

Perceptions of the Labor Market, Professional Fears, and Migration Intentions Among Final-Year Medical Students: A Cross-Sectional Study

Percepciones sobre el mercado laboral, temores profesionales e intenciones de migración en estudiantes de Medicina del último año: un estudio transversal

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ABSTRACT

Introduction: this study analyzes the perceptions, fears, and migration intentions of final-year medical students in Argentine universities.

Method: this is a cross-sectional, descriptive, and quantitative study conducted through a self-administered questionnaire applied to a sample of 28 participants. The instrument evaluated perceptions regarding professional preparedness, job expectations, economic factors, emotional well-being, and plans for residency or migration.

Results: the findings reveal a marked trend toward perceived job insecurity, economic concern, and moderate migration intention, along with a sense of insufficient clinical preparedness for medical practice. The main fears identified include burnout, economic instability, and difficulty in accessing the desired residency.

Conclusions: the current labor and educational landscape generates uncertainty and emotional vulnerability among future physicians, highlighting the need to strengthen practical training, promote well-being and career guidance policies, and design strategies that foster a more humane and sustainable job integration.

Keywords: Medical Students; Labor Market; Migration; Medical Education; Burnout.

RESUMEN

Introducción: el presente estudio analiza las percepciones, temores e intenciones de migración de los estudiantes de Medicina del último año en universidades argentinas.

Método: se trata de un estudio transversal, descriptivo y cuantitativo, realizado mediante un cuestionario autoadministrado aplicado a una muestra de 28 participantes. El instrumento evaluó percepciones sobre la preparación profesional, expectativas laborales, factores económicos, bienestar emocional y proyectos de residencia o migración.

Resultados: muestran una tendencia marcada hacia la inseguridad laboral percibida, la preocupación económica y la intención migratoria moderada, además de una sensación de preparación clínica insuficiente para el ejercicio médico. Entre los principales temores destacan el burnout, la inestabilidad económica y la dificultad para acceder a la residencia deseada.

Conclusiones: el escenario laboral y formativo actual genera incertidumbre y vulnerabilidad emocional en los futuros médicos, lo cual pone de relieve la necesidad de fortalecer la formación práctica, promover políticas de bienestar y orientación profesional, y diseñar estrategias que favorezcan una inserción laboral más humana y sostenible.

Palabras clave: Estudiantes de Medicina; Mercado Laboral; Migración; Formación Médica; Burnout.

INTRODUCTION

Entering the labor market is among the most challenging moments for recent medical graduates. As Mutti et al.⁽¹⁾ note, young professionals face multiple career uncertainties linked to market saturation, economic instability, and unequal conditions for entering the workforce in Argentina. These difficulties align with findings from previous studies on student perceptions and employment expectations in the country, which highlight concerns about low starting salaries and the need to hold multiple jobs to achieve adequate compensation. In addition to these factors are concerns about workplace safety, the state of hospital infrastructure, and national socioeconomic uncertainty—elements that strongly influence the professional expectations and quality of life of future physicians. An important source of anxiety is the perception of readiness to begin clinical practice. Many students believe that theoretical and practical training is not always sufficient to meet the real demands of professional practice, particularly regarding clinical decision-making and autonomy in patient care.

Similarly, Lipovsky et al.⁽²⁾ highlight that postpandemic changes have deepened this sense of inadequate training because of the reduction in in-person clinical rotations and the widening gap between theory and practice. This self-perception directly influences the confidence with which students envision their entry into the workforce and can intensify the fears inherent in the transition period. These perceptions and fears not only shape the choice of specialty or workplace but can also drive migration decisions. The World Health Organization⁽³⁾ warns that the migration of health personnel is a growing global phenomenon, particularly in contexts marked by economic instability or unfavorable working conditions.

In Argentina, this phenomenon has historically been linked to economic, political, and social crises, which have triggered various waves of brain drain.^(1,3) Although the current situation has its own unique characteristics, economic instability continues to affect perceptions of job opportunities, and the debate on retaining healthcare personnel alive continues. Given this landscape, it is essential.^(4,5)

To understand how final-year medical students perceive the job market, how prepared they feel to begin their professional practice, what their main concerns are, and what their intentions are regarding their future workplace.^(6,7,8) As various authors have noted, analyzing these perceptions helps guide institutional strategies that support the transition to professional practice and contributes to strengthening practical training and the retention of healthcare talent.⁽⁹⁾ This study aims to provide evidence in this regard by analyzing these variables in a cohort of final-year students at the Inter-American Open University (UAI).^(10,11)

METHOD

Study Design

This was an observational, cross-sectional study with a quantitative approach. Population and Sample: The study population consisted of senior medical students at the Inter-American Open University (UAI). Participation was voluntary, and all students who agreed to complete the questionnaire during the data collection period were included. Incomplete forms were excluded.

