

Effects of Medical Tourism on Economic Growth of Nigeria

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Abstract: Tourism is one of the fastest growing industries in the world. It embraces areas of Physical attractions like falls and rocks and so on; Manmade like amusement and holiday resorts; Wild life based attractions like games, gardens and fishing grounds; Cultural attractions like festivals, arts and crafts; Sports like local, regional and international; and Business tourism like seminars conferences and meetings. The focus of this study is to investigate the effects of medical Tourism on Nigerian economic development. In line with the objectives of the study, the researcher adopted survey design method which made use of primary sources (mainly with questionnaire and observation). This work was analyzed quantitatively with simple percentage and the hypotheses were tested with Chi-square to validate the findings. The result revealed that medical tourism has significant effect on economic growth of Nigeria. The result further shows that medical tourism has positive effect on small and medium scale enterprise in Nigeria. The result also highlights the problems facing medical tourism in Nigeria and under-development of the health system. It was observed that the culture of Nigerians preferring anything foreign is also a contributory factor to the mass exodus of Nigerians for medical treatment outside the country. The study therefore recommended that there should be adequate funding, improved health care facilities, better remuneration and motivation for health workers in order to improve health care system and reduce medical tourism, there should be immediate ban of government sponsored medical treatment abroad, adequate training, enforcement of legal action against medical negligence, improved medical research and encouraging foreign investment and that Government should intensify vigorously the marketing and promotion of Nigeria cultural, historical and archaeological treasures

Keywords: Medical Tourism, Economy, development, Economic growth, SME, Tourism, Brain drain.

I. INTRODUCTION

Medical Tourism is emerging as a prime sector of the growing industry and contributing towards the social, economic and global development. Facts and figures have shown that it has an annual growth rate of 4% in countries like USA, Italy, France, India, Spain, UK, and Caribbean and of recent, African countries like Kenya, South Africa, Morocco, Tunisia, Gambia, Egypt, and so on, earned substantially for medical tourism as analyzed by Mani (2015). He further explained that both receipts and medical tourist arrivals have been on an increase, which implies the growth trend of the industry. In fact, according to ILO (2011), globally the World Tourist Organization (WTO) predicts that the number of

medical tourists will reach almost 1.6bn by the year 2020 (as opposed to 565mn in 1995).

Thus, this development and indeed the mono-cultural nature of Nigerian economy leave no one in doubt as to the need to develop and sustain our medical tourism industry. Nigeria is a vast and fascinating country with varying geographical regions and ecological zones. It has diverse and amiable climatic variables rich in biological diversity. Cascading water systems, rolling links, pleasant and distinctive sceneries. Accordingly the Nigeria government has to diversify the economy to incorporate the medical tourism sector with the launching of Nigeria Tourist Association (NTA) in September, 1962.

The dwindling mono-cultural oil economy in 70's though rising in recent time still require Nigeria to develop its medical tourism sector because oil is vulnerable to fluctuations in demand and price in the international market. So, for the sector to contribute to the wealth of the nation and the well-being of Nigerians, the Nigerian Tourist Association (NTA) metamorphosed into Nigeria Tourist Board (NTB) which now changed to Nigeria Tourist Development Corporation (NTDC) by the virtue of degree 81 of 1992 under the supervision of Ministry of Culture and Tourism. According to Omotosho (2010) the NTDC has the following responsibilities:

Encourages people living in Nigeria to take Medical treatment and holidays in the country And People abroad to visit Nigeria; Encourage the provision and Improvement of medical tourism amenities and Facilities in Nigeria like development of Hospital facilities; Development Of health sector to assist tourist agents; offer Medical and information advice to state and Medical Tourism entrepreneurs on tourism joint Ventures and promotion (Omotosho, 2010).

In the past, people travel from less-developed countries to seek for health care in developed countries in Europe and America, but in recent years, more people now travel from developed countries to less developed countries for medical treatment as a result of lower cost consideration (Horowitz, Rosensweig & Jones, 2017), less treatment period, improved technology and standard healthcare (Paul, 2016). For

example, liver transplant that costs about \$300,000 USD in the United States would generally cost about \$91,000 USD in a country like Taiwan (Tung, 2010), while in a place like Canada long treatment periods for treatments and procedures have also been noted (Fraser Institute, 2015).

Globally, medical tourism has contributed immensely to the growth and development of health care system and the countries that engage in it because it attracts people from various parts of the world thereby adding value to the countries involved. In the United States for example, over 60,000 medical tourists were attracted to the country in 2008 (Dusen, 2018), while in the year 2012, Jordan attracted 250,000 international patients accompanied by more than 500,000 relatives generating well above 1 Billion US dollars income from medical tourism that same year (International Medical Travel Awards, 2014).

In Nigeria and Delta State in particular, the story is different, although the health care system in is a blend of both public and private players (Uchendu, Ilesanmi & Olumide, 2013), the recent mass exodus of Nigerians abroad for treatment is worrisome. In 2013, Nigerians spent \$1billion on foreign medical trips for the treatment of various forms of illness in different countries abroad (British Broadcasting Corporation, 2016) which could have been expended on the development of the country's health care system which in turn would have had a multiplier effect on the development of the country at large. While Nigeria is busy losing millions of dollars to medical tourism, other countries of the world are busy gaining from such cash fly. This study therefore is out to investigate the effects of medical tourism on Nigeria medical tourism on economic development, using Delta state as an example.

1.1 Statement of Problems

Medical tourism is fast becoming a culture among many Nigerians due to the deplorable state of the health care system in Nigeria. Every month, almost 5,000 people leave the country for various forms of treatment abroad when such treatment should have been carried out in Nigeria (Omotoso, 2010). About 1.2 billion dollars is lost to medical tourism yearly in Nigeria which could have been invested in the development of the country's health care system and the country as a whole. The World Health Organization recently ranked Nigeria 187 out of 191 countries in its ranking of the world's health systems above only three countries in the world while neighboring countries like Ghana, Togo, Niger, Mali, and Chad were ranked better than Nigeria. This study therefore explores the remedies to the problem of medical tourism and development of health care system in Nigeria. On the other hand, overseas medical treatment is likely to cause capital flight, unemployment, under capacity utilization of the medical personnel of the citizen and nation currency depreciation.

However, some studies have examined health-seeking behavior in rural communities, health seeking behavior of

students in the university community and factors that responsible for medical tourism in Africa (Adejuwon, 2016; Aboyade, 2013; Omotoso, 2010) but in Nigeria there are no study on the effect of Nigerian elite overseas medical treatment on the economy of Nigeria. This has created gap in the contextual literature. It is against this backdrop that this study examines the effects of medical tourism on Nigerian economic development.

1.2 Objectives of the Study

The general objective of this study is to investigate the effects of medical Tourism on Nigerian economic development. The specific objective includes;

1. To determine the effects of medical Tourism on economic growth.
2. To ascertain the extent of effects of medical tourism on SME's in Delta state and Nigeria.

