



Promoting Better Management of Migration in Nigeria

MAPPING OF NIGERIAN HEALTH AND EDUCATION PROFESSIONALS IN THE UNITED STATES OF AMERICA

JULY 2014



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European Union



International Organization for Migration (IOM)

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International Organization for Migration

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ACRONYMS AND ABBREVIATIONS

ANPA	Association of Nigerian Physicians in the Americas
IOM	International Organization for Migration
MPI	Migration Policy Institute
NAMC	Nigerian-American Multicultural Center
NANNNA	National Association of Nigerian Nurses in North America
NIDO	Nigerians in Diaspora Organisation
NNVS	Nigerian National Volunteer Service
UNICEF	United Nations Children’s Fund



EXECUTIVE SUMMARY

This mapping exercise was commissioned by the International Organization for Migration (IOM) and the federal Government of Nigeria, and was funded by the European Union (EU). The purpose of this mapping exercise was to provide the federal Government of Nigeria with access to relevant information on the Nigerian diaspora in the United States of America and to identify members who would be interested in contributing their competencies and skills for national development and investment in Nigeria. The information gathered will be used to assist the Government in mobilizing the Nigerian diaspora for development through diaspora investment schemes and temporary return of highly skilled professionals, particularly from the health and education sectors.

The mapping exercise was conducted by the consulting firm Human Security Group, from January 2014 through April 2014. The priority cities for this project were Atlanta, Georgia; Baltimore, Maryland; Chicago, Illinois; and Houston, Texas. Initial data on the Nigerian diaspora in the United States was collected through extensive desk research and literature review. For more in-depth data collection, an online survey, focus group discussions and key informant interviews were utilized.

The data illustrates a strong relationship between Nigerian health and education professionals in the diaspora and their home country. There have been a number of initiatives by individuals and diaspora community organizations to support the health and education sectors in Nigeria. There is also a very strong desire by second-generation Nigerian diaspora health and education professionals to play an active role in the development of the health and education sectors in Nigeria. Most importantly, there is a strong desire for the Government of Nigeria to take steps to create stronger relationships with diaspora professionals, organizations, and institutions that generate trust and foster communication between all parties.

The report is structured as follows:

- Part one provides an overview of the mapping exercise and a review of Nigeria's health and education systems, including the history of migration of Nigerians to the United States. This section also discusses the transnational networks that exist between Nigeria and the United States.
- Part two covers the data collection methodology for the mapping exercise, outlining specific data collection methods and participant engagement approaches. This section also details the methodology's limitations and guarantee of privacy and informed consent.
- Parts three through six provide an analysis of the collected data and participant feedback. Part three reviews the data collected from the online survey, focus group discussions and key informant interviews. Parts four, five and six present an in-depth analysis of the data collected from each method.

Based on participant feedback, there are a number of recommendations the Government of Nigeria should consider to develop effective strategies for diaspora engagement in the health and education sectors.

First, there was widespread consensus among the respondents that they were willing to contribute to Nigeria's development if the opportunity to do so in a meaningful and effective way existed. The Government should recognize this demand and work to create opportunities for diaspora professionals to meaningfully participate in their respective professional fields in Nigeria.

To leverage this interest, the respondents suggested a number of investments and initiatives the Government of Nigeria should consider that would provide them with safe, meaningful, effective and professional opportunities in the health and education sectors. The following recommendations are drawn from the suggestions and feedback of respondents.

1. **Enhance the diaspora members' trust in the Government and collaborate with them to create more opportunities.** The Government should take tangible and visible steps to improve relationships with diaspora professionals in order to generate trust and foster communication between the diaspora professionals, local institutions and the local communities. The Government should view the Nigerians in the diaspora as Nigerian nationals and not solely as individuals from abroad who are visiting or travelling on a temporary basis. The Government must show willingness to build and maintain relationships with Nigerians in the diaspora as it would for Nigerians who reside in the country.
2. **Improve access to diaspora-related information.** For diaspora-related opportunities, the Government should offer improved access to information about available work opportunities in Nigeria. This information should be provided in a secure, effective and transparent way and should be accessible to the widest audience possible.
3. **Diversify diaspora partnerships.** The Government of Nigeria should invest in diversifying its relationships with the diaspora through more cost-effective and collaborative partnerships. Emphasis should be on partnerships that provide programming and services of interest to diaspora students and practitioners, such as preventive health-care initiatives, exchange programmes and partner benefits. These services should also focus on saving time, money and resources within the partnerships.
4. **Invest in greater tech-based and virtual partnerships.** The Government of Nigeria should also make greater investments in technology and virtual tools to conduct knowledge and skills transfer initiatives with the Nigerian diaspora. By providing virtual training, webinars and teleconferences, the skills and expertise of diaspora professionals are utilized while introducing them to Nigerian industry standards and practices. It also saves time and mitigates the costs and risks associated with physically relocating to Nigeria. These efforts could also serve as the beginning of a transition process for those who want to return permanently.
5. **Improve security and infrastructure.** To attract the greatest segment of diaspora professionals to Nigeria, the Government should prioritize the establishment of safe living conditions and improved security, with significant investment in housing infrastructure, crime reduction, increased protection, and reliable methods of transportation.
6. **Invest in key segments of diaspora professionals.** The Government should take advantage of working with specific subsets of the Nigerian diaspora professionals population. Among the various segments, students and young professionals are a highly underutilized segment and are ripe for technical and professional opportunities within the country. Offering the most mobile, available and flexible segment of the diaspora meaningful short-term and long-term opportunities will yield substantial results for the diaspora professionals, the local communities and the respective professional sectors.
7. **Establish flexible options for diaspora participation.** Serious efforts must be made by the Government to offer opportunities that match the needs and abilities of diaspora professionals from the United States. A number of impending limitations restrict the diaspora's participation in open-ended or rigid development schemes. Institutions should tailor programmes and services to support the diaspora's ability to contribute to development schemes.

INTRODUCTION

I.1. Purpose and Context

This mapping exercise aims to support the Government of Nigeria's effort under the 10th European Development Fund project, "Promoting Better Management of Migration in Nigeria", to identify Nigerian diaspora in the health and education sectors with an interest in contributing their competencies and skills for national development and in investing in the country.

Since 2010, Nigeria has been one of the top remittance-recipient countries in Africa. The Central Bank of Nigeria (CBN) reports that remittances through the banking system increased from USD 2.7 billion in 2004 to USD 6.5 billion in 2005, USD 10.5 billion in 2006 and USD 18 billion in 2007. By 2012, over USD 21 billion had been received as remittances, accounting for nearly 90 per cent increase between 2004 and 2012.

In an effort to engage the Nigerian diaspora, the Government of Nigeria established the House Committee on Diaspora Affairs and launched several initiatives aimed at promoting partnership with Nigerian diaspora communities. Today, the Nigerians in Diaspora Organisation (NIDO) is a vehicle for mobilizing the Nigerian diaspora for development process at home and the Nigerian National Volunteer Service (NNVS) is an important platform that provides Nigerian diaspora professionals with volunteer opportunities. To date, these organizations have carried out various initiatives. However, the unavailability of reliable data on the number and distribution of the Nigerian diaspora has posed a challenge specifically to the NNVS, as it has been unable to effectively support the temporary return of qualified nationals.

The purpose of this mapping exercise is to provide the Government of Nigeria with access to relevant information on the Nigerian diaspora in the United States of America and to identify Nigerian diaspora professionals who would be interested in using their competencies and skills to contribute to national development and invest in Nigeria.

By gathering the views and experiences of Nigerian diaspora professionals, particularly in the health and education fields, this mapping exercise will assist the Government in its efforts to mobilize diaspora for development through diaspora investment schemes and temporary return of highly skilled diaspora members particularly in the health and education sectors.

This three-month project consisted of an online survey, a series of focus group discussions and key informant interviews with Nigerian diaspora professionals in the United States. While there are sizeable Nigerian diaspora populations across the United States, this sample study focused on diaspora communities in Atlanta, Georgia; Baltimore, Maryland; Chicago, Illinois; and Houston, Texas.

With these select groups, the expected outcomes of this mapping exercise were to collect information on the following areas:

- The number of Nigerian diaspora health professionals employed in the health sector in the United States, particularly in Atlanta, Georgia; Baltimore, Maryland; Chicago, Illinois; and Houston, Texas, according to their professional areas of expertise and employment;
- The number of Nigerian diaspora education professionals employed in the education sector in the United States, particularly in Atlanta, Georgia; Baltimore, Maryland; Chicago, Illinois; and Houston, Texas, according to their professional areas of expertise and employment, and/or their places of study in Nigeria and the United States;
- The sociodemographic characteristics of Nigerian diaspora professionals employed in the health and education sectors in the United States;
- The migration patterns between Nigeria and the United States, and migration trends of Nigerian professionals employed in the health and education sectors in the United States;
- Interest of Nigerian diaspora health and education professionals in contributing to the development of the health and education sectors in Nigeria; and
- Nigerian diaspora associations in the United States and other key contacts through which Nigerian diaspora professionals can be reached, including health and education professional organizations; and
- Different ways in which Nigerian diaspora professionals contribute to development in Nigeria.