Data collection instrument

A self-administered questionnaire was designed and distributed digitally via Google Forms. The instrument consisted of six sections:

1. Sociodemographic profile,
2. Professional preparation,
3. Perception of the labor market,
4. Professional concerns,
5. Medical residency and specialty training,
6. Intent to migrate (including timeframe and reasons).

Data collection procedure: the survey was available in digital format for a short period and was disseminated through institutional channels and student communication networks. Participation was anonymous, and each student provided informed consent before responding.

Statistical analysis

A descriptive analysis of the variables was conducted, reporting frequencies and percentages for categorical variables and means with standard deviations for continuous variables. Associations between perceptions, preparedness, fears, and migration intention were explored using chi-square tests for categorical variables and Student's *t* tests or the Mann–Whitney *U* test, depending on the data distribution. A *p* value < 0,05 was considered to indicate statistical significance. The analysis was performed using free statistical software (e.g., PSPP or Jamovi).

Ethical considerations

The study was conducted in accordance with the ethical principles of the Declaration of Helsinki and Resolution 1480/2011 of the Ministry of Health of Argentina, which regulates research involving human subjects in Argentina. Data confidentiality was guaranteed in compliance with National Law 25,326 on the Protection of Personal Data. Participation was entirely voluntary, and the data were analyzed in aggregate form, ensuring the anonymity of the respondents.

RESULTS

Sociodemographic Profile

A total of 28 final-year medical students from Argentine universities participated in the survey. In terms of age, 42,9 % were between 24 and 29 years old, 35,7 % were between 30 and 35 years old, 21,4 % were under 24, and no participants were over 35 years old. In terms of sex, the majority of the participants were female (71,4 %), while 28,6 % were male. With respect to nationality, the largest group consisted of Brazilian students (71,4 %), followed by Argentines (17,9 %), and to a lesser extent, Colombians, Venezuelans, and Chileans (3,6 % each), as shown in figure 1.

Sexo:	%
Femenino	71,4%
Masculino	28,6%
Edad:	%
24-29	42,9%
30-35	35,7%
>35	21,4%
Nacionalidad	%
Brasileños	71,4%
Argentinos	17,9%
Colombianos	3,6%
Venezolanos	3,6%
Chilenos	3,6%

Figure 1. Sociodemographic Profile

Professional Preparation

Grafico 1 - Me siento preparado/a para iniciar la práctica médica al egresar.



Figure 2. Professional Preparation

In figure 2, in response to the statement “I feel prepared to begin medical practice upon graduation,” 46,4 % stated that they partially disagreed, 28,6 % partially agreed, and only 7,1 % expressed full agreement with the statement. In terms of perceptions of the clinical training received, 21,4 % strongly disagreed that it was sufficient to make confident decisions, 21,4 % somewhat disagreed, while 25 % somewhat agreed and 28,6 % were neutral.

Perception of the Labor Market

In response to the question “I believe the job market for doctors in Argentina is saturated,” as shown in figure 3, 39,3 % were neutral, 32,1 % partially disagreed, and the remaining 28,6 % expressed varying degrees of agreement. Regarding the statement “I consider the starting salary for a doctor in Argentina sufficient to lead a decent life,” half of the respondents (50 %) strongly disagreed, while 28,6 % somewhat disagreed, reflecting a general sense of economic dissatisfaction. Seventy-five percent of the students believed that to reach their expected income, they would likely need to hold more than one job or work on-call shifts, and 50 % stated that the country’s economic instability negatively influences their decision regarding where to work.

Grafico 2 - Creo que el mercado laboral para médicos en Argentina está saturado.

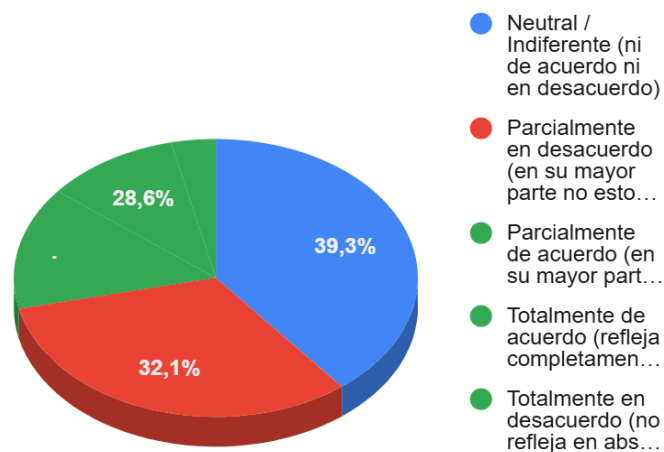


Figure 3. Perception of the Labor Market

Professional Concerns

As shown in figure 4, 42,9 % of the participants strongly agreed with the statement “I am concerned that I will not be able to secure a position in my desired residency program,” whereas 32,1 % partially agreed.

