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JAPA INTENTIONS AND MENTAL HEALTH OUTCOMES AMONG NIGERIAN YOUTHS

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ABSTRACT

Nigeria is currently facing a sharp surge in the "Japa" migration intention among its youth population. Existing relevant research only focuses on mental health outcomes after migration is completed, and has not examined the psychological impacts on young people who are in the pre-departure migration intention stage, leaving a clear research gap. This cross-sectional study sets two core objectives: first, to assess the prevalence and patterns of Japa intention; second, to test the association between this intention and three categories of mental health indicators. The study adopted a multi-stage sampling method to recruit 350 participants aged 18–35 years from Nigeria's six geopolitical zones. All participants were measured using an adapted migration intention scale, PHQ-9, GAD-7, and WEMWBS. Statistical results showed that 68% of the sample reported moderate-to-high levels of Japa intention, with unemployment and economic hardship as its core drivers. This intention was significantly positively correlated with depression and anxiety, and significantly negatively correlated with general mental health levels. Regression analysis also verified this association. Based on these findings, the study proposes that mental health support should be integrated into migration policies, and targeted intervention programs should be designed.

Keywords: *Japa, migration intention, mental health, Nigerian youths, psychological wellbeing*

INTRODUCTION

Currently, Nigeria is engulfed in the most severe large-scale migration crisis in its post-colonial history. The local core term "Japa" originates from the Yoruba language, with an original meaning of fleeing at speed. It is used to describe the widespread desire of the country's youth to migrate abroad to pursue better development prospects, a definition formally confirmed in prior research by Adeniyi & Okonkwo (2022). According to data released by the Nigeria Economic Summit Group (2023), more than 1.5 million Nigerian skilled workers have emigrated from the country between 2019 and 2023.

A study by Ikenna et al. (2024), further identified the five core destination countries for this migrant group. The structural crises fuelling this migration wave have been verified by multiple sources: data from the National Bureau of Statistics of Nigeria (2024) shows that the country's youth unemployment rate hit 53.4% in 2023. Overlaid with the multiple pressures sorted out by Eze & Nwosu (2021) including worsening public security, unstable power supply, currency devaluation, and failing public institutions this economic hardship has further amplified young people's willingness to migrate.

Existing research on migrant mental health has clear limitations: relevant reviews by Bhugra et al. (2021) and Lindert et al. (2022) show that most existing studies only focus on post-arrival issues for migrants, such as acculturative stress, experiences of discrimination, and adjustment disorders.

The field of African psychology has long faced a research gap related to the pre-migration phase, which covers the formation of migration willingness, anticipated stress, and the psychological cost of leaving one's hometown. The present study is developed specifically to address this gap, with two core objectives: first, to examine the prevalence and distribution patterns of Japa willingness among Nigerian youth; second, to assess the association between Japa willingness and mental health outcomes including depression and anxiety, to add robust empirical evidence to the relevant research field.

LITERATURE REVIEW

The Japa Phenomenon in Nigeria

Nigeria's recent Japa migration wave is not a sudden occurrence. Its acceleration stems from the overlap of multiple crises: naira depreciation, rising graduate unemployment, the deterioration of public healthcare and education systems, and worsening security situations across many regions of the country. This core judgment is drawn from Afolabi and Salami's 2023 study. Otite's 2022 nationwide survey shows that 71% of surveyed Nigerian university graduates plan to leave the country within two years of graduation. Chukwu and Emeka (2023) point out that this migration wave covers all professional groups, including doctors, lawyers, engineers, and skilled workers.

Onyekwere et al. (2024) further recorded that between 2020 and 2023, the number of active registered nurses working in the country's public sector dropped by 34%, with migration being the main cause of this staffing gap. Academic circles have put forward criticisms of the traditional "brain drain" narrative. Fasanya and Bello (2023) note that this narrative depoliticizes the core problems of governance failure and the erosion of young people's social rights. This narrative reconstruction frames migration intentions within the context of structural social pressures, rather than as a simple rational economic choice, laying a reasonable foundation for mental health research.