For purposes of this survey, a Nigerian diaspora professional is assumed to be:

- a person of Nigerian origin that has resided outside Nigeria for five years or more and is still there;
- a person born to Nigerians abroad (second-generation migrants); or
- a person of Nigerian origin that continuously shows willingness to contribute to development in Nigeria (students and people who have returned to Nigeria are not included).

LITERATURE REVIEW

2.1. Overview of Health and Education in Nigeria

According to the World Bank, Nigeria has a population of 169 million people and an average life expectancy of 52 years.¹ Although Nigeria also has one of the fastest-growing economies on the continent, the health and education sectors in the country are particularly challenged in providing adequate and comprehensive services to the population.

Studies show the country's health-care system remains largely underdeveloped. It is estimated that 55 per cent of the population live in rural parts of the country and have limited access to health-care services. Seventy per cent of Nigeria's health-care services are provided by the private sector, yet the majority of the people live on less than USD 1 a day and cannot afford the costs of those private services. The remaining 30 per cent of health-care services are provided by the Government. However, its main health-care deliverable, the National Health Insurance Scheme (NHIS), covers less than 50 per cent of the country's entire population.² This translates into a largely inaccessible and unaffordable health-care system in Nigeria.

Similarly, Nigeria's education system is not adequately equipped to handle its growing population. UNICEF reports that children under 15 years old account for 45 per cent of the country's population.³ Roughly 10 million of Nigeria's 30 million school-age children are not enrolled in school.⁴ The increase in the student population has put a strain on the education system, as there are not enough teachers and classrooms to accommodate the number of eligible students. This issue is further exacerbated in urban parts of the country, where high levels of population growth, unemployment and insecurity persist.⁵

2.2. Historical Overview of Nigerian Migration to the United States

While international migration from Nigeria dates back to the precolonial era, migration of Nigerians to the United States began in large numbers during the period after Nigeria's independence. Overwhelmingly, many highly skilled migrants left Nigeria primarily for education and business opportunities with intentions to return to Nigeria.⁶

As Nigeria experienced political unrest in part from the Biafra War in the 1960s and economic downturn from plummeting crude oil prices in the 1970s, more segments of its population began to leave the country and found themselves unable to return home.⁷ By the 1980s, the United States began providing refugee resettlement support to migrants fleeing the country due to instability and conflict. In the early 2000s, the United States became the preferred destination country for 59 per cent of highly skilled Nigerian emigrants.⁸

- 1 World Bank, Nigeria Data. Available from <http://data.worldbank.org/country/nigeria> (accessed on 9 May 2014).
- 2 M.O. Welcome, "The Nigerian health care system: Need for integrating adequate medical intelligence and surveillance systems", *Journal of Pharmacy and BioAllied Sciences*, 3(4):470–478 (2011). Available from www.ncbi.nlm.nih.gov/pmc/articles/PMC3249694/
- 3 UNICEF Nigeria, "Education", "The Children" section (n.d.). Available from www.unicef.org/nigeria/children_1937.html
- 4 United States Embassy in Nigeria, Economic Section, *Nigeria Education Fact Sheet* (2012). Available from <http://photos.state.gov/libraries/nigeria/487468/pdfs/JanuaryEducationFactSheet.pdf>
- 5 UNICEF Nigeria, "Education", "The Children" section (n.d.). Available from www.unicef.org/nigeria/children_1937.html
- 6 S. Akinrinade and O. Ogen, "Historicising the Nigerian diaspora: Nigerian migrants and homeland relations", *Turkish Journal of Politics*, 2(2):71–85 (2011).
- 7 B. Mberu and R. Pongou, "Nigeria: Multiple forms of mobility in Africa's demographic giant" (Washington, D.C., Migration Policy Institute, 2010). Available from www.migrationpolicy.org/article/nigeria-multiple-forms-mobility-africas-demographic-giant
- 8 Ibid.

Today, the United States is the top destination country for skilled Nigerians, followed by the United Kingdom. Nigerian immigrants comprise approximately 19 per cent of the black African immigrant population in the United States.⁹ It is estimated that there are roughly 3.4 million Nigerians living in the United States, making them one of the country's largest African immigrant groups.¹⁰

According to the Migration Policy Institute (MPI), approximately 59 per cent of Nigeria's highly skilled immigrants came to the United States as their country of destination.¹¹ Like many other African immigrant groups in the United States, they are highly educated with proximately 62 per cent possessing a bachelor's degree, a master's degree or a doctorate. Approximately 78 per cent are employed, with a significant segment in skilled professions, such as health or education.¹²

2.3. Transnational Networks between Nigeria and the United States

Similar to other diaspora groups, Nigerians in the United States have organized themselves along various forms of identity, interest or association, including social, cultural, ethnic, religious, professional, academic and interest-based affiliations. These affiliations exist through formal and informal channels and vary in size, reach and programming. The overall goal of most of these groups is to maintain ties with their countries of origin and establish stronger connections in their home and host countries.

Today, there are many transnational diaspora networks aimed at maintaining these ties between the Nigerian-American diaspora and networks inside Nigeria. Organizations such as the Association of Nigerian Physicians in the Americas (ANPA) and the National Association of Nigerian Nurses in North America (NANNNA) run diaspora-led initiatives aimed at strengthening partnerships and relations with the government, the communities and local institutions.¹³ The Government of Nigeria also formed NIDO, with an office based in the Ministry of Foreign Affairs. Today, there are several NIDO chapters throughout the United States.

With proper planning and meaningful diaspora engagement, Nigeria's health and education sectors could experience significant growth. Through technology, networking, and exchange programmes with diaspora organizations, such as the ANPA and the NANNNA, diaspora communities can provide critical resources and support to the country.

These organizations can also share their work and programmes with the Nigerian Government in an effort to increase government support for diaspora initiatives. The recommendations section of this report offers more suggestions on how the Nigerian diaspora can contribute to solving issues in these sectors.

9 R. Capps, K. McCabe and M. Fix, "Diverse streams: African migration to the United States" (Washington, D.C., Migration Policy Institute, 2012). Available from www.migrationpolicy.org/research/CBI-african-migration-united-states?pdf=africanmigrationus.pdf

10 B. Mberu and R. Pongou, "Nigeria: Multiple forms of mobility in Africa's demographic giant" (Washington, D.C., Migration Policy Institute, 2010). Available from www.migrationpolicy.org/article/nigeria-multiple-forms-mobility-africas-demographic-giant

11 Global Forum on Migration and Development (GFMD), *Country Profile: Nigeria* (n.p., GFMD, 2011). Available from www.gfmd.org/files/pfp/mp/Nigeria_EN.pdf

12 R. Capps, K. McCabe and M. Fix, "Diverse streams: African migration to the United States" (Washington, D.C., Migration Policy Institute, 2012). Available from www.migrationpolicy.org/research/CBI-african-migration-united-states?pdf=africanmigrationus.pdf

13 S. Akinrinade and O. Ogen, "Historicising the Nigerian diaspora: Nigerian migrants and homeland relations", *Turkish Journal of Politics*, 2(2):71–85 (2011).

METHODOLOGY

For this exercise, a mixed methodology approach was used to gather information about the Nigerian diaspora communities in the United States. The research took place between January and April 2014, and was conducted through an online survey, key informant interviews and focus group discussions.

The exercise was conducted through a convenience sampling procedure. The sample size for this study totaled 144 Nigerian diaspora health and education professionals who were based across the United States. The sampling group included survey respondents, focus group interviewees and individual informants. The sampling was held with Nigerian diaspora health and education professionals throughout the United States with focus group discussions and key informant interviews in Atlanta, Georgia; Baltimore, Maryland; Chicago, Illinois; and Houston, Texas.

The procedure for the study consisted of an online survey targeting Nigerian diaspora health and education respondents. It was heavily promoted through traditional, electronic and social media platforms. Following the initial outreach, interested respondents were invited to participate in focus group discussions and key informant interviews.

On average, eight participants attended the focus group meetings. Descriptive statistics were used to summarize the data, and illustrations of numerical proportion of these data are plotted through pie charts and bar charts (Figure 1 through Figure 10).

Below is a list of the different methods of research and engagement applied to conduct this exercise.