1.4 Research Questions

The study has the following research questions

1. What are the effects of medical Tourism on Nigerian economic growth?
2. To what extent is the effects of medical tourism on SME's in Delta state and Nigeria

1.5 Statement of Hypothesis

The following two hypothesis are formulated for the study

1. H_0 : There are no significant effects of medical Tourism on Nigerian economic growth
 H_1 : There are significant effects of medical Tourism on Nigerian economic growth.
2. H_0 . There are no significant effects on the extent of medical tourism on SME's in Delta state and Nigeria
 H_1 . There are significant effects on the extent of medical tourism on SME's in Delta state and Nigeria

II. LITERATURE REVIEW

Concept of Medical Tourism

Medical tourism occurs when people travel across international boundaries for their health care and health needs. According to Goodrich & Goodrich (2017), medical tourism is an attempt to attract tourists into a country by deliberately promoting its health care services and facilities in addition to the regular tourist amenities available in that country. Medical tourism is sometimes referred to as health tourism and it is a combination of two distinct services namely: healthcare and tourism. Associating tourism with healthcare such as chemotherapy, heart surgery, kidney transplant and other chronic diseases could sometimes be very hard to comprehend, especially when compared to other forms of tourism like cultural tourism and leisure tourism.

Although, medical tourism is a recent phenomenon, a number of countries like the United Kingdom, Middle East, Japan, United States, Canada, Belgium, Costa Rica, Cuba, Dubai, Hungary, Israel, Jordan, Malaysia, Singapore, South Africa, Thailand and several others have emerged as active players in the medical tourism business, many of whom have grown exponentially and emerged as major force for the growth of service exports worldwide, growing into a multi-billion dollar industry (Gbajabiamila, 2013). In the past, people travel from less-developed countries to seek for health care in developed countries in Europe and America, but in recent years, more people now travel from developed countries to less developed countries for medical treatment as a result of lower cost consideration (International Medical Travel Awards, 2014), less treatment period, improved technology and standard healthcare. For example, liver transplant that costs about \$300,000 USD in the United States would generally cost about \$91,000 USD in a country like Taiwan (Tung, 2010), while in a place like Canada long treatment periods for treatments and procedures have also been noted (Gbajabiamila, 2013).

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2.1 Medical Tourism in Nigeria

In Nigeria, the story is different, although the health care system in Nigeria is a blend of both public (Olorok, 2013) and private players (Uchendu, Ilesanmi & Olumide, 2013), the recent mass exodus of Nigerians abroad for treatment is worrisome. In 2013, Nigerians spent \$1billion on foreign medical trips for the treatment of various forms of illness in different countries abroad (British Broadcasting Corporation, 2016) which could have been expended on the development of the country's health care system which in turn would have had a multiplier effect on the development of the country at large. While Nigeria is busy losing millions of dollars to medical tourism, other countries of the world are busy gaining from such cash fly.

2.2 Concept of Economic Development

A good starting point is to keep in mind the fact that economic development is only a part of the whole social development of a country. By development, most social scientists refer to a process of systematic change in a society that enables the members of that society to improve their production of goods and services, have a greater mastery of their environment, and

have an improved quality of life within the community (Jhingan, 2011).

In line with this suggested definition development includes economic, technical, political, social and other positive changes within a given society or community. An economy is a system of organizations and institutions that either facilitate or play a role in the production and distribution of goods and services in a society. Economies determine how resources are distributed among members of a society; they determine the value of goods or services; and they even determine what sorts of things can be traded or bartered for those services and goods.

How a society structures its economic system is largely a political and social issue. The political and legal structure of a society will govern how wealth can be accumulated, how wealth and resources are distributed, and the manner of competition permitted between different participants in the economy (Jhingan, 2011). Economic systems fall into one of two categories: market systems and command systems.

In a market system, individual people own the factors of production (land, capital and labor), and they can do whatever they want to do with what they own, subject to minimum legal constraints. According to Ikwu, (2012) This might sound familiar if you live in the Nigeria, because the Nigeria is a market economy. You are able to bargain your labor for wages, and use your property as you see fit (so long as it's not illegal).

In a market system, the law of supply and demand governs the economy. If there is a high demand for a product, resource or skill and a low supply of it, it will demand a high price to purchase it. Alternatively, if there is a low demand and a high supply, the price will be low. In other words, the market sets the price of goods, services, and labor. Demand will also determine how much of a product will be produced, or even if it will be produced at all. In a market system, you can engage in any type of lawful economic activity that you want, so long as you can pay for it.

A command system is an economic system where economic decision-making is centralized and usually in the hands of the state. The government controls the factors of production and makes the decisions about what to produce, how much to produce, and to whom the products ultimately go. In theory, the idea is that all production and distribution is directed towards socially-desirable goals. Classic examples of command systems include the economy of the old Soviet Union and the current Chinese economy. However, there are three big economic systems in use by modern governments: capitalism, socialism, and communism. Let's start by looking at capitalism.

Capitalism is a market-based economic system where individuals own all resources. In pure capitalism, the only role of the government is to enforce the rules of the marketplace--preventing illegal activity from destabilizing the economy--

and to protect the property rights of individuals. Since capitalism is a market system, individuals control the factors of production; the land, labour and the capital. They determine what is produced, how much is produced and who gets what is produced. The law of supply and demand and the wealth of personal individuals determine these factors. Products in high demand are produced and available to anyone who can afford the price. The market is driven by each individual's self-interest.

Socialism: This is economic system in which individuals own their human capital. This means that while you have less freedom in a socialis system than in capitalis system, you own your own labour. No one can make you work a particular job and employers must bargain with you.

In its broadest sense, the economy is the organized system of human activity involved in the production, consumption, exchange, and distribution of goods and services.

2.3 Theoretical Framework

This study is anchored on the following theories;

Public Choice Theory (PCT).

This is a theory developed by public choice economists to explain the behaviour of decision makers including government (Stephan, 1995). In other words, PCT pertains to the economic study of non-market decision-making, especially the application of economic analyses to public policy-making (Kumar, 2012). The underlying assumption of public choice theory, according to Fozzard (2011), is that decision makers (politician or bureaucrats) are self-interestedly rational, in the sense of optimising their choices and using the available information to their best advantage. That is why Paul Star in Felkins (2010) averred that the name "public choice" is ill-named or a misnomer, because the only choices it recognizes are essentially private. According to the theory, decision makers- whether voters, politicians, legislators, executives, bureaucrats or government- pursue their personal interest under the garb of public interest.

More so, Downs (1957) cited in Fozzard (2011), opined that the politician's interest is to maximise political power and retain office, thus, they cannot be expected to act or behave in the broad public interest, but will, instead, try to make themselves popular, hence, strengthen their power base and improve their prospects for re-election. For this reason, the politicians will most likely advocate for short-term projects that can generate immediate pay-offs over longer-term projects with a higher return. Furthermore, politicians, especially in a representative democracy, will seek to advance the interests of their proximate constituencies without regard to the consequences for the broader public. This they do by securing funding for programmes that benefit their constituents from the common pool of general taxation, so that the costs of programmes benefiting a few are borne by all (Fozzard, 2011). The politicians transform the economic basis

of costs and benefits into political costs and benefits. This is referred to as the "pork barrel projects", that is, projects that are financed from the common pool or general taxation but whose benefits are exclusively or disproportionately for a particular constituency.

