejoro, L. (2023, March 19). Nigerian doctors practicing in UK hit 11,000. *Punch Newspapers*. <https://punchng.com/nigerian-doctors-practising-in-uk-hit-11000/#:~:text=The%20number%20of%20Nigerian%2Dtrained,to%20practise%20in%20the%20UK>
- Adeniran, J. (2019). Exploring the dynamics of anti-labor practices in Nigeria: Insights from labor activists. *Labor Studies Journal*, 44(3), 267-286.
- Adepoju, A. (2000). Issues and recent trends in international migration in Sub-Saharan Africa. *International social science journal*, 52(165), 383-394.
- Adereti, A. (2016). Corporate influence and anti-labor practices: Perspectives from industry insiders. *Journal of Labor and Industrial Relations*, 28(2), 129-148.
- Adeyemi, A. (2018). Nigerian students' choices and experiences of studying in the UK. *Higher Education Research & Development*, 37(5), 964-978.
- Adigwe, F., & Nwosu, O. (2021). Economic suppression and underemployment in Nigeria. *International Journal of Labor and Employment Relations*, 9(2), 67-84.
- Amata, D. (2022, July 11). 7,256 Nigerian trained nurses "japa" to the UK, 2022 number highest in 5 years. Dataphyte. <https://www.dataphyte.com/latest-reports/7256-nigerian-trained-nurses-japa-to-the-uk-highest-number-in-5-years/>
- Anderson, M. (2019). Global mobility and the changing landscape of skilled migration. *International Journal of Migration Studies*, 45(3), 321-344.

- Asika, N. (2006). *Research methodology in the behavioural sciences*. Ibadan: Longman Nigeria Plc.
- Bankole, I. (2023, June 21). “6,221 Nigerian doctors lost to UK in 6 Years.” *Vanguard News*. <https://www.vanguardngr.com/2023/06/6221-nigerian-doctors-lost-to-uk-in-6-years-says-intl-college-of-surgeons/>
- Barbash, J. (2017). Union suppression in the United States: A review of the literature. *Labor Studies Journal*, 42(3), 216–238.
- BBC Africa. (2019). *Nigerian migrants: The push and pull of the UK*.
- Beine, M., Docquier, F., & Rapoport, H. (2016). Brain Drain and Human Capital Formation in Developing Countries: *Winners and Losers*. *Economic Journal*, 126(593), 463-488.
- Biletta, I., De Stefano, V., & Papapetrou, M. (2021). Protecting workers' rights in the platform economy: A comparative analysis. *European Journal of Industrial Relations*, 27(1), 45-64.
- Black, R. (1980). Rural-Urban Migration and Resource Use in Developing Countries. *Journal of Development Studies*, 16(3), 244–261.
- Buchan, J., & Black, S. (2019). *The impact of pay and employment practices on the international migration of nurses: A review of the literature*. Geneva: World Health Organization.
- Chen, L. (2021). Family reunification policies and skilled migration: A comparative analysis. *Journal of Population Research*, 38(2), 189–210.
- Chiquiar, D., & Hanson, G. H. (2005). International Migration, Self-Selection, and the Distribution of Wages: Evidence from Mexico and the United States. *Journal of Political Economy*, 113(2), 239-281.
- Cranford, C., Vosko, L. F., & Zukewich, N. (2019). International perspectives on precarious work. *Work, Employment and Society*, 33(3), 429-438.
- Crul, M. (2016). Super-diversity vs Assimilation: How Complex Diversity in Majority–Minority Cities Challenges the Assumptions of Integration Policies. *Journal of Ethnic and Migration Studies*, 42(1), 54–68.
- Docquier, F., & Rapoport, H. (2012). Globalization, Brain Drain, and Development. *Journal of Economic Literature*, 50(3), 681-730.
- Duru, I. U. (2021). Examination of the causes and consequences of international migration in Nigeria. *Asian Development Policy Review*, 9(4), 180–193.