Grafico 3 - Me preocupa no lograr ingresar a la residencia deseada.

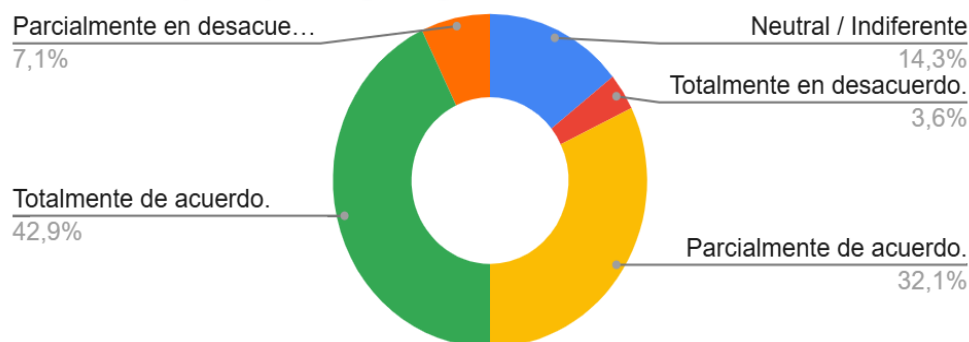


Figure 4. Professional Concerns

Grafico 4

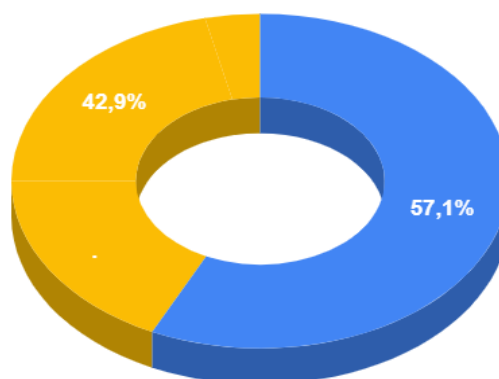


Figure 5. First years of practice

As shown in figure 5, 57,1 % expressed concern about physical or emotional ideation during their first years of practice, and 42,9 % strongly agreed that they were concerned about not being able to support themselves financially through medicine alone.

Medical residency and specialization

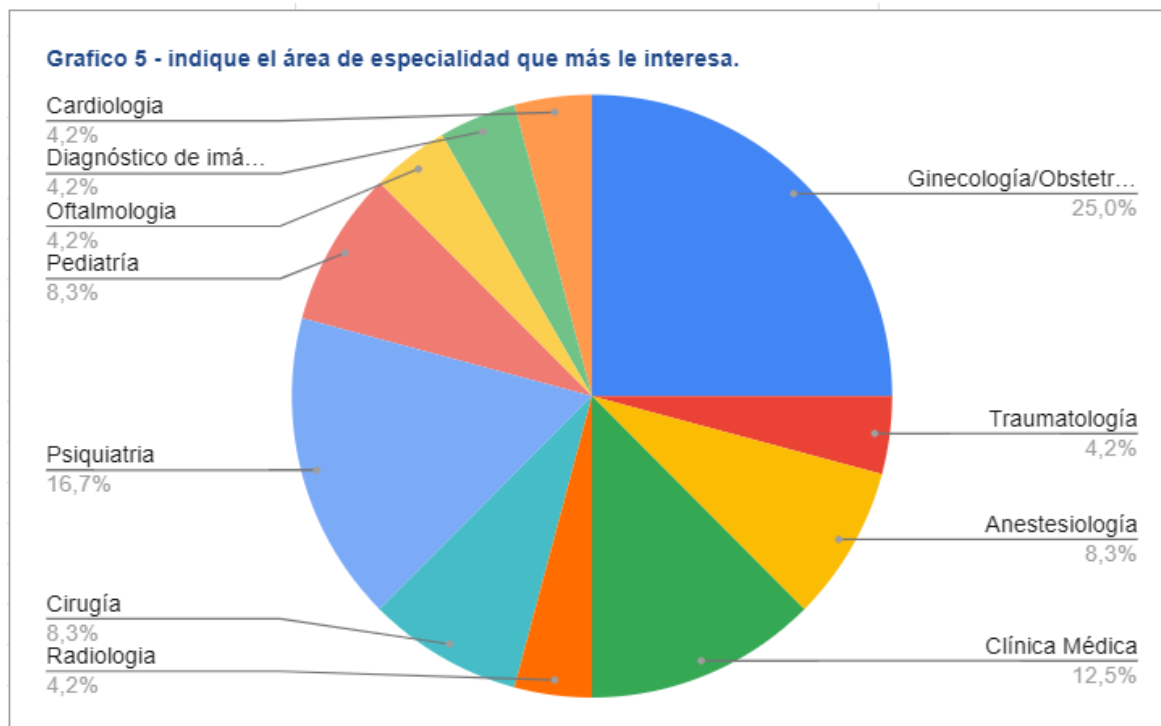


Figure 6. Medical residency and specialization

The vast majority (96,4 %) expressed their intention to pursue medical residency after completing their degree. According to figure 6, among the specialties of greatest interest were obstetrics and gynecology (25 %), psychiatry (16,7 %), and internal medicine (12,5 %), followed by surgery (8,3 %), anesthesiology (8,3 %), and other specialties with lower representation.