A crucial insight of the public choice theory is that resources allocation and reallocation is the outcome of a political process. The implication is that any budgetary policy discussion that will be economically efficient must consider the political feasibility of that policy. And because both the politician and the bureaucrats are selfish and self-seeking, the budgetary processes may never benefit the poor. The PCT therefore recognizes the need to correct the failures in the market mechanisms, hence, places both the moral and legal obligation on the government to suggest remedies (Kumar, 2012). It also follows from the public choice perspective that all the stages of budgeting- formulation, approval, execution and audit will be hi-jacked for selfish interest.

2.3.1 Anderson theory of Health Care Utilization

This is a theory postulated by Anderson in 1968. The pre-disposing characteristics" of the theory such as the social class of people, demographic factors and personal belief of the benefits of health services are instrumental to individuals" choice of health facilities. According to Anderson (1968), the social classes to which an individual belongs and personal beliefs of the beneficiaries of health services are what motivate individuals to seek medical help.

Following this argument, this theory serves as a platform on which this study can be explained on the following premise: (1) an individual's" social status would determine if such individual would be able to afford medical treatment abroad. It is assumed that people in the higher social status in Nigeria like politicians, government officials and those in power would be able to afford medical treatment abroad while people at the lower stratum in Nigeria may not be able to afford such treatment. (2) The fact that many health care facilities in Nigeria especially government owned hospitals are in deplorable state (Akinsete, 2016) is enough to push patients abroad where they can get better health care for their treatment if they must get well. The place of personal belief would also determine the choice of health care utilization whether people should seek medical help abroad. Owing to loss of confidence in the system by Nigerians (Ihekweazu, 2016) as a result of negative attitude of health professionals, possibilities are that fear may set in, thus influencing the personal belief of many that the system would not be able to handle their health issue, thereby seeking health care abroad. The theory has been criticized for overemphasizing health need at the expense of health beliefs and social structure and also for not paying enough attention to culture and social interaction.

2.3.2. *Endogenous Growth Theory*

The chief inventors of endogenous growth theory are Paul Romer and Robert Lucas (1990). This theory highlights the fact that if productivity is to increase, the labour force must continuously be provided with more resources. Resources in this case include physical capital, human capital and knowledge capital (technology). Therefore, growth is driven by accumulation of the factors of production while accumulation in turn is the result of investment in the private sector. This implies that the only way a government can affect economic development, at least in the long-run, is via its impact on investment in capital, medical tourism, education and research and development. The approach makes improved education (and indeed any kind of training or research that adds to human knowledge in any country) the key to achieving economic growth. Faster economic growth is associated with a higher rate of investment by the private or government sector, a lower share in GDP of government consumption spending, higher school enrollment rates, and greater political stability.

2.3.3 *The Effects of Medical Tourism on Nigeria's Economic Growth*

The tourism sector has witnessed phenomenal growth across the world which has had a symbolic impact on Nigeria; with the launch of 1990 National tourism Policy in a bid to develop its tourism industry. More so, every year substantial percentage of the world population travel on unrestricted movements both within the country and outside it. Indeed, this growth has brought about high employment worldwide, increasing wealth of nations, improving balance of payments and as a veritable tool of human development, thereby leaving Nigeria's economy on the mercy of God.

An acceptable index for measuring growth of tourism is usually in term of international arrivals and receipts, thus, over the past forty years, global medical tourism has expanded at an average of 7% a year in arrivals and 12% a year in receipts, a growth record unmatched by any other economic sector (Omotosho, 2010).

More so, WTO forecast shows that, international tourist arrivals worldwide is predicted to reach 1bn by the year 2010, also receipts are predicted to reach US\$1,550. Between 1950 and 1999, movement of person across frontiers exceeded 664mn, while receipts from medical tourism in other countries which does not include fares paid to corners is also in excess of \$455bn representing per annual receipt of US\$685.

2.3.4 *Social-economic Impact of Medical Tourism*

From the foregoing explanations of potentials or opportunities of tourism in Nigeria, the following socio-economic impacts are clearly identified. First and foremost, the economic impact of medical tourism is the income and wealth it creates for the people and the nations we travel to while destroying Nigeria's economic development (Omotoso, 2010)

Again, it is gratifying to note that the percentage of jobs that depends directly or indirectly on medical tourism demands average at 5 to 7%. These employments are found in medical tourism sites, hotels, airlines, travel agencies and other associated products to medical tourism. In fact, the growth of medical tourism would not have been possible without a vibrant labour.

Also, another economic impact of tourism is that it increases foreign exchange earning to provide the investment necessary so as to finance economic growth, while rectifying our balance of payment deficit. Figures have shown the increasing number of international tourist arrivals and receipts thereby ensuring that balance of payment always balance (Omotosho, 2010).

Economic impact of medical tourism could be in terms of investment and development.

2.3.5 *The Problems Causing Medical Tourism in Nigeria and Under-Development of the Health System*

The following are the problems causing Medical Tourism in Nigeria

Brain Drain

One of the greatest problems causing medical tourism in Nigeria and under-development of the health system is the problem of brain drain. Nigeria is a major health staff-exporting country in Africa (Uneke, 2017) and this has affected the development of the healthcare system negatively due to shortage of health care providers in the system. According to Clemens (2017), many health care providers in Nigeria have left the shores of the country in pursuit of greener pastures abroad. Incidentally, it has been found that, some of the best doctors in the world who have made remarkable contributions in the field of medicine come from Nigeria (Akande, 2015). As at 2010, the number of Nigerian trained doctors practicing in the United States and the United Kingdom stood at 2,392 and 1,529 respectively while the ratio of doctors to patients in Nigeria is 39 per 100,000 people (Ogbom-Egbulem, 2010).

Underfunding

Another underlying factor causing medical tourism among Nigerians is the problem of underfunding of the health system. The way a country finances its health care system is a critical determinant for reaching universal health coverage because, health care finance determines whether the health services that are available are affordable to those that need them. Despite Nigeria's strategic position as the giant of Africa and her position in the League of Nations globally, Nigeria is still underserved in the healthcare spheres when compared to other sectors (Asangansi & Shaguy, 2011). Health facilities in the country including health professionals and medical equipments are grossly inadequate and where policies are in place to address these issues, they are barely implemented. This fully manifested itself in the ongoing

management of the COVID 19 Virus by NCDC- National Center for Disease Control of which there was no medical facilities put in place by the political leaders. As at 2018 budget, only 4.3% budgetary allocation was given to the health sector (Ibekwe, 2018) which is far lower than the recommended 26% allocation by the United Nations.