- **Desk research.** Information regarding the Nigerian diaspora health and education professionals was gathered through preliminary and ongoing desk research. This included:
 - o literature review of Nigerian diaspora communities history in the United States;
 - o information on the migration and population of Nigerian diaspora in the United States from a variety of international, government and think-tank resources, including the World Bank, the United States Census Bureau and the MPI;
 - o information on Nigerian diaspora health and education professionals in the workforce from academic studies and journal publications;
 - o information from various Nigerian professional organizations with online presence, including NIDO, the ANPA, and the Alliance of Nigerian Organizations in Georgia;
 - o information on Nigerian diaspora print and online media outlets; and
 - o information on community-based networks and cultural and religious groups.
- **Outreach.** Over a thousand Nigerian individuals and various Nigerian diaspora networks were directly contacted and informed about the mapping exercise. An online survey targeting 200 Nigerian diaspora health and education respondents was heavily promoted through traditional, electronic and social media platforms. Following are outreach efforts done:
 - o Directly contacted 200 diaspora organizations and sent over 1,500 emails to individuals, businesses, organizations, faith-based groups, and schools and universities;
 - o Contacted individuals and organizations focused on Africa, diaspora, health, education and international development;
 - o Posted social media announcements targeting Nigerian diaspora individuals, networks and organizations;
 - o Sent direct emails to Nigerian diaspora health and education professionals with public profiles;
 - o Posted social media announcements with project specific hashtags and links for circulation;

- o Conducted phone calls and informational conversations with Nigerian diaspora individuals, organizations, networks and potential study participants; and
- o Posted press releases to African diaspora media platforms about the survey and focus groups.
- **Focus group discussions and key informant interviews.** Following the initial outreach, interested respondents were invited to participate in focus group discussions and key informant interviews. On average, eight participants attended the focus group discussions.
 - o Four focus group discussions were held with survey respondents in Atlanta, Georgia; Baltimore, Maryland; Chicago, Illinois; and Houston, Texas.
 - o Four key informant interviews were held with survey respondents who were community leaders or representatives or members of Nigerian diaspora organizations focused on health or education.
 - o Focus group interviews in Atlanta (Georgia), Baltimore (Maryland) and Houston (Texas) were held collectively with survey respondents.
 - o The Chicago focus group discussion was conducted with survey respondents through an online videoconference.

3.1. Privacy and Ethics

Researchers ensured that ethical principles were respected throughout the duration of this exercise and that the respondents' privacy was protected. Participation was voluntary and there was informed consent throughout the exercise.

Respondents were informed that the purpose of the exercise was to gauge diaspora interest in contributing to Nigeria's development in the health and education sectors. Participants' personal information remained anonymous and was not required when answering the survey. Confidentiality was maintained during the focus group discussions and key informant interviews.

3.2. Limitations

This mapping exercise captured the views of a small sample size of the Nigerian diaspora health and education professionals in the United States. Although significant efforts were made to reach the widest audience possible, certain limitations did affect the overall results of the exercise.

One important limitation was with the time and duration available for the project. The three-month period placed a significant challenge on the survey's promotion and reach, quality of engagement for the focus group interviews and accessibility to participants for key interviews. Many respondents expressed disappointment that the project's timeframe was short and not flexible enough to accommodate their availability and busy work schedules. As a result of the limited duration, the focus group discussion in Chicago, Illinois, had to be held virtually rather than in person. This technical feature resulted in a lower number of focus group participants than in other cities.

Another limitation was the reliance on an online platform for the initial survey. Conducting the survey solely through the Internet limited the diversity of respondents who participated in the exercise. Individuals who did not rely on or regularly use the Internet were less likely to respond. For purposes of this exercise, this resulted in fewer survey respondents who were skilled but unemployed or over the age of 59.

The survey questions were answered thoroughly by respondents. In some cases, additional information was provided for the open-ended questions. Respondents did not submit any reservations or withhold information from the questionnaire.

DISCUSSION AND ANALYSIS

Multiple avenues were utilized to maximize the mapping exercise response rate and interview participation. Specifically, the mapping exercise relied on data from three methods of engagement: online survey responses; focus group findings; and key informant interviews.

4.1. Online Survey Responses

The initial method of engagement with Nigerian diaspora health and education professionals was through the establishment of an online survey. The survey was open to the general public for three months. Nigerian diaspora members were specifically invited to take part in the survey through targeted outreach and promotion efforts. By 9 May 2014, 144 completed survey responses were received.

4.2. Focus Group Findings

The second method of engagement was through focus group meetings with survey respondents who were selected based on their interest and availability. Each meeting was facilitated so that respondents could provide meaningful input and feedback on their desire, experiences and views on the role of skilled diaspora professionals in Nigeria's health and education sectors.

4.3. Key Informant Interviews

The third method of engagement with Nigerian diaspora professionals was through one-on-one key informant interviews. Interested survey respondents who were representatives or members of diaspora organizations or who were active in their communities and possessed special knowledge of the health or education sector. Four telephone interviews were conducted with each individual over the course of four weeks.

QUANTITATIVE RESULTS

The online survey collected information from a wide variety of individuals. Survey respondents were asked to anonymously provide their personal, professional and academic information, and share their experiences visiting, living or working in Nigeria. Most questions focused on respondents' professional expertise and sought to gauge their desire and willingness to contribute to the development of Nigeria's health and education sectors. The following sections provide an illustration of the overall survey responses and respondent demographics.

5.1. Basic Demographics

Survey respondents were asked to provide basic demographic information at the start of the mapping exercise.

Of the 144 respondents, 63 per cent were female and 63 per cent were under the age of 40. Within this segment, 35 per cent were between 19 and 29 years old. Most respondents were born in Nigeria, with a majority living in the United States for at least 10 years or more.

Nearly 50 per cent of the respondents were American citizens. Of the remaining segments, approximately 30 per cent were Nigerian citizens and 20 per cent were citizens of another country.

Migration Patterns

Survey respondents were asked to describe their migratory patterns between the United States and Nigeria. Survey results show that 77 per cent of the respondents lived in Nigeria at some point in their lives.

Exactly half of the respondents stated education was the primary reason for leaving the country and 29 per cent left because of family. Other reasons for leaving Nigeria included employment or business opportunities (13%), and marriage (4%).

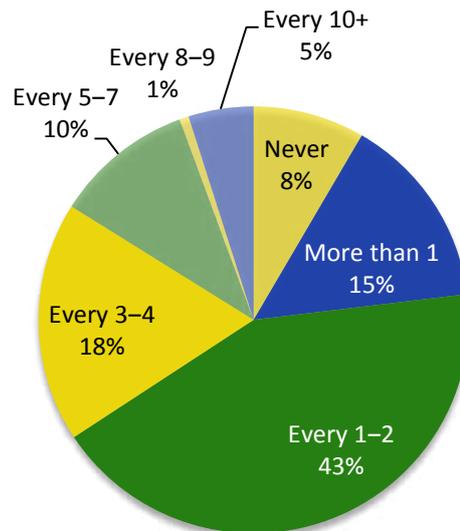
Frequency, Length and Experience of Visits to Nigeria

The majority of respondents reported visiting Nigeria on a regular but very short-term basis, often spanning a few weeks to one month. Three fourths stayed for less than a month and one quarter would stay for one to three months.

Approximately 43 per cent of the respondents visited every one to two years and 18 per cent reported visiting every three to four years (Figure 1).

When asked to describe their experience in the country, most replied positively and were confident they would visit Nigeria again.

Figure 1: Frequency of visits to Nigeria (in years)

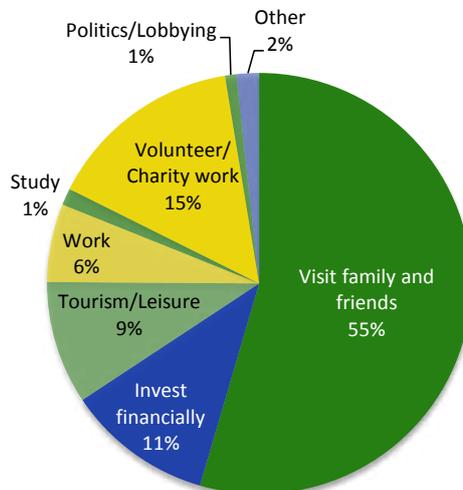


Reasons for Visiting Nigeria

Of the respondents, 53 per cent stated they would want to permanently return to Nigeria. Of this group, 34 per cent wanted to return to work or establish a business, and 21 per cent wanted to return to be with their families and friends.

The top three reasons for visiting Nigeria were to visit their families and friends, to perform volunteer and charity work, and to invest financially (Figure 2).