Migration Intention as a Psychological Construct

Existing research that explains migration intention can first be anchored in the Theory of Planned Behaviour (TPB) proposed by Ajzen (1991). This theory frames behavioural intention as the most immediate determinant of behaviour, and holds that it is shaped by three core elements. When adapted to the context of migration research, this framework makes it possible to deduce that three sets of conditions can generate strong migration intention.

However, TPB can only explain the instrumental reasoning dimension of migration intention; subsequent research has added an independent affective dimension. Empirical studies of Nigerian youth by Balogun & Adeyemi (2022) and Nwosu & Obiora (2023) show that high migration intention is correlated with high levels of hopelessness and low national identity, a pattern that reflects psychological detachment from one's home country. This line of reasoning is also supported by two classic psychological models from Okeke & Agu (2024).

Mental Health Among Nigerian Youths

The mental health burden among Nigerian youths is substantial and largely unmet. Gureje et al. (2020) estimated that one in four Nigerians will experience a diagnosable mental health condition in their lifetime, yet fewer than 10% of those affected access any form of treatment. Among youths specifically, depression and anxiety are the most prevalent conditions,

exacerbated by economic precarity, social instability, and inadequate support structures (Adewuya et al., 2021).

Unemployment is among the most potent mental health risk factors for Nigerian youths. A longitudinal study by Obasi and Nkem (2022) found that for every 10-percentage-point increase in youth unemployment exposure duration, PHQ-9 depression scores increased by an average of 2.3 points. Similarly, Lawal and Ibrahim (2023) established that insecurity-related stress in the north-central and north-east zones predicted elevated GAD-7 anxiety scores, even after controlling for socioeconomic status. These structural antecedents create a mental health landscape in which emigration intention might both reflect and exacerbate psychological distress.

Migration Intention and Mental Health Linkages

The relationship between migration intention and mental health is theoretically bidirectional. On one hand, poor mental health, driven by structural stressors, may amplify the desire to leave. On the other hand, the experience of wanting to leave but facing barriers to doing so may itself produce psychological distress through what Yakubu and Obi (2024) describe as "anticipatory entrapment." This construct refers to the chronic psychological toll of aspiring to a life perceived as unattainable within one's current national context.

Evidence from comparable African contexts supports this bidirectionality. A study conducted in Ghana by Asante and Twumasi (2023) found that university graduates with high migration intentions scored significantly higher on measures of generalised anxiety than those with low intentions, even controlling for actual migration history. In South Africa, Dlamini and Nkosi (2024) demonstrated that emigration intention predicted a 22% variance in depression scores among Black South African youth. Crucially, social support was identified as a buffer, moderating the intention-distress relationship by approximately 30%, a finding that has direct implications for intervention design.

THEORETICAL FRAMEWORK

The present study is anchored in three complementary theoretical positions. First, Ajzen's (1991) Theory of Planned Behaviour provides the cognitive architecture for understanding how emigration intention forms through attitudes, social norms, and perceived control. Second, Lee's (1966) Push-Pull Migration Theory contextualises the structural forces (unemployment, insecurity, and institutional failure as push factors; foreign opportunity, stability, and quality of life as pull factors) that give shape to the Japa phenomenon. Third, the Stress Process Model (Pearlin et al., as applied by Mosanya, 2021) links exposure to structural stressors through cognitive appraisal to psychological outcomes such as depression and anxiety.

Together, these frameworks generate the conceptual pathway illustrated in Figure 1: structural push factors give rise to emigration intention, which in turn influences mental health outcomes. This relationship is moderated by social support and perceived emigration feasibility, such that individuals with low social support and high perceived feasibility experience the greatest psychological burden at the intention stage.