Dilapidated Structures and Obsolete Medical Equipment

In addition to the above is the problem of dilapidated structures and obsolete medical equipments. Despite the high number of available medical institutions in Nigeria, Nigeria still records below average health statistics because of inability to provide quality health care due to inadequate basic infrastructure and obsolete medical equipments (Akinsete, 2018). Many of the hospitals, especially government owned hospitals in and around the country, are in bad shape (Akor, 2018). In many developed countries, Magnetic Resonance Imaging (MRI), Computed Tomography (CT) scans and other modern diagnostic procedures are common and affordable but in Nigeria, such procedures are still an exclusive preserve of the rich (John, 2018). For instance, during the first week of COVID 19 in Lagos and Abuja, there was no better equipped hospital to be used as isolation and testing centre, until the border and Air ports were closed. The government saw need to install these equipment because there was no opportunity for medical tour any longer. This claimed the life of the Chief of Staff to the Buhari led government, Late Mallam, Abba Kyari. Some government owned hospitals for example, still refer patients to private laboratory and diagnostic centers for their laboratory examinations and investigations (Mekwunye, 2018). However, Egbujo (2015) has however argued that this predicament is as a result of poor planning, poor funding and poor regulation.

Industrial Strike

Furthermore, the incessant industrial action being witnessed in the system in recent years is another major problem causing mass exodus of Nigerians abroad for medical treatment. This has been identified as a major contributor to the country's poor health indices which has brought untold hardship, sufferings and death to many families and patients across the federation (Ogbebo, 2015). In recent years, the Nigerian health system has experienced numerous strike actions involving doctors, nurses and allied healthcare workers (Olatunji, 2013; Hassan, 2013; Okafor, 2013; Ibeh, 2015) as a result of various demands and unhealthy rivalry among health professionals in the system. This has negatively impacted on the healthcare system, leading to several avoidable deaths, complications and outgoing medical tourism, as the wealthy seek health services abroad (Hassan, 2013).

The Culture of Nigerians Preferring Anything Foreign

According to Bruce (2016), Nigerians have insatiable appetite for anything foreign. While the wealthy prefer the United States or European markets for treatment, some others prefer Middle-Eastern and South African markets for treatment

while a large number prefer India for a host of reasons (Parmar, 2015). Out of over 5,000 people that fly out of Nigeria monthly, for medical treatment (Wapmuk, Wapmuk & Gbajabiamila, 2013), while a large number of these trips were done by politicians who were treated by Nigerian doctors abroad (BBC, 2016). In 2016, the Nigerian President travelled to a London hospital for ear infection which could have been treated at home (Sahara Reporter, 2016). Reports also have it that many politicians in the country also go abroad for minor ailments like malaria on government expenses when there are competent hands that could treat malaria in Nigeria (Ogunyemi, 2016).

Negative Attitude of Health Professionals

The negative attitude of health professionals to patients and medical negligence among health professionals in the country is also alarming. Medical experts believe that adequate healthcare services such as diagnosis, treatment, prevention of disease, injury and other physical and mental impairments are essential but negative attitudes occasioned by socio-economic conditions may determine the quality of healthcare delivery in a society. Today, the impact of the negative attitude to work by health care providers especially in public and private hospitals is particularly worrisome. Years of poor attitudinal problems particularly in the public sector has further endangered lives of patients leaving many in critical conditions (Obinna, 2011). Several cases of death that could have been averted have also been recorded in many hospitals in Nigeria as a result of negative attitude of health workers towards patients (Obinna, 2011; Mekwunye, 2015; Sahara Reporters, 2016). These have made many Nigerians to, rather than seek adequate health care services in public health institutions, opt for alternative medical care and it drives economic development (Nwaebuni, 2016)

2.3.6 Ways to Improve Health Care System and Attract Medical Tourism

Health care system can be improved

Adequate Funding of the System

Its high time Nigerian government sees health care financing as an investment which certainly requires an effective management in form of political commitment for it to be profitable (Olakunde, 2012). Nnamani (2015) has also contended that, for effective service delivery to be realizable in the Nigerian health system, the sector must be adequately funded. Unfortunately, fifteen years after the Abuja Declaration of 15% annual budget on health sector, the Nigerian government is yet to deliver on this promise. Adequate funding is therefore imperative if the Nigerian health care system would be developed and people would be encouraged to utilize them for their health challenges (Nwambu, 2016).

Improved Health Care Facilities and Medical Equipment

Government and other relevant agencies in Nigeria should, as a matter of urgency, address the problem of dilapidated structures and obsolete medical equipments rocking the system if medical tourism must be encouraged in Nigeria. According to Parma (2015), most of the government owned hospitals in the country are ill equipped and in a dilapidated state. These facilities should be fully upgraded to meet the current health challenges of the teeming population. Government hospitals especially tertiary hospitals that attend to specialist cases should be adequately equipped with up-to-date medical facilities so that people can get adequate health services needed for their treatment and therefore discouraged from going abroad for medical treatment.

Better Remuneration and Motivation for Health care Workers

It has been noted that there are gross disparities and distortions in remuneration packages and schemes of service for health workers at different levels in the public sector especially for nurses and midwives (National Human Resources for Health Strategic Plan, 2017). The disparities, according to (NHRHSP, 2017), are more pronounced between staff on federal payrolls and their colleagues in the states and worse in the local government systems. Nigeria health workers salaries and remunerations should be reviewed upwards immediately to reflect what is obtainable in other nations. If Nigerian health workers are paid reasonably compared to what is obtainable in places where they are migrating to, possibilities are that they may not likely migrate. According to John (2016), the call-food in some hospitals is not different from the meal inmates of our prisons are fed with. Housing schemes and car loan schemes should also be established for health workers as an inalienable right, at all levels so that health workers can be motivated and give their humanitarian services to the country rather than serving other Countries. Thank God for Corona Virus that made the federal government grant insurance scheme to the health workers recently.

Addressing the Battle for Supremacy among Health Workers

The Nigerian government should immediately intervene in the ongoing supremacy battle rocking the Nigerian health care system between the Nigerian Medical Association and the Joint Health Sectors' Unions (JOHESU). The system has been literally grounded as a result of inter-professional bickering and struggle for supremacy (Babatunde, 2014). He argued further that, while doctors contend that, by virtue of their years of training and responsibilities, they are naturally heads of the sector, other health workers including nurses, pharmacists/technologists, radiographers, and practically every other non-physicians staff argue otherwise. It is therefore imperative for government to step in and save the system from total collapse through collective bargaining.

Immediate Ban of Government Sponsored Medical Trips Abroad

There has been several calls by various stakeholders in the county on government ban on medical treatment for public officers abroad (Adeyemo, 2012; Ojo, 2015; Agboola, 2016; Ogunyemi, 2016). The Nigerian government should, as a matter of urgency, ban sponsored medical treatment for government officials abroad. According to Amu (2005), Nigeria has highly qualified doctors who can compete favorably with their counterparts abroad. He argued further that when this is done, it will go a long way in improving the health care services in Nigeria. It is therefore high time government officials started patronizing Nigerian hospitals. Leadership should be by example, when government imbibes this attitude, possibilities are that others will follow suit.