- Ekekezie, C. O., & Ezenekwe, A. M. (2017). Brain drain and African development: Any possible gain from the drain?. *The Social Sciences*, 12(10), 1907-1912.
- Falana, F. (2021). Labor movements and resistance against anti-labor practices: A case study of Nigerian trade unions. *Labor Studies Review*, 50(1), 45-64
- Fudge, J. (2017). The future of the standard employment relationship: Labour law, new institutional economics and old power resource theory. *Journal of Industrial Relations*, 59(3), 374-392.
- Gao, Y. (2019). Educational and career aspirations of international students: A global perspective. *International Journal of Higher Education*, 8(3), 45-68.

- González, L. L., & Martínez, S. (2017). Labour exploitation and migration: A comparative analysis. *International Migration*, 55(3), 165-182.
- Gupta, S., & Omonbude, I. O. (2019). Exploring Push and Pull Factors of Skilled Migration: A Study of Indian Professionals in Australia. *International Migration*, 57(1), 215-230.
- Gurak, D. T., & Caces, F. (1992). International Migration and the Education of Children: Evidence from Lima, Peru. *International Migration Review*, 26(4), 1431-1453.
- Health Systems Nigeria. (2020). *Healthcare worker migration and its impact on healthcare delivery*. HSN Reports.
- Hughes, P., & Ferrett, E. (2011). *Introduction to health and safety at work*. Routledge.
- Igwe, U. (2017). Historical roots of Nigerian migration to the United Kingdom. *Journal of Migration and Globalization*, 5(2), 134-150.
- ILO. (2020). *Addressing anti-labour practices: Implications for decent work and social progress*. ILO Publications.
- International Organization for Migration. (2020). *Understanding skilled migration from Nigeria to the UK: A comprehensive analysis*. IOM Reports.
- International Trade Union Confederation. (2021). *Global labor solidarity against unlawful dismissals: The case of Nigerian activists*. ITUC Reports.
- Johnson, M. (2014). Anti-labor practices in developing economies: Case studies from the manufacturing sector. *Journal of Development Studies*, 50(2), 241–258.
- Joseph, B., & Joseph, M. (2016). The health of the healthcare workers. *Indian Journal of Occupational and Environmental Medicine*, 20(2), 71–72. <https://doi.org/10.4103/0019-5278.197518>
- Kerr, S. P. (2018). Whither Globalization? The Past, Present, and Future of International Trade and Investment. *Journal of Economic Perspectives*, 32(2), 31–58.
- Khadria, B. (2017). *Migration of Highly Skilled Persons from Developing Countries: Impact, Policy Responses, and Economic Returns*. Migration Policy Institute.
- Kimball, A. (2007). Historical roots of anti-labor practices: A comparative analysis. *Labour History Review*, 72(1), 45–64.
- Kuption, C., & Pang, E. F. (2015). Global Labour Mobility Governance: Policies, Practices, and Perceptions. *International Migration*, 53(6), 1-13.
- Lee, E. S. (1966). A Theory of Migration. *Demography*, 3(1), 47–57.
- Massey, D. S., Arango, J., Hugo, G., Kouaouci, A., Pellegrino, A., & Taylor, J. E. (1998). *Worlds in Motion: Understanding International Migration at the End of the Millennium*. Clarendon Press.
- Massey, D. S., Arango, J., Hugo, G., Kouaouci, A., Pellegrino, A., & Taylor, J. E. (1993). Theories of International Migration: A Review and Appraisal. *Population and Development Review*, 19(3), 431-466.
- Mayr, K., Peri, G., & Radu, D. (2008). Brain Drain and Brain Gain in Europe: An Evaluation of the East-West and North-South Migrations. *Journal of Economic Geography*, 8(5), 689-713.