Figure 2: Reasons for visiting Nigeria

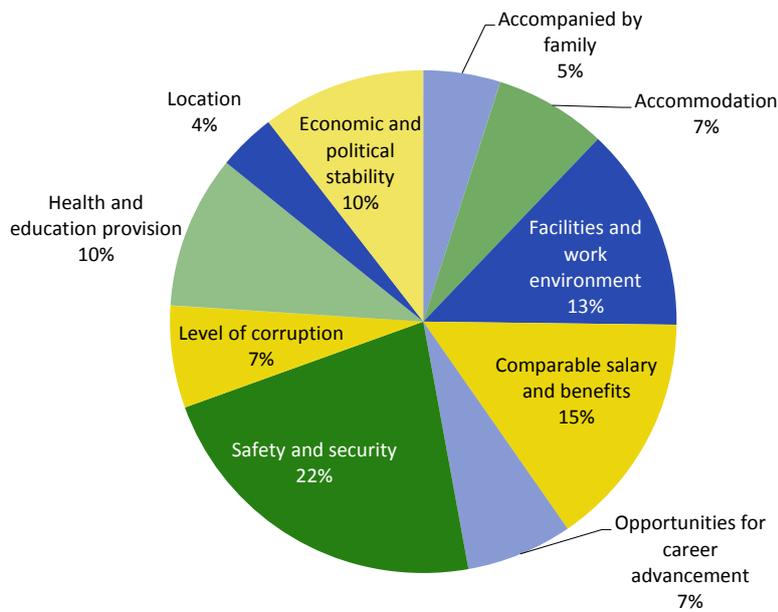


Factors for Returning to Work in Nigeria

Respondents were asked what top three factors would entice them to work in Nigeria. While multiple answers could be given, respondents' answers reflected concern over the feasibility of transitioning to a new life in Nigeria and whether they could experience professional fulfillment in a safe environment.

The top three factors that influenced whether respondents would return to work in Nigeria were their safety and security, comparable salary and benefits, and the facilities and work environment (Figure 3).

Figure 3: Reasons for returning to work in Nigeria



Communication with Family in Nigeria

Respondents overwhelmingly maintained contact with their family members in Nigeria. Among them, 66 per cent stated that their families were currently residing within Nigeria. The most popular means of communication cited were telephone, email and Facebook.

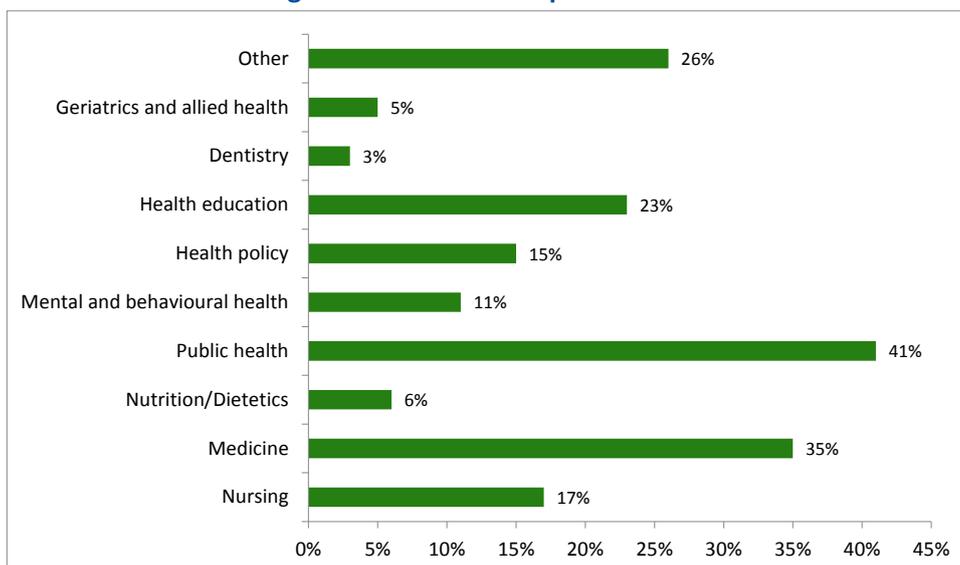
5.2. Employment and Education

The majority of the respondents' highest level of educational attainment was a master's degree or professional degree (doctor's degree, juris doctor or doctor of medicine). Three times as many health professionals responded to the online survey than education professionals. Still, most respondents expressed interest in contributing to both the health and education sectors in Nigeria.

Health Sector Representation

Within the health sector, a wide range of professions was represented in the responses. The most represented professions were public health professionals, medical doctors and health educators (Figure 4).

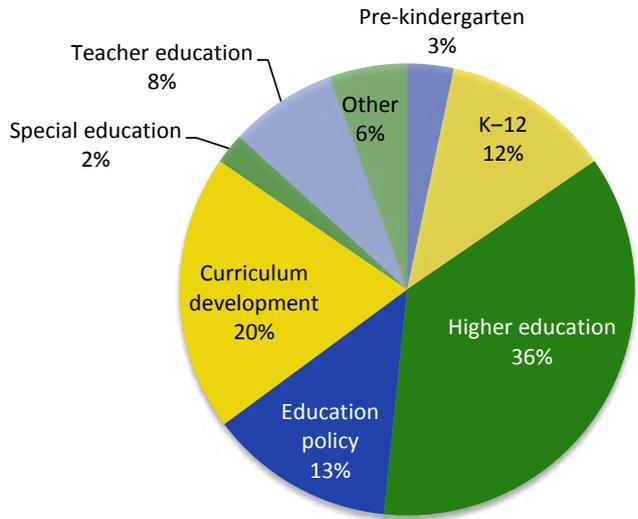
Figure 4: Health sector professions



Education Sector Representation

Education professionals also represented a variety of fields. Higher education professionals were the largest segment at 36 per cent, followed by curriculum development professionals and education policy professionals (Figure 5).

Figure 5: Education sector professions

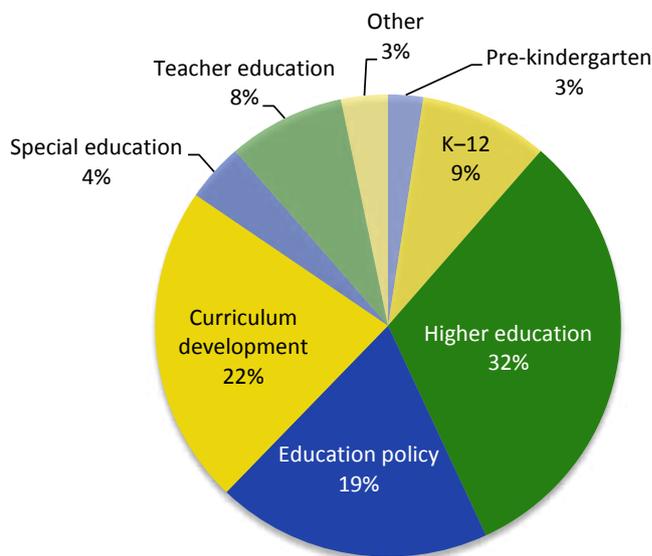


Contributions to the Education Sector

When asked how they would like to contribute to the education sector, respondents identified a number of ways in which they can utilize their professional and academic interests.

These included mentoring or consulting, engaging in a skills transfer initiative, working in the public or private sector, or providing online training courses in their respective sectors. Of all the professional fields in the education sector, respondents were most interested in higher education, curriculum development and education policy (Figure 6).

Figure 6: Contribution to the education sector, by area of interest

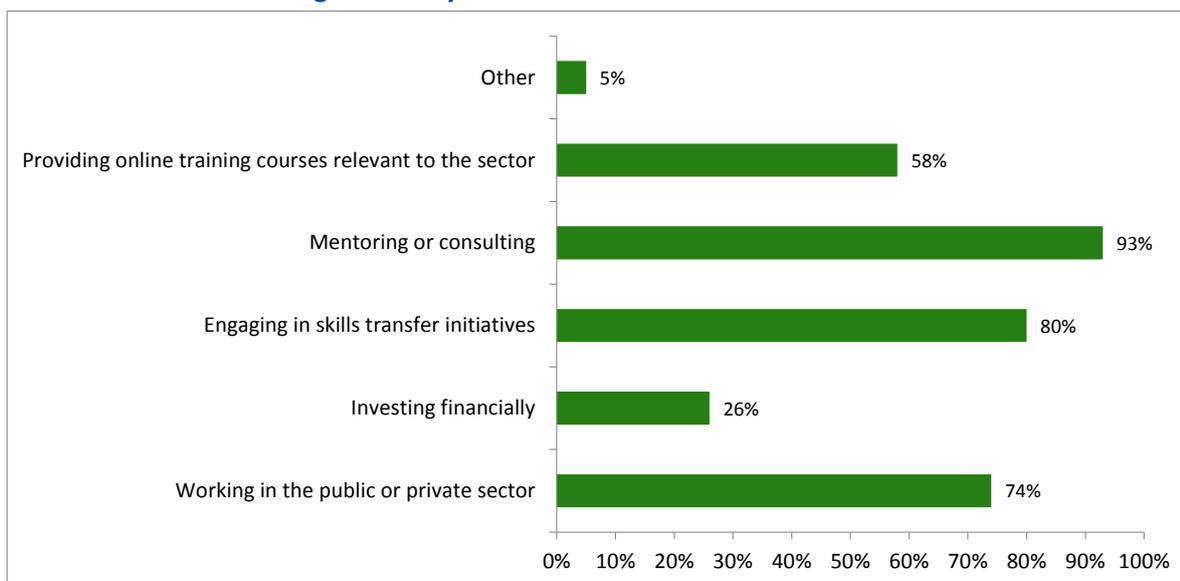


Contributions to the Health Sector

Similar to the education sector, many health professional respondents expressed interest in contributing to Nigeria’s health sector development in a variety of ways.