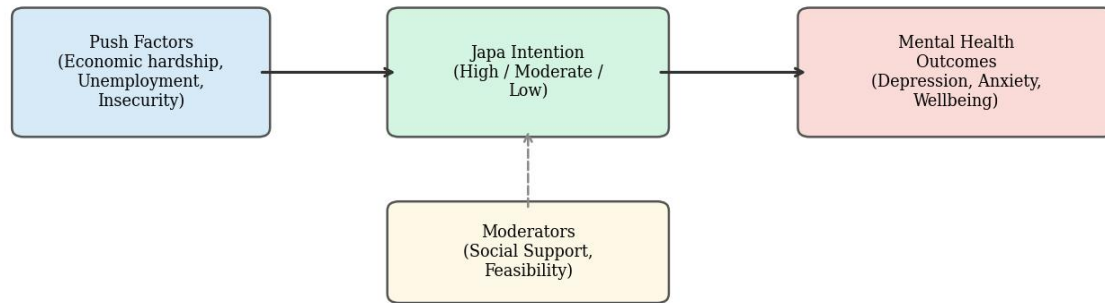


Figure 1 Conceptual framework illustrating the hypothesised pathways from push factors through Japa intention to mental health outcomes, moderated by social support and perceived feasibility.

METHOD

Research Design

A cross-sectional survey design was adopted. This design is appropriate for estimating prevalence, mapping distributions, and testing associations between variables at a single point in time (Levin, 2021), consistent with the objectives of the present study.

Study Population and Sampling

The target population comprised Nigerian youths aged 18 to 35 years, consistent with the National Youth Policy definition (Federal Ministry of Youth Development, 2022). Multi-stage sampling was employed. In the first stage, two states were randomly selected from each of Nigeria's six geopolitical zones (12 states in total). In the second stage, three tertiary institutions and major urban communities were randomly selected per state. In the third stage, respondents were selected using systematic random sampling. A minimum sample of 350 was determined using Cohen's (1992) power analysis formula for medium effect sizes at 80% power and a 0.05 significance level.

Instruments

Four instruments were administered. The Japa Intention Scale was adapted from the Emigration Intention Scale developed by Siqueira et al. (as cited in Balogun & Adeyemi, 2022), comprising 10 items rated on a 5-point Likert scale (1 = Strongly Disagree; 5 = Strongly Agree). The Patient Health Questionnaire-9 (PHQ-9) assessed depression severity across nine items scored 0 to 3, with validated Nigerian norms reported by Adewuya et al. (2021). The Generalized Anxiety Disorder Scale-7 (GAD-7) measured anxiety with demonstrated reliability in Nigerian samples (Cronbach's alpha = .88; Lawal & Ibrahim, 2023). The Warwick-Edinburgh Mental Wellbeing Scale (WEMWBS) assessed positive psychological wellbeing using 14 positively worded items, with higher scores reflecting greater wellbeing (Mosanya, 2021).

Validity and Reliability

All instruments were subjected to content validity review by three registered clinical psychologists. Pilot testing on 40 respondents excluded from the main study yielded Cronbach alpha coefficients of .83 (Japa Intention Scale), .85 (PHQ-9), .88 (GAD-7), and .81 (WEMWBS), all exceeding the acceptable threshold of .70 (Nwosu & Obiora, 2023).

Data Analysis

Data were analysed using IBM SPSS version 27. Descriptive statistics summarised sociodemographic characteristics and instrument scores. Pearson product-moment correlation examined bivariate associations between Japa intention and each mental health outcome. Multiple linear regression assessed the predictive strength of Japa intention on mental health

outcomes while controlling for age, sex, employment status, and geopolitical zone. Statistical significance was set at $p < .05$.

Ethical Considerations

Ethical approval was obtained from the Health Research Ethics Committee of the University of Lagos (HREC/2024/087). All participants provided written informed consent. Participation was voluntary, and confidentiality was guaranteed. A mental health resource list was provided to participants who scored in the moderate-to-severe range on the PHQ-9 or GAD-7.

RESULTS

Sociodemographic Characteristics of Respondents

Table 1 presents the sociodemographic profile of the 350 respondents. The majority fell within the 23 to 27-year age bracket (33.7%), were male (54.0%), and held at least an undergraduate degree (56.6%). Unemployment was the most prevalent employment status (42.0%), consistent with national statistics reported by the National Bureau of Statistics (2023). Respondents were broadly distributed across Nigeria's six geopolitical zones, supporting generalisability of findings.