In figure 7, with respect to where they wanted to complete their residency, 50 % chose Argentina, 39,3 % indicated a preference for their country of origin, 3,6 % expressed interest in Spain, and the rest had not made a final decision.

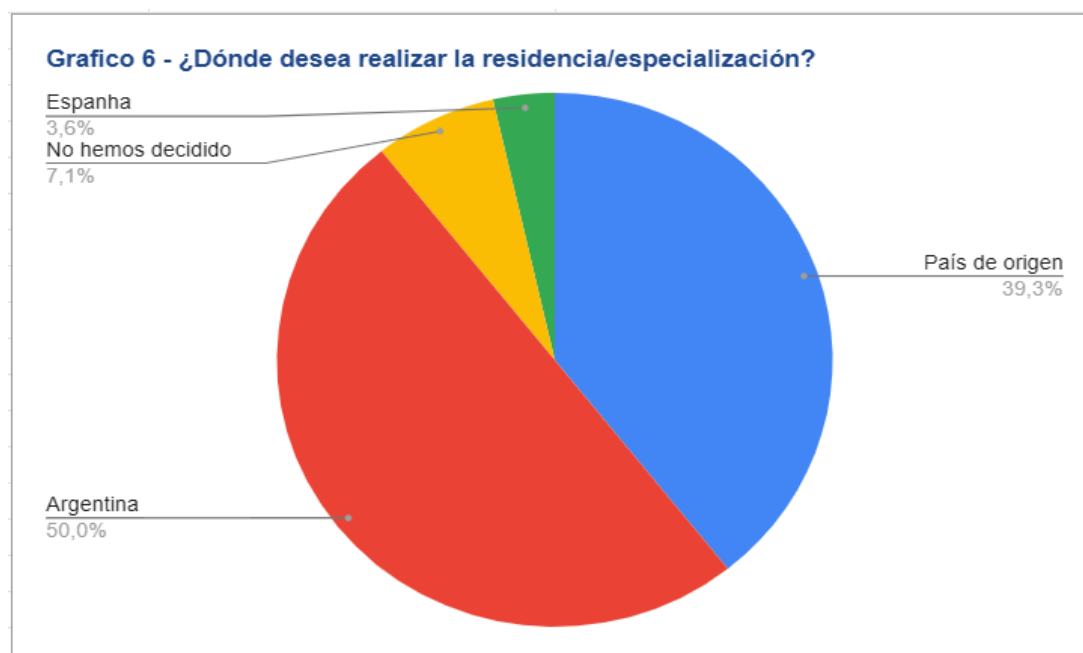


Figure 7. Wanted to complete their residency

Intention to Migrate

When asked, "Do you plan to migrate to another country?", 35,7 % answered yes, 21,4 % answered no, and 42,9 % did not know yet. According to Figure 7, among those planning to migrate, 42,9 % said they would do so within 1 to 3 years, 21,4 % within 1 year, 21,4 % within 3 to 5 years, and 14,3 % in more than 5 years.

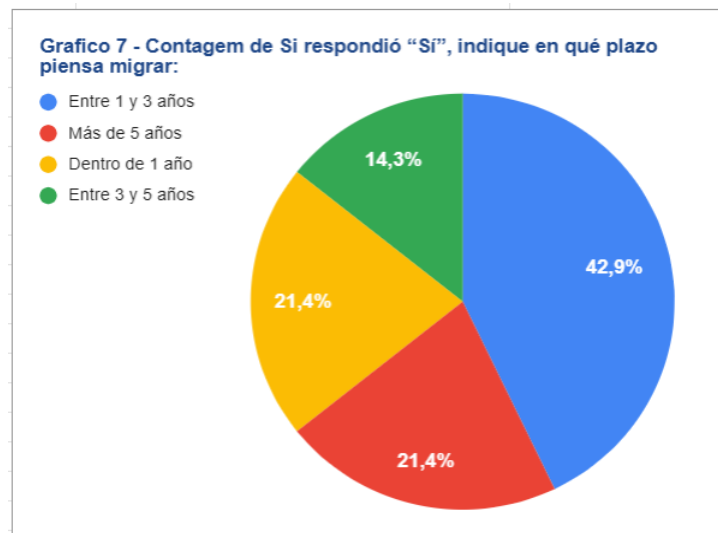


Figure 8. Intention to Migrate

In figure 9, when asked about their primary intention to complete their degree, 57,1 % expressed a desire to remain in Argentina, 39,3 % to return to their country of origin, and 3,6 % to emigrate to a third country.