Like in the education sector, Nigerian health professionals were most interested in mentoring or consulting, engaging in a skills transfer initiative, working in the public or private sector, or providing online training courses in their relevant sectors (Figure 7).

Figure 7: Ways to contribute to the health sector



Respondents stated interest in providing resources for public health, health education, health policymaking and medicine.

Contributions through Remittances

Survey respondents regularly provide for their families in Nigeria mainly through remittances. The majority of remittances that respondents send to Nigeria are to cover their families' education expenses.

Approximately 47 per cent of respondents reported contributing to the education sector in the form of remittances. Among those who gave money to the sector, 58 per cent sent remittances to Nigeria to pay for family members' schooling and 22 per cent gave money for building education infrastructure, such as schools (Figure 8). The bulk of these remittances were to cover the costs of their family members' education.

Approximately 44 per cent of respondents sent remittances on an annual basis, while nearly one third sent remittances on a quarterly basis (Figure 9).

Figure 8: Education costs covered by remittances

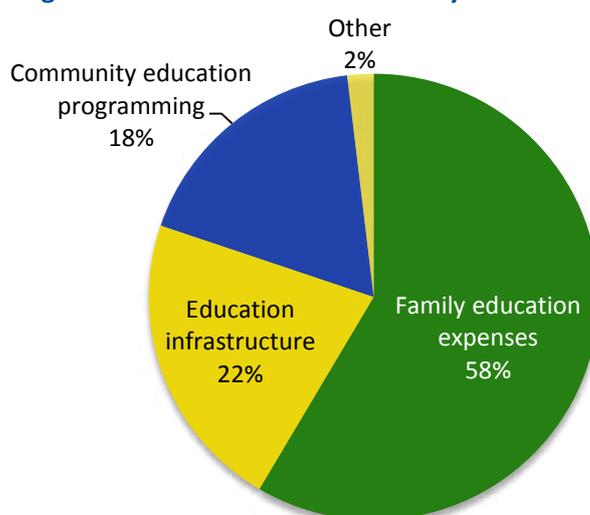
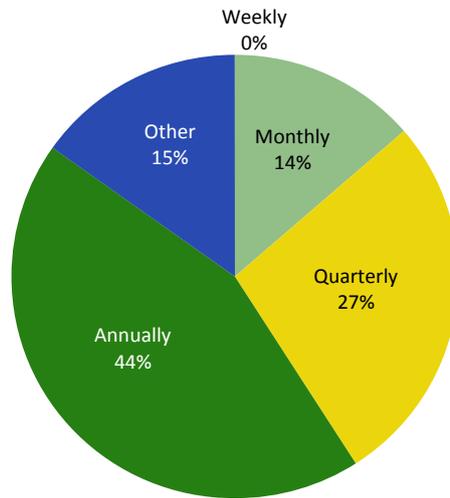
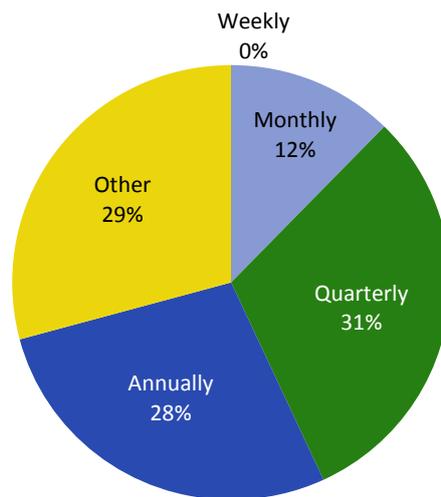


Figure 9: Frequency of education remittances



In the health sector, half of the respondents reported that they regularly sent remittances to Nigeria’s health sector as donation. Respondents in the health sector were more diverse than those in the education sector. Most health professional respondents gave back on a regular basis, either quarterly or annually and some gave other answers (Figure 10). Over half of the respondents sent remittances for their families’ health expenses.

Figure 10: Frequency of health remittances



5.3. Networks and Community Organizations

Respondents reported being active in a diaspora network or community organization. In fact, 64 per cent were members of an informal or a formal diaspora network.

They were members of either social or cultural (35%), professional/career focused (29%), academic (12%), networking (15%) and religious (4%) groups. These networks are involved in activities that maintain ties with Nigeria through cultural programmes, social and linguistic services, and professional opportunities relevant to Nigeria.

Information-sharing within these groups has various forms. Respondents reported using e-mails (25%), meetings (21%), Facebook (16%), websites (14%), word of mouth (14%) and Twitter (5%).

FOCUS GROUP DISCUSSION RESULTS

In March 2014, three in-person focus group meetings were held for Nigerian health and education professionals in Atlanta (Georgia), Baltimore (Maryland) and Houston (Texas). A fourth focus group meeting was held virtually with respondents in Chicago (Illinois).

Discussions focused on the participants' perceptions, experiences and needs to professionally contribute in Nigeria. Specifically, participants focused on the following areas:

- Perceptions of current diaspora professional opportunities;
- Examples of successful diaspora-led professional initiatives;
- Challenges with professional diaspora participation;
- Examples of incentives for professional diaspora participation.

6.1. Perceptions of Current Diaspora Professional Opportunities

Regarding perceptions of current opportunities for the diaspora in Nigeria, participants overwhelmingly wanted to find meaningful and professionally relevant work or volunteer opportunities in the country. Many expressed concern that a number of work opportunities appeared to be based on personal connections and knowledge of the Nigerian business infrastructure and network.

For diaspora physicians educated in Nigeria, many felt a strong desire to support the nation that equipped them with the skills needed to succeed. They would like to provide Nigerians with access to basic health care, especially those in rural areas and those who cannot afford such. Others felt frustration over the lack of information or opportunities to take part in those sectors, despite their interest, availability and skill sets.

Approximately 75 per cent of the participants stated they knew opportunities for diaspora engagement existed but were difficult to find. Younger participants, most of whom were under 30 years old, expressed frustration over the lack of publicly available guidance and information on diaspora work and volunteer opportunities. The absence of general information and direct, effective outreach from Nigeria led many to conclude that such opportunities did not exist.

It was repeatedly emphasized that diaspora interest in developing the health and education sectors remains very high, and the Government should leverage this enthusiasm for professional sector development. Respondents encouraged the Government to deepen its engagement with qualified professionals like themselves and explore more effective ways to work with them.

6.2. Examples of Successful Diaspora-led Professional Initiatives

All participants expressed interest in contributing to Nigeria's development and offered various examples of successful, self-initiated, diaspora-led volunteer initiatives to Nigeria.

The most common form of volunteer engagement was through medical or health-related missions. Projects included medical missions, public health outreach, teacher training, building of hospitals and clinics, and hosting of health- or education-focused conferences in Nigeria. One participant described a diaspora-led education initiative that brought university students and professors from the United States for a symposium with their peers in Nigeria.

The success of these initiatives was credited to the use of personal finances and resources in addition to support from local networks of the individuals involved. Most of the projects were organized by US-based Nigerian diaspora organizations. A small segment of the projects were self-led initiatives.

6.3. Challenges with Professional Diaspora Participation

Participants noted multiple challenges that affected their perceptions of working or volunteering in Nigeria. Most centred around the difficulty behind meeting their personal and professional needs once in Nigeria, including how to maintain professional standards of quality and conduct, how to mitigate the personal and professional risk of international relocation, and how to develop meaningful networks with their peers and the broader community.

- **Limited access to information.** Participants expressed frustration with the absence of an accessible diaspora platform for information, networking and new opportunities in Nigeria. Many stated they were more likely to consider working or volunteering in Nigeria if information was more readily available. Some shared that they had previously travelled to other countries to volunteer because information on volunteering in Nigeria was difficult to obtain.
- **Maintaining professional quality and standards.** Health professionals emphasized the importance of maintaining professional quality and standards in their fields. Educators lamented over the demise of standards for teacher training, curriculum and learning methods. All noted an absence of meaningful professional exchanges and communication channels within their fields.
- **Limited access to professional networks and peers.** Education professionals emphasized the lack of access to peers in their field in Nigeria. Several participants reflected on instances when they sought to contact university professors and other higher education professionals in Nigeria but were unsuccessful.
- **Risk of relocation and transition.** In both sectors, participants worried about the personal, professional and logistical challenges of transitioning from the United States to Nigeria. They emphasized the high level of risk of managing their lives in the United States and Nigeria for such a move. Examples included determining how to manage their financial obligations in the States such as debts, mortgages, bills and tuition payments while preparing for the risks of safety and security in Nigeria, such as high crime, corruption, weak infrastructure and poor health care.
- **Delivering impact and value.** The participants were concerned about having a genuine impact on local communities in Nigeria. Based on their experiences, many shared examples of feeling marginalized or ostracized from other professionals and unable to make meaningful contributions in their field.