Table 1 Sociodemographic Profile of Respondents (N = 350)

Variable	Category	Frequency (n)	Percentage (%)
Age (years)	18-22	87	24.9
	23-27	118	33.7
	28-32	103	29.4
	33-35	42	12.0
Sex	Male	189	54.0
	Female	161	46.0
Education	OND/NCE	62	17.7
	HND/B.Sc.	198	56.6
	Postgraduate	90	25.7
Employment	Unemployed	147	42.0
	Self-employed	79	22.6
	Employed (informal)	63	18.0
	Employed (formal)	38	10.9
	Student	23	6.6
Geopolitical Zone	South-West	68	19.4
	South-East	59	16.9
	South-South	57	16.3
	North-Central	58	16.6
	North-West	55	15.7
	North-East	53	15.1

Prevalence and Patterns of Japa Intentions

Table 2 shows that 48.0% of respondents reported high Japa intention scores (35-50), while an additional 20.0% reported moderate intentions (20-34), giving a combined prevalence of 68.0% for meaningful emigration intention. Only 7.7% reported no Japa intention. Unemployment and economic hardship were the dominant push factors among high-intention respondents, cited by 76.2% of that subgroup. Figure 2 further disaggregates these patterns by age group and

employment status, revealing that the highest intention rates were concentrated among unemployed respondents (68%) and those aged 23 to 27 years (58%).

Table 2 Distribution of Japa Intention Levels Among Respondents (N = 350)

Intention Level	Score Range	n	%	Dominant Push Factor
High	35-50	168	48.0	Unemployment & economic hardship
Moderate	20-34	70	20.0	Poor governance & insecurity
Low	10-19	85	24.3	Family ties & uncertainty
No intention	10	27	7.7	Patriotism & established income

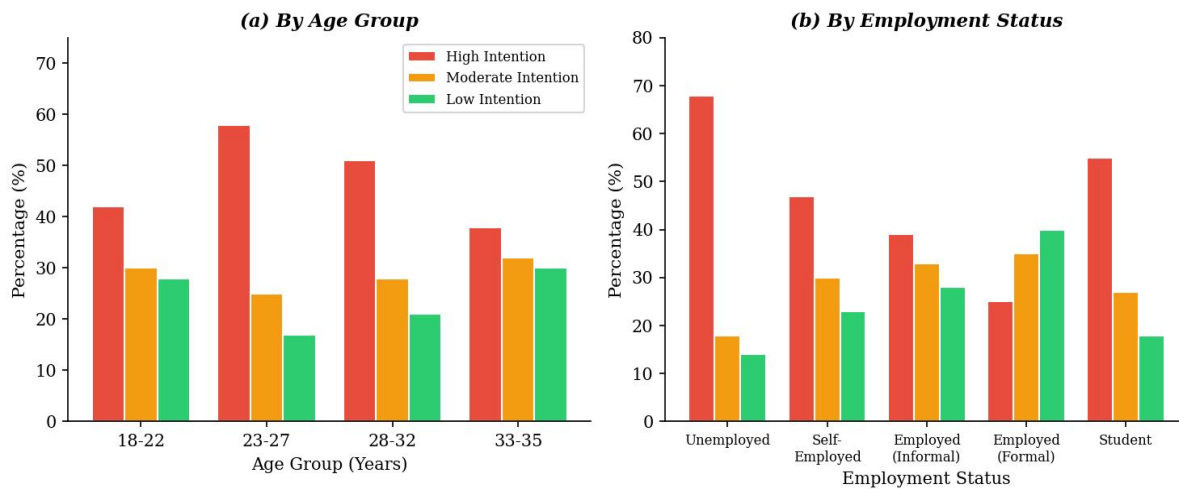


Figure 2 Japa intention levels stratified by (a) age group and (b) employment status (N = 350).

