Mitigating Physician Emigration in Nigeria by Improving the Internship Experience

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Introduction

Access to healthcare is a fundamental human right. However, Nigeria, among other under-resourced countries, continues to grapple with healthcare infrastructure and personnel challenges, making it difficult to achieve the Sustainable Development Goal (SDG) of universal health for all by 2030.¹ The low doctor-topatient ratio in Nigeria is one of the factors contributing to inadequate access to healthcare, which affects 63% of Nigerians.¹ This situation is worsened by the decreased interest in specialist training among interns, leading to healthcare worker shortages.² Additionally, many interns choose not to pursue medicine after completing their internships and show a growing preference to emigrate to developed countries.^{2,3}

Nigerian doctors have various career options, including clinical practice, academia, research, medical advisory, medical entrepreneurship, and nonclinical pursuits.⁴ During the compulsory one-year internship after graduation, they serve as first-contact physicians under supervision and decide on their career trajectories.^{2,4} Several studies have explored the factors influencing interns' specialty preferences to foster equitable distribution across clinical expertise.²

International studies have highlighted the impact of internship experiences on career aspirations and emigration decisions.³ They highlight why addressing the brain drain requires a critical focus on internships, a period where future specialists are nurtured and pivotal career decisions are made.^{2,3} A recent study by Akinwunmi et al. revealed that 79.5% of interns intended to pursue medical practice in foreign nations, and over 41% planned to migrate within two years.⁵ This coincides with the duration required to conclude their internship training and Nigeria's one-year compulsory National Youth Service Scheme.⁵ The Nigerian Medical Association reported that 727 medical doctors trained in Nigeria relocated to the UK within six months between December

2021 and May 2022, while 5600 doctors migrated over eight years. Unfortunately, this trend is projected to intensify in the coming years, as medical stakeholders and the Nigerian Medical Students Association (NiMSA) opposed a bill that would mandate Nigerian-trained medical and dental practitioners to practice in Nigeria for a minimum of five years before being granted a full license to migrate abroad.⁶ The Students' body has advised lawmakers to create a conducive environment and improve remuneration rather than enforcing laws that infringe on fundamental human rights and discourage prospective medical students.⁶

Negative Experiences of Interns

Adverse experiences during internships can profoundly impact doctors' personal and professional lives, making emigration more attractive.^{2,3} The negative experiences that favor emigration are classified as push factors and summarized in *Table 1*. Interns often experience excessive workload and burnout due to long hours, understaffing, limited resources, and being delegated to perform non-core duties.³ These experiences can lead to physical and mental exhaustion, decreased quality of life, loss of empathy, and depersonalization.³ Nigeria's economic challenges have also led to increased financial constraints for doctors, making basic needs and support unaffordable.^{1,2}

Early career doctors in Nigeria cite a lack of professional development and growth opportunities, a challenging work environment, and limited access to necessary equipment and support systems as reasons for migrating.² This trend contributes to brain drain and negatively impacts Nigeria's healthcare system.² The mistreatment of younger doctors has been reported as having severe consequences on their emotional well-being, job satisfaction, and professional development.⁷ These can include verbal abuse, humiliation, intimidation, and excessive criticism, impacting their self-esteem and confidence.⁷ The influence might be more pronounced in interns due to their early career stage and

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lack of experience, leading to powerlessness and frustration. Mistreatment and bullying also increase the risk of workplace violence against doctors, as public humiliation devalues the physician before patients, caregivers, and allied health workers. Unsurprisingly, such experiences, especially when severe, would naturally drive doctors to seek opportunities that offer a more respectful, supportive, and enabling environment, which is sought after in other countries. These multifarious challenges discourage Nigerian doctors in the diaspora who are willing to return.