Adequate Training for Health care Workers

According to Aina (2011), health care in Nigeria cannot improve beyond health workers capacity to manage well. The need for a trained work force in the system for effective performance cannot be overemphasized (Uneke, Ogbonna, Ezeoha, Ovibo & Ngwu, 2017). Health care providers in the country need to be adequately trained to ensure maximum customer service delivery particularly in government hospitals for maximum productivity. There is need for health care workers to develop positive attitude towards patients. This will equip them with the right attitude to delight and empathize with them rather than frustrating and adding to their ordeal. It is also imperative for health workers to know that their responsibility is not only to their employers but to the beneficiaries and community as well. All our decisions and actions must be guided by ethics and oath of profession which they have all sworn to uphold and defend.

Enforcement of Legal Actions against Medical Negligence

As a result of poor public enlightenment, social sentiments and prejudices, medical negligence and other professional misconducts victims hardly institute actions in court for redress (Ahmed, 2016). Thus, there is dearth of reported cases emanating from Nigerian courts. Government should immediately enact laws that enforce legal actions on health workers that mismanage patients. Medical practitioners should be cautioned since many have sent patients to their untimely graves in the course of their professional duties (Okogie, 2015). When this is enforced, it will discourage lackadaisical attitude of health

Increased and Improved Medical Research

There have been calls from some quarters on the need for government to massively fund health research in Nigeria (Ajasa, 2016; Ifijeh, 2016). According to Ogunyemi, (2016), the only way to improve health care service to save people from diseases that kill millions of people in Africa is through research not by relying on international community and their already made drugs. Therefore government should encourage intensive research into health care by massively investing into various health researches by granting funds to medical

research institutes and other related institutions to embark on research that would improve the wellbeing of the people.

Encouraging Foreign Investors

Nigeria needs to improve her business environment in order to attract foreign investors into the health sector. Although, many of the current business policies in place in Nigeria are business friendly and progressive, there is still problem with implementation of such policies (Aina, 2011). The Nigerian government should ensure that players in the health sector have a conducive working environment to operate. Government should deal with the problem of infrastructural decay especially with power/energy sector to make the country attractive for foreign investments in the health sector so as to meet the growing health demands of the people.

2.4 Nigerian Elites Overseas Medical Treatment

Globally, national health systems are facing enormous pressure brought about by forces of globalization, medical technological advances and consumerism (Economic Times, 2015). Healthcare delivery contexts around the world are rapidly changing; this is due to varying bioethical considerations for some medical procedures and technologies, high healthcare costs, and unequal accessibility to quality healthcare. The underline factors are responsible for health-seeking behavior; which is viewed as the various responses of individuals to states of ill- health, depending on their knowledge and perceptions of health, socioeconomic constraints, and adequacy of available health services and attitude of healthcare providers.

However, the health of the citizenry is very crucial to the nation's economic growth and development. A healthy labour force will make meaningful contribution to the economic growth and development of the nation. Similarly, patronage of nation health care institution equally contributes to economic growth and development of the nation this is because it could serve as medical tourism destination that attracted people from other part of the world.

Subsequently, attract capital inflow, creating employment for the citizen, improving capacity utilization of the medical personnel of the citizen, currency appreciation among others benefits.

On the other hand, overseas medical treatment is likely to cause capital flight, unemployment, under capacity utilization of the medical personnel of the citizen and nation currency depreciation. However, there are several factors responsible for patronage and utilization of health care facilities. Adeneye, (2015) posited that economic factor among other marketing variables responsible for patronage and utilization of health care facilities been home or abroad.

Furthermore, access to healthcare facilities in terms of cost of treatment and healthcare provider attitude and medical personnel competency are determinants of health seeking behavior (Omotoso, 2010). In additions, poor medical

facilities, product quality, price, sex, age and patient delays affect the patronage and utilization of public health services which increase the use of other treatment sources such as community pharmacies, drug peddlers, herbal medicine, and spiritual care organizations among others (Ajayi, 2014).

Nevertheless, in the case of Nigeria where millions of naira are been budgeted for health sector yearly for the development of the health sector in holistic, it is expected that access to healthcare facilities in terms of cost of treatment, world class medical infrastructure and healthcare provider competency and attitude toward patient should reduce Nigerian overseas medical treatment. However, when considered the upward trend of overseas medical treatment in Nigerian particularly, as it relates to the elites it appears that Nigeria budget have no effect on the Nigeria economy. Shockingly, the effect of Nigerian elite' overseas medical treatment on the economy of Nigeria appear not to have overtly bothered the stakeholders and Nigeria government. According to Okogie, (2015) over 5,000 Nigerians travel abroad for medical attention every month, resulting in the loss of N78 billion annually to capital flight.

Moreover, over the years, public office holders in Nigeria in particular political elites have typically resorted to seeking medical treatment abroad. The most recent example came in year 2015 when Nigeria president Muhammadu Buhari spent over 150 days in London receiving treatment for an undisclosed illness. In another instance, four months after commissioning a \$95 million hospital as governor, in September 2015, Godswill Akpabio was flown to London for treatment following a car crash. While Nigerians have protested these trips in the past, the lawmakers were debating a bill to amend the national health act to "regulate international trips for medical treatment by public officers." The bill was to look to specify the amount of public funds spent on public officials seeking foreign medical treatment.

Health-Seeking Behavior

Health-seeking behavior has been defined as a "sequence of remedial actions that individuals undertake to rectify perceived ill-health (Cultures-Cross-Cultural Anthropology, 2004). In the broadest sense, health behavior includes all behaviors associated with establishing and maintaining a healthy physical and mental state, primary prevention.

. According to, Tayo, (2016) Health-seeking behaviors also include behaviors that deals with any digression from the healthy state, such as controlling (Secondary Prevention) and reducing impact and progression of an illness (Tertiary prevention).

The concept of studying health seeking behaviors has evolved with time. Today, it has become a tool for understanding how people engage with the health care systems in their respective socio-cultural, economic and demographic circumstances which is basically influences by emotional and rational patronage motive. When individual patronizes particular

health care service/facilities without applying his mind or without reasoning, he is said to have been influenced by emotional patronage behavior. Emotional behavior play important role in the utilization of health care services. Nigerian elite' overseas medical treatment are likely to be emotional which affect their health seeking behavior. For instances, an individual Nigerian elite patronizes a health care facilities base on recommendation by others, prestige's, personality, affluence, political class, among other emotional factors. However, the effects of Nigerian elite's overseas medical treatment on the economy of Nigeria cannot be over emphasis (Ajasa, 2016).