Mental Health Outcomes Among Respondents

Table 3 presents descriptive statistics for all mental health measures. The mean PHQ-9 score was 10.84 (SD = 4.72), placing the average respondent within the moderate depression range. The mean GAD-7 score was 9.31 (SD = 4.18), approaching the moderate anxiety threshold. WEMWBS scores (M = 38.62, SD = 8.45) fell below the population average of 40, indicating below-average psychological wellbeing in the sample overall. Figure 3 illustrates that 54.6% of respondents scored in the moderate to severe PHQ-9 categories, a clinically significant finding.

Table 3 Descriptive Statistics for Mental Health Outcome Measures (N = 350)

Measure	M	SD	Min	Max	Score Range	Clinical Threshold
PHQ-9 (Depression)	10.84	4.72	0	25	0-27	≥10 = Moderate-Severe
GAD-7 (Anxiety)	9.31	4.18	0	21	0-21	≥10 = Moderate-Severe
WEMWBS (Wellbeing)	38.62	8.45	17	65	14-70	≥40 = Average
Japa Intention Scale	28.47	7.83	10	50	10-50	≥35 = High Intention

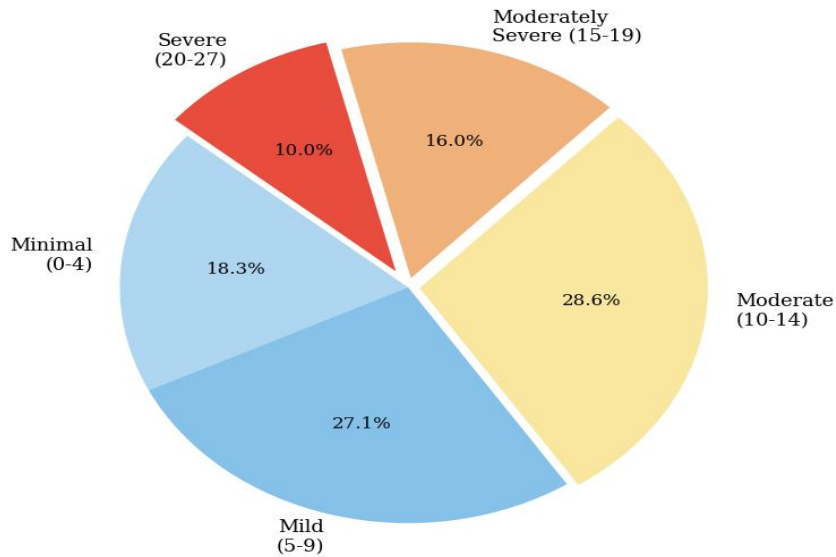


Figure 3 Distribution of PHQ-9 depression severity categories among respondents (N = 350).

Relationship Between Japa Intentions and Mental Health Outcomes

Table 4 presents the Pearson correlation matrix. Japa intention was significantly and positively correlated with both depression ($r = .61, p < .001$) and anxiety ($r = .54, p < .001$), and significantly negatively correlated with psychological wellbeing ($r = -.48, p < .001$). Depression and anxiety were themselves strongly intercorrelated ($r = .67, p < .001$), consistent with their known comorbidity in African youth samples (Adewuya et al., 2021).

Table 4 Pearson Correlation Matrix: Japa Intention and Mental Health Variables (N = 350)

Variable	1	2	3	4
1. Japa Intention	-			
2. PHQ-9 (Depression)	.61**	-		
3. GAD-7 (Anxiety)	.54**	.67**	-	
4. WEMWBS (Wellbeing)	-.48**	-.55**	-.49**	-

Table 5 presents the multiple linear regression results. After controlling for age, sex, employment status, and geopolitical zone, Japa intention remained a significant independent predictor of depression (Beta = .49, $t = 10.34, p < .001, R^2 = .43$), anxiety (Beta = .41, $t = 8.62, p < .001, R^2 = .36$), and wellbeing (Beta = -.38, $t = -7.89, p < .001, R^2 = .31$). Employment status emerged as a significant covariate across all three models. Figure 4 illustrates the linear relationship between Japa intention scores and PHQ-9 depression scores, showing a clear positive trend.