- Migration Advisory Committee. (2020). *Analysis of the impacts of migration. Report for the UK Home Office*. <https://www.gov.uk/government/publications/migration-advisory-committee-mac-report-eearefugees-analysis-of-the-impacts-of-migration>
- Migration Policy Institute. (2018). *Nigeria-UK migration pathways: Historical ties, contemporary trends*. MPI Reports.
- Mountford, A. (1997). Can a Brain Drain be Good for Growth in the Source Economy. *Journal of Development Economics*, 53(2), 287–303.
- Nigeria Labour Congress. (2017). *Report on government policies and anti-labor practices*. NLC Publications.
- Nigerian Health Watch (2024, September 16) Nigeria's Health Migration Policy to Address Brain Drain Aim to Boost Local Expertise. <https://articles.nigeriahealthwatch.com/nigerias-health-migration-policy-to-address-brain-drain-aims-to-boost-local-expertise/#:~:text=This%20has%20led%20to%20a,2030>.
- Nigerian Healthcare Development Initiative. (2021). *Healthcare workforce development and the impact of migration*. NHDI Publications.
- Nigerian Medical Association. (2017). *Challenges of remuneration for doctors in Nigeria*. NMA Reports.
- Nwanolue, B.O.G; Onuoha, B.C. & Obikaeze, V.C. (2018). Process and typology of research. In B.O Nwanolue; C.C. Ezeibe; E.T. Aniche, and V.C. Iwoha, (2018) (ed.), *Political inquiry and research methodology: Logic, designs, processes, methods and approaches* Enugu: Parakletes creative.
- Nwoko, K. C. (2009). Trade unionism and governance in Nigeria: A paradigm shift from labour activism to political opposition. *Information, society and justice journal*, 2(2), 139–152.
- Ogunbekun, I., et al. (2019). Healthcare workforce migration and its impact on Nigeria's healthcare system. *Health Policy and Planning*, 34(7), 523-531.
- Ogunkoya, O. A. (2019). Challenges and prospects of labor resistance against anti-labor practices in Nigeria. *African Journal of Economic and Labor Relations*, 8(1), 78-98.
- Ogunnubi, O., & Adewuyi, A. (2018). Precarious work and job insecurity in Nigeria: Implications of anti-labor practices. *Journal of African Business*, 19(3), 321–345.
- Ojewale, C. (2021, December 6). *Physician emigration from Nigeria and the associated factors: The implications to safeguarding the Nigeria Health System*. Human resources for health. <https://pubmed.ncbi.nlm.nih.gov/36539827/>
- Okafor, C., & Nwankwo, U. (2020). Anti-labor practices and workers' well-being in Nigeria: A case study of the manufacturing sector. *International Journal of Labour and Human Capital*, 2(1), 45-64.
- Olaniyan, D. A., & Omotosho, K. F. (2015). Historical evolution of labor relations in Nigeria. *Journal of Labour and Industrial Relations*, 17(2), 45-64.
- Onah, C. K., Azuogu, B. N., Ochie, C. N., Akpa, C. O., Okeke, K. C., Okpunwa, A. O., Bello, H. M., & Ugwu, G. O. (2022, December 20). *Physician emigration from Nigeria and the*

- associated factors: The implications to safeguarding the Nigeria Health System. Human resources for health.* <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC9764293/>
- Ong, A. (2019). Economic implications of worker migration due to anti-labour practices. *Economic Policy*, 46(2), 345-364.
- Osinubi, O. (2018). Healthcare infrastructure in Nigeria: Challenges and prospects. *Journal of Healthcare Management*, 45(2), 120-135.
- Ovunda, C., Okorie, N., & Uzoma, C. (2018). Policy considerations for addressing anti-labor practices in Nigeria. *Journal of Policy Research in Labour and Employment*, 4(2), 121-145.
- Ravenstein, E. G. (1885). The Laws of Migration. *Journal of the Statistical Society of London*, 48(2), 167-235.
- Rodríguez, E. (2018). Workplace injuries and migration: A case study. *Safety Science*, 110, 45-54.