Justification for Targeting the Realities of Interns

The career choices of young interns significantly impact the healthcare system of Nigeria. This factor plays a crucial role in determining the distribution of specialized services and the replacement of retiring healthcare professionals.⁴ Currently, nearly 50% of Nigerian-trained doctors practice abroad, resulting in a considerable forfeiture in medical education investment and the lost practice years having a multiplier effect.¹ Nigeria was among the nine countries that, as a group, lost two billion dollars between 2010 and 2017 due to brain drain.¹

Table 1. Push and Pull Factors Influencing Physician Emigration and Recommendations from Selected Studies.

Paper	Push Factors	Pull Factors	Negative experiences during the internship	Recommendations
Ikhide E. ¹	-Poor salaries -Working conditions -Inadequate medical facilities -Poor infrastructure	-Better working conditions -Prospects of higher salaries -Prospects of higher quality of life		-Legislative collaboration to fulfill 15% threshold of the National budget for health -Increased health expenditure -Proper implementation of extant regulations guiding terms of service of doctors under government scholarships/
Ezeike C.et al.²	-Better pay -Better working conditions -To acquire skills -Better living conditions -Dwindling economic prospects of the country -Declining standard of medical education	-Improvement in working experiences -Improvement in working conditions		-Improvement in working conditions -Early career guidance -Balanced exposure to all specialties
Cronin et al. ³	-Burnout(emotional exhaustion) -Depersonalization -Negative perception of training -Negative experience as an intern -Opportunities for better training abroad -Poor supervision of postgraduate training schemes -Preference for foreign-trained specialist -Lengthy specialty training -Unpredictable training pathways and duration -Better opportunities for work-life balance abroad.	-Positive perception of training -Choice/ desire to specialize -Age (Older interns) -Graduate entry doctors(those who did medicine as a second degree)	-Low staffing levels -High non-core task allocation -Poor mentoring supports during training -Poor level of supervision during internship -Poor level of preparedness on starting work as an intern -High levels of stress in the working environment -High level of bullying in the workplace	-Reduction of non-core task allocation -Improvement in staffing levels -Improvement of working conditions -Improvement in the reputation of the country's health system as a destination choice

Nigerian interns often migrate to Western countries, such as the United Kingdom, the United States of America, and Canada, in search of better job opportunities, remuneration, and working conditions. 5,8 Another reason is the promise of better job security and health insurance coverage.9 However, recent studies have shown a growing interest among Nigerian medical doctors seeking job opportunities in Middle Eastern countries, such as Saudi Arabia, Qatar, and Oman.¹⁰ Moreover, specialized surgical fields have become increasingly popular among Nigerian medical practitioners in these destination countries.² The countries where Nigerian medical doctors have shown interest have a defined doctor-to-patient ratio, significantly reducing the likelihood of physician burnout, which is an important reason for medical interns' migration, particularly after the internship year experience.¹⁰ Furthermore, these countries share leadership that supports and regulates universal healthcare, backed by efficient government funding and a robust national health insurance scheme.³ These countries also have cutting-edge research institutions, an efficient nationalized health information system, and a preventive medicine approach that has influenced this trend.³ This combination of factors has made these countries an attractive destination for Nigerian medical professionals seeking better opportunities

Given the substantial impact of interns' career choices on the healthcare system of Nigeria, it is justifiable to implement talent retention strategies that focus on interns. This approach maximizes the return on investment in medical education, ensures workforce stability, and secures future healthcare needs. ^{1,3,4} Improving internship conditions would also attract foreign-trained doctors to return for their housemanship, boosting the local workforce and increasing the likelihood of their

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retention.¹ Addressing their concerns and providing mentorships that support their growth would foster their commitment to the country's health system. Younger doctors are more adaptable to changing clinical landscapes, which is advantageous. Therefore, it is essential to address their concerns and provide mentorship that supports their growth to foster their commitment to the country's health system.