6.4. Examples of Incentives for Professional Diaspora Participation

Overwhelmingly, the participants wanted to contribute to Nigeria's development through their professional areas of expertise but identified a series of incentives or needs that would have to be met in order to do so. A number of these factors were related to physically relocating to Nigeria.

First, every participant stated they would need assurances about their physical safety and security inside Nigeria before they could commit to long-term opportunities. The costs of living and the challenge of adjusting from the level of compensation they earned in the United States was a strong factor in whether they could fully relocate to Nigeria. Other needs included adequate and safe housing, transportation, basic amenities (i.e. water, electricity) and evidence of less corruption in the Government of Nigeria.

Second, the participants felt strongly about the need for a stronger health infrastructure that prioritized preventive health care and maintenance of quality care standards. Some required it for their professional roles, while others required it for their personal care, health or family needs. In each focus group, at least one participant shared a story of losing a family member from an entirely preventable cause of death, such as long queues at the hospital, the lack of clean water or the loss of electricity.

Lastly, the participants stressed the need for greater support and networks with local Nigerian professionals and State government offices. Many made previous attempts to return to work in Nigeria or conduct diaspora-led initiatives inside the country. They shared examples of significant challenges to practising within the country, including professional barriers, limited resources and poor reception from their peers in their respective industries. They also had very little support from the Government, the public sector or the private sector.

KEY INFORMANT INTERVIEW FINDINGS

The third stage of the mapping exercise was done through key informant interviews. In total, four individuals were selected to give their insights and opinions on the role of Nigerian diaspora organizations in developing the health and education sectors in Nigeria. The participants were selected based on their geographic location, area of expertise and experience working with diaspora communities. The four informants were members or representatives of the following organizations: ANPA (Atlanta); NIDO (Chicago); the NAMC (Houston); and Project BEAT IT! (Baltimore).

7.1. Opportunities for Diaspora Professional Engagement

The key informants acknowledged that there were various opportunities for diaspora engagement in the development of the health and education sectors in Nigeria. They noted that the Nigerian diaspora possessed transferable skills that were also valuable for Nigeria and the continent. The key informants also reflected on views gathered from informal and formal discussions with members of their organizations as well as their expertise in the health or education sector.

7.2. Challenges with Diaspora Professional Engagement

Overall, the individual informants expressed optimism along with a strong desire to contribute to the country's health and education development. However, they expressed some reservations and concerns with the likelihood of attracting diaspora professionals from the United States.

One key informant felt it was difficult to attract diaspora interest for professional opportunities in Nigeria because there were little assurances over issues that mattered most to diaspora, namely safety, security and provision for basic living amenities. It was also noted that diaspora members had become accustomed to a different standard of living abroad and the Government should be willing to support their needs and readjustment upon relocating to Nigeria.

Compensation was also a recurring factor for the informants and the participants. Having to fulfil their financial obligations in the United States, including debts, mortgages, retirement savings and health insurance, would require securing an income in Nigeria that could cover these costs.

Regarding the transfer of skills from the diaspora to professionals in Nigeria, one key informant shared the challenges that existed when skilled professionals move back to help support the development of the education sector. Two major challenges existed. First, the lack of equipment, such as books, paper and printers, severely inhibited the diaspora's ability to train and provide their counterparts with the technical knowledge and exposure. In some cases, educators were expected to purchase their own materials and equipment to serve students. Second, the level of institutional bureaucracy greatly hindered the impact, efficacy and quality of the training.

7.3. Existing Diaspora Organization Projects in Nigeria

Across multiple sectors, there is a vibrant and steady level of professional diaspora engagement in Nigeria. In the health sector, many diaspora organizations encourage members to use their medical skills in Nigeria. A number of existing diaspora-led initiatives are geared towards supporting the health sector. Examples include short- and long-term medical missions, direct training for physicians and students, and the establishment of a health curriculum in Nigerian colleges and universities.

One informant described how 20 physicians were on a medical mission and invited by a government official to perform eye surgeries and provide basic health-care screenings. The group's personal and professional needs were met, including resources, accommodation and transportation. They also received support from local physicians and were able to work jointly with their counterparts.

Challenges that arose, however, were primarily due to the severe lack of infrastructure, poor sanitation and a limited number of medical specialists to treat patient needs. The limited time, duration and means of communication within the project also contributed to growing tensions between the diaspora professionals and local professionals.

Although some key informants' organizations did not have operational projects in Nigeria, many of their members had engaged in projects on an individual level and were interested in future opportunities for the key informant organizations.

7.4. Examples of Upcoming Diaspora-led Projects in Nigeria

The key informants shared their organizations' developments regarding future projects in Nigeria. Their contributions were specific to the diaspora groups that they led. These are described below:

- **ANPA.** Over the course of 20 years, the ANPA has carried out over 40 medical missions and reached 150,000 Nigerians. The ANPA has also signed a memorandum of understanding with Nigeria's Ministry of Health and the National Primary Health Care Development Agency to provide content for training health workers in rural communities.

The ANPA is in the process of creating new projects in Nigeria. It has been in talks with hospitals and other organizations on building "centres of excellence". These centres will create standards on giving credentials and curriculum development at medical schools and other relevant associations. The centres are intended to provide opportunities for diaspora physicians in the creation of the standards in order to ensure permanent diaspora presence throughout the project. The ANPA also has a permanent seat on the National Medical Council in Nigeria, which allows diaspora physicians to influence policy regarding the standards creation process. It was noted that diaspora physicians cannot impose standards on the medical community in Nigeria because the former do not live in the country. The goal is for diaspora physicians to be able to assist with the standards creation process in Nigeria and help enforce the standards once in place.

- **NAMC.** The NAMC expressed interest to serve as a partner for diaspora engagement in Nigeria. Among its services, the NAMC is a resource for information and guidance for interested diaspora professionals. Although the organization is not actively involved in diaspora projects in Nigeria, it invests in providing a bridge to help health and education professionals with the process of developing these sectors.
- **Project BEAT IT!** The success of Project BEAT IT! with African immigrants in the United States can be replicated in Nigeria. The organization emphasizes the use of storytelling to empower and educate health-care recipients to advocate for themselves. The education of health-care recipients on their rights can be transferred to the Nigerian context. Project BEAT IT! sees its contribution to Nigeria's development through skills transfer initiatives. While the organization has engaged in a few training programmes on transfer of skills, it is still interested in more opportunities through webinars as well as short-term training in Nigeria.
- **NIDO (Chicago).** The national chapter of NIDO is promoting an ongoing health initiative called the First Diaspora Medical Corporation Project. This project seeks to create a world-class health-care system in Nigeria through privately managed health-care delivery businesses and improvement in Nigeria's health-care infrastructure.

While NIDO Chicago is part of NIDO, the representative expressed interest in assisting with curriculum development in all levels of education in Nigeria. Some other ideas suggested by NIDO Chicago included furnishing of libraries and creation of e-libraries. It was also suggested that Nigeria consider forming collaborative exchanges and partnerships between schools, colleges and universities in the United States and Nigeria.

CONCLUSION

This mapping exercise reveals that there is a strong willingness and desire among Nigerian diaspora health and education professionals to contribute towards Nigeria's development through a variety of ways.

Overwhelmingly, this demographic indicated a clear desire to support Nigeria through professional opportunities such as medical missions, training, seminars, youth service programmes and longer-term employment opportunities. Diaspora associations and professional networks with experience in self-started professional initiatives offered best practices and lessons to consider for future projects.

The participants also outlined the basic needs and amenities they would need to meaningfully participate in diaspora engagement schemes. Professionally, they emphasized the need to maintain quality industry standards in the country and invest in their participation, through the provision of basic equipment, establishment of virtual platforms and support for in-country returnee networks. On a personal level, the participants overwhelmingly stated safety and corruption as the primary deterrents from their physical relocation to Nigeria on a long-term basis. They also expressed concern about the financial risk and management that would be required for them to move from their respective commitments. Of all the assurances that the diaspora participants would need to meaningfully contribute to Nigeria's development, it became clear that the primary areas of concern were safety and security, financial risk mitigation and level of integration in the country.

In addition to the needs and amenities, many participants came from segments of the diaspora population that were more flexible and available to invest and contribute towards the country's development. Young professionals, students and educators were in the strongest position to take advantage of professional diaspora engagement schemes due to their professional position.