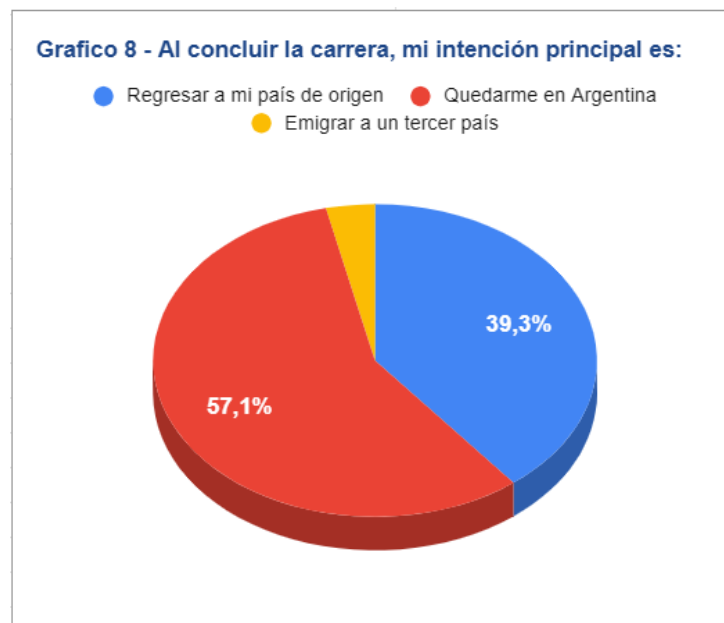


Figure 9. Primary intention

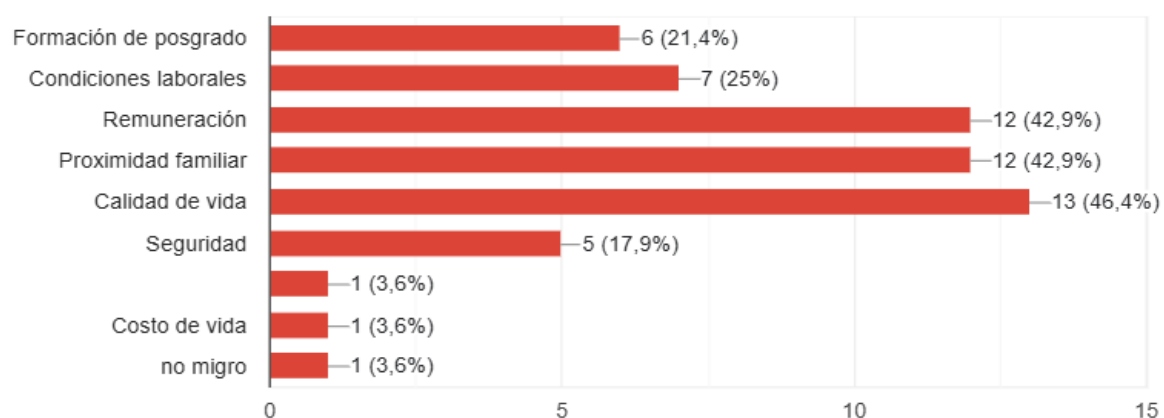


Figure 10. Multiple responses allowed

Among the reasons for migrating (multiple responses allowed), the most frequently cited factors were quality of life (46,4 %), compensation (42,9 %), proximity to family (42,9 %), working conditions (25 %), and graduate education (21,4 %). Among those who specified a primary reason, the most frequent reasons were education, remuneration, and family reunification, as shown in figure 10.

DISCUSSION

The results of this study provide an in-depth understanding of the perceptions, fears, and expectations of final-year medical students at Argentine universities regarding their professional future.^(12,13) In general, there is a trend toward perceived job insecurity, financial concerns, and moderate migration intentions—phenomena that reflect the current context of medical education in the country, as described by Mutti *et al.*⁽¹⁾ in their analysis of the career prospects of young Argentine physicians.^(14,15,16) Students express a sense of uncertainty linked to the precariousness of the job market, difficulties in immediate professional integration, and the perception that university training does not always guarantee the clinical autonomy expected upon graduation. In this study, nearly half of the respondents partially disagreed with feeling prepared to practice, highlighting a gap between theory and professional practice.^(17,18,19) These findings align with the observations of a study, who highlight that many students do not feel that they have acquired sufficient clinical confidence during their training, and with the findings of Lipovesky *et al.*⁽²⁾, who attribute this lack of autonomy, in part, to postpandemic changes and the reduction in in-person clinical rotations.^(20,21,22,23) Similarly, the negative assessment of starting pay and the need for multiple jobs reflects a fragmented healthcare model in which economic conditions and work overload directly influence professional decisions. This situation aligns with the findings reported by Mutti *et al.*⁽¹⁾ and the National Ministry of Health⁽⁴⁾, who describe the persistence of insufficient income and unstable working conditions at the start of a medical career.^(24,25,26)