Impact of COVID-19 Pandemic on Interns

The COVID-19 pandemic has had a significant impact on the healthcare system of Nigeria, with essential health workers, particularly doctors, being among the most impacted. In the first week of the pandemic alone, approximately 20 doctors in Nigeria succumbed to COVID-19 complications, highlighting the devastating effect of the pandemic on the country's healthcare workforce.¹¹ The pandemic exacerbated existing fragility in Nigeria's healthcare system. While no specific data links the continuous surge in internal migration to the COVID-19 pandemic, we speculate that the shift could be attributed to the unfavorable experiences many healthcare workers endured, such as shortages of personal protective equipment, limited screening services, and poor hazard allowances.¹¹ The lack of commitment to protecting doctors encouraged intern migration due to inadequate hazard allowances below \$14, which is insufficient to cover treatment for potential COVID-19 cases. 12 Furthermore, the pandemic led to a shortage of essential healthcare workers, thereby increasing the burden on the few available and contributing to the migration intentions of healthcare professionals within and outside the country.

Addressing the Challenges

To retain Nigerian doctors, healthcare systems and policymakers must prioritize creating a work environment that fosters job satisfaction, fair compensation, and professional growth.^{2,3} *Table* 1 summarizes recommendations to address this challenge.

To address physician emigration, it is crucial to consider implementing policies and pull factors similar to those of destination countries, as outlined in *Table 1*. Additionally, it is essential to identify and address any shortcomings in managing the COVID-19 pandemic to improve physician retention in the local healthcare system. To achieve this, the Nigerian Medical Association (NMA), Nigerian Association of Resident Doctors (NARD), Medical and Dental Council of Nigeria (MDCN), Federal Ministry of Health (FMoH), Federal and State Governments, and Postgraduate Medical Colleges must work together.

These stakeholders should prioritize improving remuneration to reflect current economic realities, overhauling the medical curricula, and increasing the number of research institutions and laboratories.⁴ In addition, stakeholders can explore ways to align the postgraduate academic and fellowship routes to create a more seamless and effective transition for individuals pursuing

higher education and professional development and to help increase career options for doctors.⁴ A balanced rotation through all specialties has been suggested to help with the equitable distribution of specialties.²

Addressing mistreatment and bullying, implementing antibullying policies, and fostering a positive work environment can improve doctors' well-being and career satisfaction.⁷ The MDCN must also enforce the Code of Medical Ethics (COME) to discipline errant medical seniors who abuse their status in the workplace.

It is worth noting that Nigeria has yet to dedicate at least 15% of the annual national budget to healthcare. Most systemic challenges bedeviling healthcare can be solved through increased healthcare financing, enhanced healthcare insurance coverage, efficient distribution of resources, and elimination of bureaucratic bottlenecks and corruption. These measures will ensure that healthcare systems remain sustainable, doctors are retained, and patients receive the best care. 1,4

Conclusion

To establish sustainable healthcare in Africa's most populous country, increasing the number and distribution of doctors, specialist providers, and clinical researchers is imperative. To achieve this, evaluating career preferences and their determinants, like internship experience, can be a significant step in addressing the issue of brain drain and physician shortages. This assessment would enable stakeholders in the Ministry of Health and healthcare administrators to influence the career choices of interns, which, in turn, would benefit the local population and reduce economic losses from brain drain, thereby contributing towards establishing a robust healthcare system.

Summary – Accelerating Translation

In this article titled "Mitigating Physician Emigration in Nigeria by Improving the Internship Experience," we argue for the significance of positively influencing interns' experiences to address the issue of physician emigration in Nigeria. The negative experiences faced by interns, including excessive workload, burnout, inadequate remuneration, lack of professional development opportunities, mistreatment, and bullying, contribute significantly to their desire to emigrate. Therefore, we propose implementing strategies to create a supportive work environment that offers fair compensation, opportunities for professional growth, and access to necessary resources, along with addressing mistreatment and bullying, improving salaries, overhauling medical curricula, and enforcing the Code of Medical Ethics. By prioritizing the needs of interns, stakeholders can influence their career choices and increase the likelihood of retaining them within the Nigerian healthcare system, reducing the brain drain and addressing physician shortages. Additionally, it is crucial to increase healthcare financing, improve health insurance coverage, and eliminate bureaucratic bottlenecks and corruption to improve the healthcare system and retain doctors in Nigeria.

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