Given the range of successful diaspora-led initiatives, the Government of Nigeria has a unique opportunity to develop meaningful diaspora engagement schemes. By pursuing short-term and long-term opportunities that would support the country's development, the communities in need and the diaspora professionals applying their professional skills, the Government will be able to attract a wide variety of health and education professionals from various segments of the diaspora population.

RECOMMENDATIONS

Based on participant feedback, there are a number of recommendations the federal Government of Nigeria should consider in developing effective strategies for diaspora engagement in the health and education sectors.

It is clear that Nigerian diaspora professionals will be motivated to give back if they have more opportunities to make meaningful contributions to their people and the country's overall development. The Government should be prepared to offer creative, flexible and meaningful opportunities for diaspora professionals in their respective fields.

To leverage this interest and seize the various opportunities to help Nigeria, the diaspora will need to see certain investments and initiatives from the Government of Nigeria, namely in ensuring diaspora professionals that they can meaningfully contribute as professionals, in a safe, well-planned and professional way.

1. **Enhance the diaspora members' trust in the Government and collaborate with them to create more opportunities.** The Government should take tangible and visible steps to improve its relationships with diaspora professionals in order to generate trust and foster communication between the diaspora professionals, local institutions and the local communities. The Government of Nigeria should view the Nigerians in the diaspora as Nigerian nationals and not solely as individuals from abroad who are visiting or travelling on a temporary basis. The Government must show willingness to build and maintain relationships with Nigerians in the diaspora as it would for Nigerians who reside in the country. This can be done in the following ways:
 - a. Support existing diaspora-led initiatives that have proven to be successful and have impact with local communities.
 - b. Offer listening sessions in various US cities to identify the skills, needs and priorities of diaspora professionals who seek to work or volunteer in Nigeria.
 - c. Allow the diaspora to help with evaluation programmes that assess the impact and implementation of health and education projects.
2. **Improve access to diaspora-related information.** For diaspora-related opportunities, the Government should offer improved access to information about available work opportunities in Nigeria. This information should be provided in a secure, effective and transparent way, and should be accessible to the widest audience possible. To achieve this, the following can be done:
 - a. Create a secure and interactive online platform to provide diaspora readers with announcements of upcoming opportunities and that allows users to submit questions, ideas and proposals.
 - b. Provide multiple channels for information targeting the diaspora, including print, television, radio, Internet and social media sources.
3. **Diversify diaspora partnerships.** The Government of Nigeria should invest in diversifying its relationships with the diaspora through more cost-effective and collaborative partnerships. Emphasis should be on partnerships that provide programming and services of interest to diaspora students and practitioners, such as preventive health-care initiatives, exchange programmes and partner benefits. These services should also focus on saving time, money and resources within the partnerships. This can be attained through the following:
 - a. Establish recognized relationships with more professional diaspora associations and networks.
 - b. Offer short- and long-term partnership benefits, such as programming and services for the diaspora and the local communities.
 - c. Establish a diaspora advisory council for various professions within each industry, which would oversee, develop and/or help manage the relationship between the diaspora professionals and the Government.

4. **Invest in greater tech-based and virtual partnerships.** The Government of Nigeria should also make greater investments in technology and virtual tools to conduct knowledge and skills transfer initiatives with the Nigerian diaspora. By providing virtual training, webinars and teleconferences, the skills and expertise of diaspora professionals are utilized while introducing them to Nigerian industry standards and practices. It also saves time and mitigates the costs and risks associated with physically relocating to Nigeria. These efforts could also serve as the beginning of a transition process for those who want to return permanently. Some recommendations to achieve this are as follows:
 - a. Host virtual training sessions and webinars between Nigerian professionals in the diaspora and in Nigeria.
 - b. Provide diaspora-led teaching and curriculum development courses for Nigerian professionals and institutions.
 - c. Utilize online content management platforms to facilitate transcontinental Web learning.
 - d. Offer online courses for diaspora instructors to offer to students and practitioners.

5. **Improve security and infrastructure.** To attract the greatest segment of diaspora professionals to Nigeria, the Government should prioritize the establishment of safe living conditions and improved security, with significant investment in housing infrastructure, crime reduction, increased protection and reliable means of transportation. This can be attained through the following actions:
 - a. Outline national efforts being undertaken to combat corruption, theft, crime and insecurity.
 - b. Offer short- and long-term housing, transportation and health insurance schemes specifically for diaspora professionals.
 - c. Establish a centralized entity in the diaspora with a satellite office in Nigeria to mitigate theft, corruption, and harassment over the shipping of medical and educational materials to Nigeria.

6. **Invest in key segments of diaspora professionals.** The Government should take advantage of working with specific subsets of the Nigerian diaspora professional population. Among the various segments, students and young professionals are a highly underutilized segment and are ripe for technical and professional opportunities in the country. Offering the most mobile, available and flexible segment of the diaspora with meaningful short- and long-term opportunities will yield substantial results for the diaspora professionals, the local communities and the respective professional sector. The Government may consider the following efforts to attain this:
 - a. Create a volunteer programme during the summer months that offers a stipend and/or housing.
 - b. Shorten the length of time required for youth service for the diaspora.
 - c. Offer professional internships with academic credit as an option with an accredited university.
 - d. Create an online platform to inform young diaspora professionals of work and volunteer opportunities in Nigeria.

7. **Establish flexible options for diaspora participation.** Serious efforts must be made by the Government to offer opportunities that match the needs and abilities of diaspora professionals from the United States. A number of impending limitations exist on the diaspora members' ability to participate in open-ended or rigid development schemes. Institutions should tailor programmes and services to support their ability to contribute to development schemes. The Government may consider these actions:
 - a. Create professional exchange programmes between diaspora professionals, Nigerian hospitals and foreign universities.
 - b. Provide short-term diaspora grants or stipends for professionals who would go to Nigeria on a short-term basis (i.e. one month or less).

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APPENDICES

Appendix A: Mapping Exercise Questionnaire

Section 1: Background Information

1. Gender*
 - Male
 - Female

2. Please select your age range*
 - <18
 - 19–29
 - 30–39
 - 40–49
 - 50–59
 - >59

3. Marital status
 - Single (Never married)
 - Married
 - Separated
 - Divorced
 - Widowed

4. How many children do you have?
 - 0
 - 1
 - 2
 - 3
 - 4
 - 5
 - >5

5. What is the highest level of education you have completed?*

 - Less than high school
 - High school/GED
 - Some college
 - 2-year college degree (associates)
 - 4-year college degree (BS, BA)
 - Master's degree
 - Doctoral degree
 - Professional degree (JD, MD)

6. What professional sector do you work in?*

 - Health
 - Education
 - Other:

- 6a. If health, what is your area of expertise?
Select all that apply.
- Nursing
 - Medicine
 - Nutrition/Dietetics
 - Public health
 - Mental and behavioural health
 - Health policy
 - Health education
 - Dentistry
 - Geriatrics and allied health
 - Other:
- 6b. If education, what is your area of expertise?
Select all that apply.
- Pre-K education
 - K–12 education
 - Higher education
 - Education policy
 - Curriculum development
 - Special education
 - Teacher education
 - Other:
7. What is your employment status?*
- Employed with wages
 - Self-employed
 - A homemaker
 - A student
 - Military
 - Retired
 - Out of work and looking for work
 - Out of work but not currently looking for work
 - Unable to work
8. What is your average annual income?
- No income
 - <USD 10,000
 - USD 10,000–20,000
 - USD 21,000–30,000
 - USD 31,000–40,000
 - USD 41,000–50,000
 - USD 51,000–60,000
 - USD 61,000–70,000
 - USD 71,000–80,000
 - USD 81,000–90,000
 - USD 91,000–100,000
 - >USD 100,000
9. Where were you born?*
- Nigeria
 - United States of America
 - Other
- 9a. If born outside of the United States or Nigeria, please specify country:

10. If born outside of the United States, how many years have you lived in the United States?
- Less than 1 year
 - 1–4 years
 - 5–9 years
 - 10–15 years
 - 16–20 years
 - Over 20 years
11. What state or territory in Nigeria do you or your family originate from?
- | | |
|-------------|----------|
| Abuja | Kano |
| Anambra | Katsina |
| Enugu | Kebbi |
| Akwa Ibom | Kogi |
| Adamawa | Kwara |
| Abia | Lagos |
| Bauchi | Nasarawa |
| Bayelsa | Niger |
| Benue | Ogun |
| Borno | Ondo |
| Cross River | Osun |
| Delta | Oyo |
| Ebonyi | Plateau |
| Edo | Rivers |
| Ekiti | Sokoto |
| Gombe | Taraba |
| Imo | Yobe |
| Jigawa | Zamfara |
| Kaduna | |
12. What is your current nationality?*
- Nigerian
 - American
 - Other:
13. What city in the United States do you currently live?*
- Please select one.
- Atlanta, GA
 - Houston, TX
 - Baltimore, MD
 - Chicago, IL
 - Other:
14. Which languages are you fluent in? (List all.)