In the same vein, when individual patronizes a particular health care service/ facilities after careful considerations (after much logical reasoning and careful thinking when engaging) he is said to have been influenced by rational behavior patronage. Rational behavior patronage includes the following: income of an individual, price charged by the facilities, credit facilities offer, services offered efficiency of medical personnel, wide choice treatment, and corruption tendencies among others. The aforementioned factors are likely to have an effect on the Nigerian elite's overseas medical treatment.

Furthermore, various studies have shown that one's decision to engage with a particular medical channel is influenced by a variety of socioeconomic variables, sex, age, social status, type of illness, access to services, perceived quality of the service, health seeking information and personal attitude (Noukarizi & Davarpanah, 2006).

2.5 Empirical Studies

Several empirical studies have shown that overseas medical treatment have effect on health sector in Nigeria and Africa at large for instance, Ogbemudia, (2011) carried a study on effects of medical treatment on health sector in Africa. The objective of the study was to critically discuss the role of medical treatment on the region's healthcare systems. The scope of the study cover 2015-2017, the study used unantitative research method and content analysis was used to the data analysis. The findings contradict to the commonly held belief limiting MT to the elites in society, and show that majority of MT activities in Africa are need-based rather than elite-based. MT affects both personal and population health, and if appropriately integrated into national healthcare systems, can complement and supplement both home and destination systems. Technically, this study did not show the effect of MT on economic growth, unemployment among other macroeconomics variables of the nation studied. More so, it did not focus on the elite's overseas medical treatment as it affects the Nigerian economy.

Ojo, (2014) carried out a study on of medical tourism. The objective of the study is to examine the factors influencing patronage of medical tourism in Lagos state, Nigeria. The scope of the study covers 2012-2016. The studied employed

survey research design and sourced primary data through structured questionnaire. The findings of the study revealed that there three factors influencing patronage of medical tourism in the study area this included service related, economic, and medical facilities.

Adeneye, (2016) carried out a study on impact of medical treatment on economy. The objective of the study was to examine buying motives and their effects on consumers' patronage of conventional drugs and herbal supplements in Rivers state, Nigeria. Research design was adopted for the study; primary data collected from a total of 60 sample size on the field work covered the three senatorial district of Rivers state through the instruments of questionnaire tool. The data was sorted, coded, analysed and interpreted with the aid of the statistical package for social science (SPSS) version 20. The findings of this study revealed that average weighted mean score of 4.8 (75%) respondents' rated agreed that recommendations by others (emotional buying motive) and services offer (rational buying motive) respectively significantly influence consumers patronage of conventional drugs and herbal supplements. This study only centered on buying motive and it is effect on consumer patronage conventional drugs and herbal supplements. However the study did show the effect of consumer overseas patronage on Nigerian economy.

Dada, (2016) carried out a review on medical tourism. The objective of the study is to investigated into the factors affecting the attitude of consumer towards patronage of herbal medicines in Nigeria. Emphasis was on consumer attitude towards herbal medicine in relations to marketing variables. A survey design was employed in the study with a total sample of 400. The finding revealed that all the marketing variables namely; product, price, promotion and place strategy were all statistically significant in affecting attitude of consumer towards herbal medicines. Although, the study did not investigate factors that responsible for overseas elite health seeking medical patronage.

Aturu, (2011) investigated the relationship between emotional response with attitudinal and behavioral aspect of consumer buying behavior in India. The basic objective of the research was to assess the influence of advertising through attitudinal buying behavior. The study adopted descriptive research survey. The findings of the study revealed that many of the respondents agree that adverts change the opinion of the customers about the product, customers are likely to watch more of the adverts which affect their opinion, advertisement will easily convince the customer for the product, and advertisements are the strong means of communication media to convey the intended message to the target group of customers.

Jainz, & Becker, (2014) assessed the health-care-seeking behavior, barriers to accessing care and associated factors among a sample of 543 Lebanese students at Saint- Joseph University. The study employed cross-sectional data using an

anonymous questionnaire. Health-care-seeking behavior was categorized as: formal (professional help sought); informal relational (help sought from friends/family); informal personal (self-help).

The health issues examined were: physical, psychological, social and relational, sexual, drug, alcohol and smoking. The findings of the study revealed that when facing health-related issues, the students tended to seek informal health care. Formal health-care-seeking behavior was almost non-existent for psychological issues (3.3%), relational and social issues (1.8%), and issues related to substance use (5.1%). The barriers to seeking formal health care fell into 2 categories: accessibility and relational.

Omoso, (2010) examines health seeking behaviour among the rural dwellers in Ekiti State, Nigeria. The study employs data from both primary and secondary sources and use Tipping and Senegal’s (1995) model of health seekers behavioral theory as basis of its theoretical underpinning. The findings of the study revealed that the type of ailment; availability of money at the time of illness, age, religious background educational background, severity of sickness, and household position among others determining the health seeking behaviour in the area. However, this study did not show how overseas medical treatment affect Nigerian economy despite the determinant of health seeking behaviors highlighted.

III. RESEARCH METHODOLOGY

This study adopted a survey design. It is exploratory in nature, depending largely on generating data through responses from respondents and interviewees.

IV. DATA PRESENTATION AND ANALYSIS OF FINDINGS

This demographic data was on 200 respondents to whom questionnaire were administered. Demographic data were collected on the following categories: Sex; Age; Marital Status; Level of Education and years of experience on the job. The purpose was to show a general description of the socio-economic characteristics of the respondents that make the sample of the study. The result is presented in table 4.1

Table 4.1 Demographic profile of Respondents

Option	Frequency	% Age
GENDER		
Male	110	55
Female	90	45
Total	200	100
AGE		
18 years 25 below	20	10

19-28 years	50	25
29-39 years	80	40
40 years and above	50	25
Total	200	100.
Educational Qualification		
FSLC/SSCE	40	20
OND/NCE	50	25
HND/B.Sc.	80	40
MBA/MSC	21	10.5
PhD	9	4.5
Total	200	100.0
Years of Experience		
0-5	50	13.2
5-10	70	25.6
Above 10	80	6.4
Total	250	100

Source: Field Survey 2020

Sex of Respondents

Table 4.1 above reveals that 55 % (110) of respondents, are males, while 45% (90) of respondents are females. Though respondents were randomly selected the sample of the study is dominated by male

Age Distribution of Respondents.

The result from the survey as presented in table 4.1 show that, 10% (20) of respondents are between the age of 18 years and below, while 25% (50) are between 19-28years,; and 40% (80) which form majority of the respondents are in the age bracket of 29-39years, while 25%(18) of the rest respondents are between the age range of 40 years and above.

Educational Qualification of Respondents.

From the result in table 4.1, Majority of the respondents 40% (80) are holder of HND/BSc while 25% (50) are holder of ND/NCE as their highest degree, 20% (40) of the respondents had only FSLC and SSCE as their highest educational attainment. However, 10.5% (21) of the respondents are Master degree holder and 4.5% (9) of respondents are PhD holder

Years of Experience

At Table 4.1 show that 25% (50) of respondents, have 0-5years experience; while 35% (70) of respondents have 5-10 years’ experience; 40% (80) of respondents have up to 10years and above experience in their job.