- Rodríguez, J. P., & Romé, A. S. (2019). Anti-labor practices in the 21st century: A conceptual framework. *International Journal of Management Reviews*, 21(2), 221-240.
- Salazar, M. (2019). Wage theft and migration: An exploration of the link. *Labour Economics*, 65, 101-118.
- Sasu, D.D. (2023, February 2) Net migration rate in Nigeria 2000-2021. Statista.com <https://www.statista.com/statistics/1233163/net-migration-rate-in-nigeria/>
- Smith, J. (2015). Colonial education and skilled migration: The Nigerian case. *Journal of African History*, 60(2), 189-210.
- Smith, J. (2018). Economic opportunities and skilled migration: A comparative analysis of destination countries. *Journal of Comparative Economics*, 42(2), 321-345.
- Solaja, O. (2015). Labour casualization and trade unionism in Nigeria. *International Journal of Information, Business and Management*, 7(4).
- Srivastava, S. C. (2012). *Industrial relations and labour laws*. Vikas Publishing House.
- Stark, O. (1991). *The migration of labour*. Basil Blackwell
- Stiglitz, J. E. (2019). *People, power, and profits: Progressive capitalism for an age of discontent*. W. W. Norton & Company.
- Stilwell, B., & Diallo, K. (2018). The Role of Salary and Working Conditions in Healthcare Worker Migration. *Health Workforce Research*, 12(3), 230-242.
- Taylor, A., & Brown, H. (2017). Recognition of foreign qualifications and skilled migration: A comparative study. *International Migration Review*, 52(1), 78-101.
- Taylor, J. E. (1999). The New Economics of Labour Migration and the Role of Remittances in the Migration Process. *International Migration*, 37(1), 63-88.
- The Lancet. (2019). *Job satisfaction and migration among Nigerian healthcare workers*. The Lancet Reports.
- Thévenon, O., & Edmonds, E. (2019). *Child labour: Causes, consequences and policies to tackle it*.
- Tilly, C. (2018). *From mobilization to revolution*. Routledge.

- Uduu, O. (2023, April 16). *Nigerian doctors earn less than 10% of foreign counterparts*. Dataphyte. <https://www.dataphyte.com/latest-reports/nigerian-doctors-earn-less-than-10-of-foreign-counterparts/#:~:text=Salary%20comparison%20in%202019%2C%20when,France%2C%20and%20%2470%2C386%20in%20Italy>
- UNICEF (2022) *Health Lives in Nigeria: Evaluation of the effectiveness and impact of SDG 3*. <https://nationalplanning.gov.ng/wp-content/uploads/2023/02/SDG3-Healthy-Lives-in-Nigeria.pdf>
- Vosko, L. F. (2020). Precarious employment and the challenge for transnational labor law. *Comparative Labor Law & Policy Journal*, 41(3), 391-412.
- Winters, L. A. (2011). Skilled Immigration and the Employment Structures of US Firms. *Journal of International Economics*, 85(1), 114-128.
- World Bank. (2021). *Doing Business 2021: Nigeria*.
- World Health Organization. (2019). *Global Health Workforce Migration: Analysis of the Role of Salary and Working Conditions*. <https://www.who.int/publications/i/item/9789241505360>
- World Health Organization. (2020). *WHO Global Code of Practice on the International Recruitment of Health Personnel*. [https://www.who.int/hrh/migration/code/code\\_en.pdf](https://www.who.int/hrh/migration/code/code_en.pdf)
- Yakubu K, Shanthosh J, Adebayo KO, Peiris D, Joshi R (2023) Scope of health worker migration governance and its impact on emigration intentions among skilled health workers in Nigeria. *PLOS Glob Public Health* 3(1):1-22
- Zelinsky, W. (1971). The Hypothesis of the Mobility Transition. *Geographical Review*, 61(2), 219-249.
- Zhang, Q. (2020). Labour migration and working conditions: A comparative analysis. *Journal of Comparative Economics*, 48(1), 112-134.