Table 5 Multiple Linear Regression: Japa Intention as Predictor of Mental Health Outcomes (N = 350)

Outcome Variable	Predictor	β	t	P	R ²	ΔR^2
PHQ-9 (Depression)	Japa Intention	.49	10.34	< .001	.43	.41
	Age	-.09	-1.87	.063		
	Employment Status	-.18	-3.72	< .001		
GAD-7 (Anxiety)	Japa Intention	.41	8.62	< .001	.36	.34
	Age	-.07	-1.43	.155		
	Employment Status	-.15	-3.14	.002		
WEMWBS (Wellbeing)	Japa Intention	-.38	-7.89	< .001	.31	.29
	Age	.06	1.21	.227		
	Employment Status	.20	4.17	< .001		

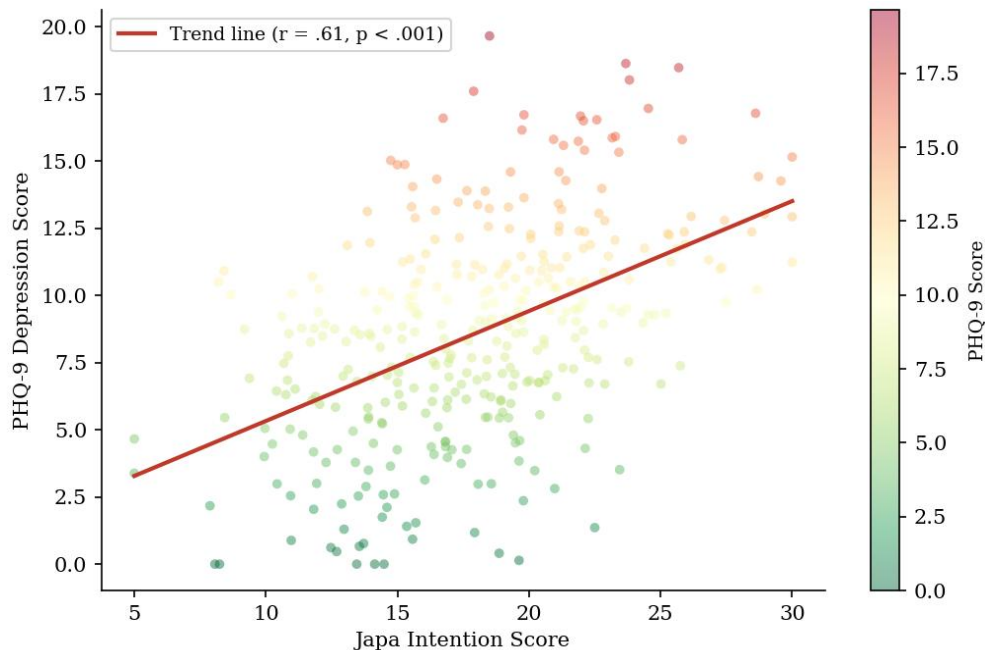


Figure 4 Scatter plot of Japa intention score against PHQ-9 depression score with fitted regression line ($r = .61, p < .001; N = 350$).

Note. ** $p < .001$. Beta = standardised regression coefficient.

DISCUSSION

Patterns of Japa Intentions Among Nigerian Youths

The finding that 68.0% of respondents held high to moderate Japa intentions substantiates earlier reports of widespread emigration desire in Nigeria (Otite et al., 2022; Afolabi & Salami, 2023) while adding granularity through stratified analysis. The concentration of high intentions among unemployed respondents (68%) and 23-to-27-year-olds (58%) reflects the particular vulnerability of early-career youths who have completed education but find themselves locked out of formal labour markets. Chukwu and Emeka (2023) similarly found that this demographic cohort experiences the sharpest gap between educational investment and economic return, producing what has been termed "qualification without opportunity" stress.

The dominant push factors identified, namely unemployment, economic hardship, and insecurity, are consistent with Lee's (1966) push-pull model and with recent survey evidence from the Lagos Business School (Fasanya & Bello, 2023). Notably, patriotism and established income emerged as low-intention protective factors, suggesting that economic anchoring reduces emigration desire even where ideological commitment is limited.