These factors, combined with economic instability, explain why many students plan to pursue their careers abroad as part of a growing trend toward medical migration. The World Health Organization⁽³⁾ warns that this phenomenon is global and intensifies in the context of economic or labor crises.^(27,28,29) The high percentage of concern regarding burnout and the possibility of not securing the desired residency position indicate a pattern of anticipatory stress, which is characteristic of the transition period between academic training and clinical practice. These concerns align with the findings, who note that students face high levels of emotional pressure in the final stage of their degree program, and with the observations of Lipovesky *et al.*⁽²⁾ regarding the educational overload of the postpandemic period. This highlights the need to strengthen emotional well-being and vocational support programs within training institutions. More broadly, the findings reveal a tension between the vocational ideal of service—still very much present in students' discourse—and the structural conditions of contemporary medical practice, which is increasingly influenced by economic dynamics, clinical overload, and a loss of autonomy.^(30,31,32) This contrast is also noted by Mutti *et al.*⁽¹⁾, who describe how current work demands can lead to demotivation and encourage plans to migrate. Among the study's limitations are the small sample size and the predominance of international students, which may limit the generalizability of the results. Furthermore, as this is a cross-sectional study based on self-perception, the data reflect opinions rather than observable behaviors. Similar limitations have been noted in previous studies on student perceptions. However, the findings offer valuable and exploratory insight into professional expectations and migration intentions within a multicultural university setting.^(33,34,35) Moving forward, it would be necessary to expand the research to other universities and cohorts, incorporating mixed-methods approaches that allow for an in-depth analysis of the psychological, socioeconomic, and cultural factors influencing the career decisions of future physicians. Likewise, educational institutions should consider these results when designing strategies to career support and guidance, promoting more equitable, humane, and sustainable labor market integration, as suggested by Lipovesky *et al.*⁽²⁾ and reports from the Ministry of Health⁽⁴⁾. In summary, this study provides an updated perspective on a growing phenomenon: career insecurity and the potential mobility of new physicians in Argentina. Understanding its causes is essential for anticipating human resource shortages in healthcare, strengthening practical training, and promoting work environments that ensure well-being and long-term professional development, in accordance with the recommendations of the WHO⁽³⁾ and recent national reports.^(36,37)

CONCLUSIONS

This study identified the perceptions, expectations, and concerns of final-year medical students at Argentine University regarding their professional future. The results reveal a complex situation characterized by job uncertainty, economic insecurity, and a moderate intention to migrate, accompanied by a perception that their clinical training is insufficient upon graduation. These findings reflect a gap between academic training and the real-world conditions of medical practice, in a context marked by work overload, instability in the healthcare system, and the need to hold multiple jobs to achieve adequate compensation. Moreover, they highlight the emotional impact this transition has on future physicians, expressed through fear of burnout and concern about not securing their desired residency. This study also examines the tensions surrounding the construction of medical identity within the current university environment. It is concluded that understanding the perceptions of future physicians is essential for developing institutional strategies that strengthen practical training, promote emotional well-being, and encourage the retention of professional talent within the country. Similarly, it is necessary to continue researching this phenomenon across different regions and cohorts, integrating interdisciplinary perspectives that delve into the personal, social, and economic factors influencing professional decision-making. Ultimately, this study contributes to the recognition that medical vocation, although it persists as a core value, faces new challenges today. Supporting students—both in terms of structural change and emotional well-being—during this transition process, through policies that provide support, guidance, and recognition, is a key factor in ensuring a more humane, stable, and sustainable transition into the workforce.