4.2 Analysis of Other Research Questions

Research Question 1: What are the effects of medical tourism on Nigeria’s economic growth?

Table 4.2: Response on the effects of medical tourism on Nigeria's economic growth

S/N	Items	Strongly Agreed (%)	Agreed (%)	Disagreed (%)	Strongly Disagreed (%)	Mean	Remark
1.	The medical tourism sector has witnessed phenomenal growth across the world	111(56%)	40(20%)	20(10%)	30 (15%)	3.16	Significant
2.	Medical tourism growth has brought about high employment worldwide	90(45%)	55(27.5%)	30(15%)	25(10%)	3.05	Significant
3.	There is increasing wealth of nations as a result of medical tourism growth,	80 (40%)	100(50%)	10 (5%)	10(5%)	3.25	Significant
4.	Medical tourism growth has led to improving balance of payments	90 (45%)	85 (49.5%)	15(7.5%)	10(5%)	3.25	Significant
5.	Medical tourism growth is a veritable tool of human development	80 (40%)	99 (50%)	10(5%)	10 (5%)	3.24	Significant

Source: SPSS Result Output

On effects of medical tourism on Nigeria's economic growth, Table 4.2 above, reveals that 111 respondents representing 55% said they 'strongly agreed' and were supported by 40 (20%) respondents who also 'agreed' that medical tourism sector has witnessed phenomenal growth across the world. The mean value of 3.16 is above the cut off of 2.5 and hence one can conclude that Nigerian medical tourism sector has growth in recent time. However 20 respondents, representing 10% disagreed' and were supported by 30 respondents representing 15% who 'strongly disagreed'.

As shown in Table 4.6 above, in the second item, the mean value of 3.05 indicate that medical tourism growth is significant in creating employment in Nigeria. Majority of respondents representing 45% (90) 'strongly agreed' with the claim and were supported 27.5% (55) respondents who 'agreed' that medical tourism growth has brought about high employment worldwide. The above majority opinion was however not shared by 30 respondents, representing 15% who 'strongly disagreed' and were supported by 25 respondents representing 10% who 'disagreed' that medical tourism growth has brought about high employment worldwide.

In Table 4.2 above, the third item shows a mean response of 3.25 which implies that the respondents agreed that medical tourism is significant source of wealth creation to nations. In the survey 80 respondents representing 40% 'agreed with the assertion and were supported by 50% (100) of respondents who strongly agreed' that there is increasing wealth of nations

as a result of medical tourism growth. The above opinion was however not shared by 10 respondents, representing 5% who 'strongly disagreed' and were supported by 10 respondents, representing 5% who 'disagreed' that there is increasing wealth of nations as a result of medical tourism growth.

At item 4 revealed a mean response of 3.25 which indicate significant acceptance of the claim that medical tourism improves balance of payment of countries. In the table above, 85 respondents representing 42.5% strongly agreed' and were supported by 45 (90) of respondents who also 'agreed' that medical tourism growth has led to improving balance of payment. The opinion above was however not shared by 9 respondents, representing 15 (7.5%) who said they 'disagreed' and were supported by 10 respondents representing 5% who 'strongly disagreed', that medical tourism growth has led to improving balance of payments.

The fifth item had a mean response of 3.24 which is above the cut off 2.50 which implies acceptance. The result indicate that 80 respondents representing 40% 'agreed' while 100 (50%) respondents strongly agreed' that medical tourism growth is a veritable tool of human development. The above opinion was however not shared by 10 respondents, representing 5% who 'strongly disagreed' and were supported by 10 respondents, representing 5% who 'disagreed' that medical tourism growth is a veritable tool of human development.

Research Question 3: What is the extent of effects on SMEs in Delta State?

Table 4.4: Effect of medical tourism on SMEs growth in Delta State

S/N	Items	Strongly Agreed (%)	Agreed (%)	Disagreed (%)	Strongly Disagreed (%)	Mean	Remark
1.	Medical tourism leads to high growth of SME	110(55%)	40(20%)	20(10%)	30 (15%)	3.15	Significant
2.	Medical Tourism growth has brought establishment of SME	90 (45%)	55 (27.5%)	30 (15%)	25 (10%)	3.21	Significant
3.	There is increasing establishment of SME as a result of medical tourism in the state	80 (40%)	100 (50%)	10 (5%)	10 (5%)	3.11	Significant
4.	Tourism growth has led to success of SME	85(42.5%)	90(45%)	15 (7.5%)	10(5%)	3.25	Significant
5.	Tourism growth is a veritable tool of business development	80 (40%)	100 (50%)	10 (5%)	10 (5%)	3.01	Significant

Source: Field Survey 2020

From the result in table 4.4 show that medical tourism leads to high growth of SME with mean response of 3.15 which is greater than 2.50 cut off. Item 2 show that medical tourism growth has brought establishment of SME, the mean response of 3.21 is significant. Also there is an increasing establishment of SME as a result of medical tourism in the state with mean response of 3.11. which indicates significant effect. Furthermore, item 4 revealed that tourism growth has led to success of SME as mean response of 3.25 is > 2.50 cut off and is significant. From item 5 we conclude that tourism growth is a veritable tool of business development as the mean response of 3.01 signify acceptance.

4.3 Test of Hypothesis

The hypothesis formulated in chapter one will be tested using the detailed analysis of collected data. As state in chapter three, nonparametric chi-square X^2 statistics will be used

4.3.1 Restatement of hypothesis

Hypothesis One

H_0 : There are no significant and positive effects of medical Tourism on Nigerian economic growth.

H_1 : There is a significant and positive effect of medical Tourism on Nigerian economic growth.

In order to test this hypothesis we use question 2 and 3 of the survey to identify relationships among the data, a chi-square test computation on the effects of medical Tourism on Nigerian economic growth was done.

Table 4.10: Effects of medical Tourism on Nigerian economic growth

NPar Test

Descriptive Statistics					
	N	Mean	Std. Deviation	Minimum	Maximum
X2	200	3.0500	1.05025	1.00	4.00
X3	200	3.2500	.76841	1.00	4.00

Chi-Square Test

Frequencies

Question 2			
	Observed N	Expected N	Residual
1.00	25	50.0	-25.0
2.00	30	50.0	-20.0
3.00	55	50.0	5.0
4.00	90	50.0	40.0
Total	200		

Question 3			
	Observed N	Expected N	Residual
1.00	10	50.0	-40.0
2.00	10	50.0	-40.0
3.00	100	50.0	50.0
4.00	80	50.0	30.0
Total	200		

Test Statistics		
	Question 2	Question 3
Chi-Square	53.000 ^a	132.000 ^a
Df	3	3
Asymp. Sig.	.000	.000
a. 0 cells (0.0%) have expected frequencies less than 5. The minimum expected cell frequency is 50.0.		