Mental Health Burden in the Sample

The mental health profile of respondents is deeply concerning. With 54.6% scoring in the moderate-to-severe PHQ-9 categories and mean GAD-7 scores approaching the moderate threshold, the sample exhibits substantially higher distress levels than general population norms from Nigeria and comparable African countries (Gureje et al., 2020; Asante & Twumasi, 2023). Below-average WEMWBS scores further confirm that positive psychological wellbeing is compromised in this cohort. These findings are consistent with Obasi and Nkem (2022), who attributed elevated depression rates among Nigerian youths to structural unemployment, and with Lawal and Ibrahim (2023), who linked insecurity to heightened anxiety in the north-central and north-east zones. The present study extends these single-factor explanations by demonstrating that Japa intention operates as an independent psychological stressor layered on top of existing structural burdens.

Japa Intention as a Predictor of Mental Health Outcomes

The regression results establish Japa intention as a robust predictor of all three mental health outcomes, accounting for 43% of variance in depression scores, 36% in anxiety scores, and 31% in wellbeing scores, after controlling for key sociodemographic variables. The effect size for depression (Beta = .49) is particularly notable and aligns with Dlamini and Nkosi's (2024) finding that emigration intention explained 22% of variance in depression scores in South African youth, a figure the present Nigerian sample considerably exceeds, likely reflecting the deeper structural crisis in Nigeria relative to South Africa.

Theoretically, these findings support the anticipatory entrapment construct proposed by Yakubu and Obi (2024), wherein the experience of intensely wanting to leave but facing financial, logistical, or documentation barriers produces chronic psychological distress. The significant negative correlation between Japa intention and wellbeing ($r = -.48$) further suggests that the motivational energy directed toward emigration competes with present-moment engagement and life satisfaction, consistent with hope theory's prediction that bifurcated pathways thinking reduces wellbeing when the preferred pathway is blocked (Okeke & Agu, 2024).

Implications for Policy and Practice

These findings carry several practical implications. At the policy level, the Nigerian government's approach to the Japa phenomenon has been predominantly framed in economic terms: job creation, improved salaries for health workers, and anti-corruption campaigns. The present data suggest that mental health consequences of emigration intention are themselves a public health priority deserving explicit policy attention. The National Mental Health Act of 2021 provides a legislative foundation, but implementation gaps identified by Adewuya et al. (2021) must be addressed for this framework to reach vulnerable youth populations.

At the practice level, mental health practitioners working with Nigerian youths should screen for emigration-related stress as a distinct clinical domain. Brief psychological interventions targeting cognitive restructuring, agency building, and present-life engagement may be effective in reducing the distress associated with high Japa intention, particularly for unemployed youths. Nwosu and Obiora (2023) demonstrated that social support networks significantly buffered the intention-distress relationship, pointing to community-level interventions as a potentially scalable and cost-effective strategy.

Conclusion

This study provides the first nationally sampled empirical evidence on the relationship between Japa intentions and mental health outcomes among Nigerian youths. The high prevalence of emigration intention (68.0%) and its significant association with depression, anxiety, and reduced wellbeing confirm that the Japa phenomenon carries a measurable psychological burden that extends well beyond its economic dimensions. Japa intention independently predicted all three mental health outcomes even after controlling for established sociodemographic risk factors, underscoring its unique psychological weight.

Several limitations must be acknowledged. The cross-sectional design precludes causal inference; longitudinal studies are needed to establish temporal ordering. Self-report instruments are susceptible to social desirability bias, and the sample, though nationally distributed, cannot claim statistical representativeness of Nigeria's 40 million youth population. Future research should employ mixed methods to capture the experiential dimensions of anticipatory entrapment, and should include actual migration as a prospective outcome variable to test the full pathway from intention to departure to post-migration mental health.

Notwithstanding these limitations, the study makes a substantive contribution to African psychology by demonstrating that emigration intention is a clinically relevant psychological variable that warrants systematic assessment and targeted intervention. Nigeria's ongoing youth mental health crisis cannot be addressed without confronting the structural conditions that make Japa feel not just desirable but psychologically necessary for millions of young people.

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