BIBLIOGRAPHIC REFERENCES

1. Mutti J, González V, Arévalo P, Domínguez M. Futuro laboral de los estudiantes de Medicina, residentes y concurrentes de la Argentina. *Revista Argentina de Educación Médica*. 2024;18(2):45-57.
2. Lipovesky G, Fernández S, Ortiz L. Transformaciones en la formación médica y desafíos de inserción profesional en el contexto pospandemia. *Revista Científica de la Universidad Abierta Interamericana*. 2022;14(3):60-72.
3. Organización Mundial de la Salud (OMS). Informe sobre la movilidad y migración del personal de salud. Ginebra: OMS; 2023. <https://www.who.int/es/health-topics/health-workforce>
4. Ministerio de Salud de la Nación Argentina. Informe sobre la situación del recurso humano en salud en la Argentina. Buenos Aires: Dirección Nacional de Talento Humano y Conocimiento; 2022. <https://www.argentina.gob.ar/salud>
5. Leardi MR, Cabrera F, Morales N, Díaz R. Factores motivacionales y percepciones sobre la formación médica en universidades argentinas. *Revista de Investigación y Desarrollo Universitario*. 2023;9(1):22-35.
6. Antonipillai V, Guindon GE, Sweetman A, Baumann A, Wahoush O, Schwartz L. Associations of health services utilization by prescription drug coverage and immigration category in Ontario, Canada. *Health Policy* 2021;125:1311–21. <https://doi.org/10.1016/j.healthpol.2021.06.007>.
7. Arnold EA, Fuller SM, Martinez O, Lechuga J, Steward WT. Documenting best practices for maintaining access to HIV prevention, care and treatment in an era of shifting immigration policy and discourse. *PLoS ONE* 2020;15. <https://doi.org/10.1371/journal.pone.0229291>.
8. Asmussen FB, Hjorth CF, Plana-Ripoll O, Mailhac A, Cronin-Fenton D. Socioeconomic position, psychiatric medical treatment and risk of breast cancer recurrence and mortality: A Danish population-based cohort study. *Cancer Epidemiology* 2025;94. <https://doi.org/10.1016/j.canep.2024.102733>.
9. Bojorquez I, Cabieses B, Arósquipa C, Arroyo J, Novella AC, Knipper M, et al. Migration and health in Latin America during the COVID-19 pandemic and beyond. *The Lancet* 2021;397:1243–5. [https://doi.org/10.1016/S0140-6736\(21\)00629-2](https://doi.org/10.1016/S0140-6736(21)00629-2).
10. Bramstedt KA. Antibodies as Currency: COVID-19's Golden Passport. *Journal of Bioethical Inquiry* 2020;17:687–9. <https://doi.org/10.1007/s11673-020-09996-5>.
11. Cervantes L, Martin M, Frank MG, Farfan JF, Kearns M, Rubio LA, et al. Experiences of Latinx Individuals Hospitalized for COVID-19: A Qualitative Study. *JAMA Network Open* 2021;4. <https://doi.org/10.1001/jamanetworkopen.2021.0684>.
12. Del Real D, Crowhurst-Pons F, Olave L. The Work, Economic, and Remittance Stress and Distress of the COVID-19 Pandemic Containment Policies: The Case of Venezuelan Migrants in Argentina and Chile. *International Journal of Environmental Research and Public Health* 2023;20. <https://doi.org/10.3390/ijerph20043569>.
13. Gémes K, Taipale H, Björkenstam E, Rahman S, Gustafsson K, Tanskanen A, et al. The role of sociodemographic and clinical factors in the initiation and discontinuation of attention deficit hyperactivity disorder medication among young adults in Sweden. *Frontiers in Psychiatry* 2023;14. <https://doi.org/10.3389/fpsyt.2023.1152286>.
14. Girón VMC, Ramírez SA. Voluntary Immobility in Tecolotlán, Jalisco: An Analysis in a High-Migration Context. *Norteamérica* 2025;20:1–25. <https://doi.org/10.22201/cisan.24487228e.2025.2.703>.
15. Haro-Ramos AY, Rodriguez HP. Immigration Policy Vulnerability Linked to Adverse Mental Health Among Latino Day Laborers. *Journal of Immigrant and Minority Health* 2022;24:842–52. <https://doi.org/10.1007/s10903-021-01254-z>.
16. Haruna JJ, Abdullahi H, Hamina D, Teryila KR, Ali M, Muna S, et al. The Unintended Consequences of Coercive Migration Policies on Nigerian Nurses: A Qualitative Study. *Africa Journal of Nursing and Midwifery* 2025;27. <https://doi.org/10.25159/2520-5293/19639>.
17. Hernandez MA, Alarcon C, Berrospi ML, Lopera D, Quintero D, Reyes B, et al. Cultural and economic barriers and opportunities for the participation of women in agricultural production systems: a case study in Guatemala. *Frontiers in Sustainable Food Systems* 2023;7. <https://doi.org/10.3389/fsufs.2023.1185756>.
18. Hoare T, Vidgen A, Roberts NP. How do people seeking asylum in the United Kingdom conceptualize and cope with the asylum journey? *Medicine, Conflict and Survival* 2020;36:333–58. <https://doi.org/10.1080/13623699.2020.1849960>.