Section 2: Migration

15. On average, how often do you visit Nigeria?*
- If never, go to question 19.
- Never
 - More than once every year
 - Every 1–2 years
 - Every 3–4 years
 - Every 5–7 years
 - Every 8–9 years
 - Every 10+ years
16. On average, how long do you stay in Nigeria when you visit?
- Less than 1 month
 - 1–3 months
 - 4–7 months
 - 8–11 months
 - 12+ months
17. When you reflect on your visit(s), how would you describe your experience?
- Very poor
 - Poor
 - Fair
 - Good
 - Very good
18. For what purpose do you visit Nigeria?
- Select all that apply.
- To visit family and friends
 - To invest financially
 - Tourism/Leisure
 - To work
 - To study
 - Volunteer/Charity work
 - Politics/Lobbying
 - Other:
19. What are the top 3 most important conditions that would influence your decision to work in Nigeria?
- Accompanied by family
 - Accommodation
 - Facilities and work environment
 - Comparable salary and benefits
 - Opportunities for career advancement
 - Safety and security
 - Level of corruption
 - Health and education provision
 - Location
 - Economic and political stability
20. Are any of your family members currently residing in Nigeria? (Select all that apply.)*
- If no, go to question 22.
- No
 - Yes (spouse)
 - Yes (parents)
 - Yes (children)
 - Yes (other relatives)

21. If yes to question 20, which state or territory?

Abuja	Kano
Anambra	Katsina
Enugu	Kebbi
Akwa Ibom	Kogi
Adamawa	Kwara
Abia	Lagos
Bauchi	Nasarawa
Bayelsa	Niger
Benue	Ogun
Borno	Ondo
Cross River	Osun
Delta	Oyo
Ebonyi	Plateau
Edo	Rivers
Ekiti	Sokoto
Gombe	Taraba
Imo	Yobe
Jigawa	Zamfara
Kaduna	

22. Do you maintain contact with your family or friends in Nigeria?

If no, go to question 25.

Yes

No

23. If yes to question 22, how do you maintain contact with family or friends in Nigeria?

Select all that apply.

Telephone

E-mail

Letters

Mobile applications

Video messaging (i.e. Skype)

Twitter

Facebook

Other:

24. How do you get information on what is happening in Nigeria?*

Select all that apply.

Telephone

E-mail

Letters

Mobile applications

Twitter

Facebook

Online news sources

Newspapers

Nigeria High Commission

I do not get information on ongoings in Nigeria

Other:

25. Have you ever lived in Nigeria?*

If no, continue to question 28.

Yes

No

26. If yes to question 25, how long did you live in Nigeria?
27. What was your primary reason for leaving Nigeria?
Education
Employment/business
Political/asylum
Moved with family
Marriage
Other:
28. Do you want to move to Nigeria on a permanent basis in the future?*
- If no, go to the next section (section 3).
Yes
No
I do not know
29. If yes to question 28, when do you expect to move to Nigeria?
In the next 6 months
In 6 months to 1 year
In 2–5 years
In more than 5 years
30. Why do you want to move permanently to Nigeria?
Select all that apply.
To work or establish a business
To marry
To invest financially
To be with family and friends
To study
Retirement
Politics/Lobbying
Unsure
Other:

Section 3: Sector Development

31. Are you interested in contributing to the development of the health or education sector in Nigeria?*
- If yes, go to question 33.
- Yes
 - No
32. If no to question 31, please explain. Indicate if there is another sector you wish to contribute to. Then, go to the next section (section 4).
33. If yes to question 31, select the sector you are interested in contributing to.
- Health
 - Education
 - Both
 - Other:
34. In what ways would you be interested in contributing in the education sector?
Select all that apply.
- Working in the private or public sector
 - Investing financially
 - Engaging in a skills transfer initiative
 - Through mentoring or consulting
 - Through providing online training courses related to your sector
 - Other:
35. Which particular area in the education sector would you like to be involved?
Select all that apply.
- Pre-K education
 - K–12 education
 - Higher education
 - Education policy
 - Curriculum development
 - Special education
 - Teacher education
 - Other:
36. In what ways would you be interested in contributing in the health sector?
Select all that apply.
- Working in the private or public sector
 - Investing financially
 - Engaging in a skills transfer initiative
 - Through mentoring or consulting
 - Through providing online training courses related to your sector
 - Other:
37. Which particular area in the health sector would you like to be involved?
Select all that apply.
- Nursing
 - Medicine
 - Nutrition/Dietetics
 - Public health
 - Mental and behavioural health
 - Health policy
 - Health education
 - Dentistry
 - Geriatrics and allied health
 - Other:

Section 4: Remittances for Health and Education

Note: Remittances are money/goods transfer initiated by foreign workers who send part of their end income to their country of origin.

38. Have you ever sent remittances to Nigeria specifically for education purposes?*
- If no, please skip to question 41.
- Yes
 - No
39. If yes, how often have you sent remittances for education?
- Weekly
 - Monthly
 - Quarterly
 - Annually
 - Other:
40. What areas in education do you believe your remittances have contributed?
- Select all that apply.
- Family education expenses
 - Education infrastructure (i.e. schools)
 - Community education programme
 - Other:
41. Have you ever sent remittances to Nigeria specifically for health purposes?*
- If no, go to question 44.
- Yes
 - No
42. If yes, how often have you sent remittances for health?
- Weekly
 - Monthly
 - Quarterly
 - Annually
 - Other:
43. What areas in health do you believe your remittances have contributed?
- Select all that apply.
- Family health expenses
 - Health infrastructure (i.e. health facilities)
 - Community health programme
 - Other:
44. Which particular geographic areas of Nigeria would you be interested in developing?
- Multiple responses are allowed.
- Not interested in developing
 - All
 - South-south zone
 - South-west zone
 - South-east zone
 - North-central zone
 - North-east zone
 - North-west zone

Section 5: Diaspora Networks

Note: Diaspora networks are networks or organizations created by migrants to connect their community of residence with their community in their country of heritage, providing a forum for migrants from the same area to gather, exchange experiences, and work together on issues of common interest.

45. Do you belong to a diaspora network (formal or informal)?*
If no, go to the next section (section 6).
Yes
No
46. If yes, which type of diaspora network do you belong?
Select all that apply.
Professional/Career-based
Academic
Government
Social/Cultural
Religious-based
Internet-based social networking groups
Other:
47. How is information shared among members of the diaspora network?
Select all that apply.
Meetings
E-mails
Websites
Twitter
Facebook
Newsletters
Word of mouth
Other:
48. How often do you meet?
Weekly
Biweekly
Monthly
Quarterly
Every 6 months
Yearly
Other:
49. Is there a contact person/focal point for your diaspora network?*
- If yes, please provide contact information below.
Yes
No
Name of diaspora network:
Contact person: First name
Contact person: Last name
Contact person: E-mail
Contact person: Phone number

Section 6: Next Steps

50. Would you be willing for us to contact you to provide additional information on the above questions?
Yes
No
51. Would you be interested in participating in a focus group in one of our designated cities?
No
Yes (in Chicago, IL)
Yes (in Baltimore, MD)
Yes (in Atlanta, GA)
Yes (in Houston, TX)
52. Would you be interested in participating in an in-depth interview?
No
Yes (in Chicago, IL)
Yes (in Baltimore, MD)
Yes (in Atlanta, GA)
Yes (in Houston, TX)
53. Please provide your contact information
First name
Last name
E-mail
Home address
Phone number
54. Would you be interested in receiving additional information about projects for Nigerian diaspora in the future?*
- Yes
No

Appendix B: Focus Group Discussion Questions

1. What are your thoughts on the current opportunities for diaspora engagement and investment in Nigeria's development?
2. As a professional, under what conditions would you move to Nigeria to work temporarily or permanently in your sector?
3. What areas should be prioritized in a diaspora engagement policy developed by the Government of Nigeria?
4. What challenges affect your engagement in diaspora development activities in Nigeria and why?
5. In what ways would you like to contribute to the health and education sector in Nigeria and why?
6. Is there anything else you would like to say about Nigerian diaspora's engagement or investment in health and education in Nigeria?

Appendix C: Key Informant Interview Questions

1. What are your general thoughts about opportunities for diaspora engagement in the health and education sectors in Nigeria?
2. Would members of your organization be interested in contributing in the health or education sector in Nigeria? In what ways, could contributions be made as a group?
3. Has your organization planned or participated in transfer of skills or service projects in Nigeria in the past? If so, how was that experience?
4. What motivates (or would motivate) members of your organization to participate in projects in Nigeria?
5. What ideas do you have on the types of projects your organization could engage in Nigeria?
6. What should the Government of Nigeria prioritize for diaspora organizations when developing diaspora engagement policy?



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