Using the decision rule, we reject the null hypothesis, if the calculated X^2 is greater than the tabulated X^2 and accept the alternative.

Since the calculate 53 and 132 > x^2 tabulated= 7.815 at 5% level of significance therefore, we reject the null hypothesis

and accept the alternative (H_1) hypothesis which states that There are significant effects of medical Tourism on Nigerian economic growth. This result is in line with the findings of Ajasa (2016) who report that medical tourism has effect on economic growth in Nigeria

Hypothesis Two

H_0 : There are no significant and positive effects of the extent of medical tourism on SME's in Delta state and Nigeria.

This hypothesis will be tested using question 16 and 17 of research survey

H_1 : There are significant and positive effects on the extent of medical tourism on SME's in Delta state and Nigeria. In order to test this hypothesis and to identify significant effects on the extent of medical tourism on SME's in Delta state and Nigeria.

Table 4.14: effects on the extent of medical tourism on SME's in Delta state and Nigeria.

NPar Test

Descriptive Statistics					
	N	Mean	Std. Deviation	Minimum	Maximum
Qs 16	201	3.1542	1.10955	1.00	4.00
Qs 17	201	3.0498	1.05238	1.00	4.00

Chi-Square Test

Frequencies

Question16			
	Observed N	Expected N	Residual
1.00	30	50.3	-20.3
2.00	20	50.3	-30.3
3.00	40	50.3	-10.3
4.00	111	50.3	60.8
Total	201		

Question 17			
	Observed N	Expected N	Residual
1.00	25	50.3	-25.3
2.00	31	50.3	-19.3
3.00	54	50.3	3.8
4.00	91	50.3	40.8
Total	201		
Test Statistics			
	Question 16	Question 17	
Chi-Square	101.905 ^a	53.388 ^a	
Df	3	3	

Asymp. Sig.	.000	.000
a. 0 cells (0.0%) have expected frequencies less than 5. The minimum expected cell frequency is 50.3.		

Using the decision rule, we reject the null hypothesis, if the calculated X^2 is greater than the tabulated X^2 and accept the alternative.

Since the calculate 101.90 and 53.38 > X^2 tabulated = 7.81 at 5% level of significance (ie 95%) confidence interval therefore, we reject the null hypothesis and accept the alternative (H_1) hypothesis which states that there are significant effects of the extent of medical tourism on SME's in Delta state and Nigeria. This result reflect the finding of Aturu (2011) who on his review medical tourism affirmed that medical tourism help to improve SME,s development in Nigeria.

4.3 Findings of the Study

Data on Table 4.2 answered research question one, the growth, and Socio-economic impact of tourism shown: tourism sector has witnessed phenomenal growth across the world; tourism growth has brought about high employment worldwide, there is increasing wealth of nations as a result of tourism growth, tourism growth has led to improving balance of payments and tourism growth is a veritable tool of human development.

Data on Table 4.3 answered research question two, on the problems of medical tourism in Nigeria and under-development of the health system. Based on the response of the majority of the respondents, the findings are; one of the problems causing medical tourism in Nigeria and under-development of the health system is the problem of brain drain, the problem of underfunding of the health system is an underlying factor causing poor medical tourism among Nigerians, medical tourism in Nigeria and under-development of the health system is as a result of the problem of dilapidated structures and obsolete medical equipment, industrial action being witnessed in the medical system is another major problem causing mass exodus of Nigerians abroad for medical treatment and that the culture of Nigerians preferring anything foreign is also a contributory factor to the mass exodus of Nigerians for medical treatment abroad.

Data on Table 4.4 answered research question three on the ways to improve health care system and reduce medical tourism. Based on the response of the majority of the respondents, the findings are; adequate funding of the system, improved health care facilities and medical equipment, better remuneration and motivation for health care workers, addressing the battle for supremacy

Among health workers, immediate ban of government sponsored medical trips abroad and that it increased and improved medical research

V. CONCLUSION AND RECOMMENDATIONS

This work focuses on effects of medical tourism on Nigerian economic growth. In literature review all related works developed or written by different scholars and authors were systematically reviewed. Also in this work adopted Public Choice Theory.

5.2 Conclusion

The economic relevance of tourism has been the subject of considerable debate. In order to synthesize the conclusions of such disputes into a meaningful outcome, we need to establish the reliability and authenticity of information on tourism and tourism-related consumption expenditures.

The researcher who focused on the effects of medical tourism on Nigerian economic growth: discovered that the tourism sector has witnessed phenomenal growth across the world. The study shown that medical tourism growth is a veritable tool of economic development of which Nigeria as a country lacks.

The Study also concluded that Medical tourism in Nigeria and under-development of the health system is as a result of the problem of dilapidated structures and obsolete medical equipment and that the culture of Nigerians preferring anything foreign is also a contributory factor to the mass exodus of Nigerians for medical treatment abroad.

Based on the response of the majority of the respondents, the findings are; one of the problems causing medical tourism in Nigeria and under-development of the health system is the problem of brain drain, the problem of underfunding of the health system is an underlying factor causing poor medical tourism among Nigerians, medical tourism in Nigeria and under-development of the health system is as a result of the problem of dilapidated structures and obsolete medical equipment, industrial action being witnessed in the medical system is another major problem causing mass exodus of Nigerians abroad for medical treatment and that the culture of Nigerians preferring anything foreign is also a contributory factor to the mass exodus of Nigerians for medical treatment abroad.

The study also stated that adequate funding of the system, improved health care facilities and medical equipment and that immediate ban of government sponsored medical trips abroad as ways to improve health care system and reduce medical tourism

5.3 Recommendation

The study made recommendations on the way forward that is, remedies that could be adopted by government and other relevant agencies to reverse the recent trend of Nigerians travelling abroad for medical treatment. Some of the remedies enumerated in the article to tackling the problem of medical tourism in Nigeria include:

1. Adequate funding, There should be adequate funding, improved health care facilities, better remuneration and motivation for health workers in order to improve health care system and reduce medical tourism.
2. There should be immediate ban of government sponsored medical treatment abroad, adequate training, enforcement of legal action against medical negligence, improved medical research and encouraging foreign investment. This will help to reduce the problems of medical tourism in Nigeria and under-development of the health system.
3. There is the need to develop an encompassing tourism policy if it has to be sustainable, equitable and responsive so as to contribute to Nigeria's economic development and in effect raise the quantity of life of all her people. Government should intensify vigorously the marketing and promotion of Nigeria cultural, historical and archaeological treasures. It is strongly believed that if the aforementioned remedies are fully adapted, the lost glory of the country's health care system would be restored and the country's health care system would be developed and able to attract foreign investors, thereby adding great value to the country. There is the need to develop an encompassing tourism policy if it has to be sustainable, equitable and responsive so as to contribute to Nigeria's economic development and in effect raise the quantity of life of all her people. Government should intensify vigorously the marketing and promotion of Nigeria cultural, historical and archaeological treasures.

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