19. Hof H. Opting out for Getting in: Existential Mobility in European Graduates' Migration to Asia. *Journal of Immigrant and Refugee Studies* 2020;18:286–99. <https://doi.org/10.1080/15562948.2020.1755761>.
20. Ismail F, Coetzee C. South African Chiropractic Students' Intentions, Motivations, and Considerations for Emigration: A Cross-Sectional Study. *Journal of Chiropractic Humanities* 2024;31:8–19. <https://doi.org/10.1016/j.echu.2024.04.001>.
21. Jain R, Wong CS, Tan RKJ. Fear really comes from the unknowns: exploring the impact of HIV stigma and discrimination on quality of life for people living with HIV in Singapore through the minority stress model. *Sexual Health* 2024;21. <https://doi.org/10.1071/SH23204>.
23. Jun H, Grabowski DC. Mental health in nursing homes: The role of immigration in the long-term care workforce. *Social Science and Medicine* 2024;351. <https://doi.org/10.1016/j.socscimed.2024.116978>.
24. Kadaifci C, Topcu YI, Mu E. An Analytic Hierarchy Process Contingency Analysis of Factors Affecting the Emigration Decision of Medical Doctors in Turkey. *European Journal of Investigation in Health, Psychology and Education* 2024;14:623–47. <https://doi.org/10.3390/ejihpe14030041>.
25. Komornicki T, Szejgiec-Kolenda B, Czapiewski K. Poland as an emigration and an immigration country—dynamics of change from the local and individual perspective. *Journal of Contemporary European Studies* 2025;33:179–97. <https://doi.org/10.1080/14782804.2024.2363868>.
26. Latham HA, Maclaren AS, De Kock JH, Locock L, Murchie P, Skea Z. Exploring rural Scottish GPs' migration decisions: a secondary qualitative analysis considering burnout. *British Journal of General Practice* 2025;75:e187–94. <https://doi.org/10.3399/BJGP.2024.0494>.
27. Marques P, Nunes M, Antunes MDL, Heleno B, Dias S. Factors associated with cervical cancer screening participation among migrant women in Europe: A scoping review. *International Journal for Equity in Health* 2020;19. <https://doi.org/10.1186/s12939-020-01275-4>.
28. Matthews C, Beecham GB, Khan M, Judge G, Afrasinei M, McCormack M, et al. Exploring experiences of less-than-full-time postgraduate medical training in Ireland and options for future improvement: A qualitative study. *BMJ Open* 2025;15. <https://doi.org/10.1136/bmjopen-2024-093744>.
29. Nakamura N, Suzuki A. COVID-19 and the intentions to migrate from developing countries: Evidence from online search activities in Southeast Asia. *Journal of Asian Economics* 2021;76. <https://doi.org/10.1016/j.asieco.2021.101348>.
30. Parr J. LABOURING CHILDREN: British Immigrant Apprentices to Canada, 1869–1924. 2022. <https://doi.org/10.4324/9781003334057>.
31. Reegård K, Dębowski H. Exit, voice or loyalty? VET Stakeholders' response to large scale skilled emigration from Poland. *International Journal for Research in Vocational Education and Training* 2020;7:325–43. <https://doi.org/10.13152/ijrvet.7.3.4>.
32. Ringbom I, Suvisaari J, Kääriälä A, Sourander A, Gissler M, Ristikari T, et al. Psychiatric disorders diagnosed in adolescence and subsequent long-term exclusion from education, employment or training: Longitudinal national birth cohort study. *British Journal of Psychiatry* 2022;220:148–53. <https://doi.org/10.1192/bjp.2021.146>.
33. Rodriguez-Arrastia M, Roperio-Padilla C, Fernández-Sola C, Portillo MC. Nursing emigration in the United Kingdom: A qualitative exploration of the Spanish nursing community. *Nursing Open* 2021;8:675–87. <https://doi.org/10.1002/nop2.672>.
34. Roesch C. Owen and the Engineers: Cross-Fertilization between Engineering and Early Socialism in the Owenite Tradition. *Global Intellectual History* 2025;10:595–610. <https://doi.org/10.1080/23801883.2023.2258455>.
35. Urdarević B. Implications of labour migration on the European labour market – labour law aspects. *Stanovništvo* 2023;61:91–106. <https://doi.org/10.2298/STNV2301091U>.
36. Valdez CR, Brabeck KM, Barajas-Gonzalez RG, Ayón C, Rojas-Flores L. Sociopolitically and Trauma-Informed Public Health Practice With Latinx Families: Conceptual Framework and Best Practices. *American Journal of Public Health* 2024;114:S485–94. <https://doi.org/10.2105/AJPH.2024.307589>.
37. Vladimirovich KM. Russian émigré scientists and Charles University: the ways and models of integration in the 1920-1930. *Dialog so Vremenem* 2024;122–38. <https://doi.org/10.21267/AQUILO.2024.89.89.009>.