Negligence of medical personnel in Nigeria A human right discuss

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ABSTRACT:

Negligence by medical personnel in Nigeria can be seen as a human rights issue, as it violates patients' right to life and health. Such negligence can lead to preventable deaths, suffering, and a loss of dignity, contravening the country's obligation to uphold adequate healthcare standards. This study examined the issue of medical negligence by healthcare personnel in Nigeria, framed within the context of human rights. It explores the definition and various forms of medical negligence, alongside the legal provisions governing healthcare practices in the country. It outlines the framework and human rights implications, emphasizing patients' rights to life and health. Key causes of negligence include inadequate training, poor infrastructure, and lack of accountability. Notable case studies illustrate the impact on victims and public reactions. Challenges such as legal barriers and cultural attitudes complicate redress efforts. The study concludes with recommendations aimed at enhancing medical training, strengthening regulatory frameworks, and improving healthcare infrastructure to uphold human rights in Nigerian healthcare.

Keywords: Negligence, medical personnel, human right, healthcare, legal frameworks

INTRODUCTION:

Medical negligence remains a pressing issue within the healthcare system in Nigeria, raising significant ethical, legal, and human rights concerns. The concept refers to a breach of duty by medical personnel that results in harm to patients, a situation that undermines the fundamental right to health (Ogueji et al, 2024). Understanding the implications of medical negligence is crucial, not only for individual patients but also for the broader healthcare system in Nigeria, where the challenges of inadequate resources, training, and regulatory oversight complicate the delivery of safe medical care.

Medical negligence is often defined within the context of the legal obligations of healthcare providers. In Nigeria, it is guided by the principles of tort law, where the standard of care expected from medical professionals is based on what a reasonably competent practitioner would provide under similar circumstances (Adegboyega, 2023). A significant number of cases highlight that negligence can occur due to various factors, including misdiagnosis, surgical errors, and inadequate patient monitoring. Moreover, systemic issues, such as overcrowded facilities and a shortage of trained personnel, exacerbate the likelihood of negligent acts (Ossei et al, 2021).

In a country where healthcare access is already strained, the implications of medical negligence are particularly severe. Patients may suffer prolonged illness, disability, or even death due to errors that could have been prevented (Imam, 2024). The Nigerian legal framework, while providing some recourse for victims, is often criticized for its inadequacies. Many victims face barriers in seeking justice, such as the high costs of litigation and the need to navigate a complex legal system. Despite the increasing awareness of patients' rights and the need for accountability in medical practice, negligence remains pervasive, resulting in avoidable harm and fatalities. According to a study by Dahlawi et al, (2021), a good number of healthcare professionals reported encountering cases of medical negligence in their practice. This alarming statistic highlights the urgent need for a comprehensive examination of the underlying factors contributing to this problem.

The gaps in the current healthcare framework exacerbate the issue. A significant barrier to addressing medical negligence is the lack of a robust legal system that effectively protects patients and holds medical personnel accountable. A survey conducted by Aluh, et al, (2022) indicated that patients who experienced medical negligence did not pursue legal action due to fears of retaliation, high legal costs, and a lack of understanding of their rights. This culture of silence not only leaves victims without recourse but also perpetuates a cycle of negligence, as healthcare professionals may not learn from past errors.

Moreover, inadequate training and supervision of medical personnel contribute to the problem. Adegboyega (2018) reported that Nigeria has one of the highest rates of medical errors in West Africa, attributed largely to insufficient continuing education and a lack of mentorship for junior medical staff. With many medical professionals in Nigeria reportedly lacking access to regular training programs, the knowledge gap continues to widen, further endangering patient safety (Khalid-Mohamed et al, 2024). The implications of medical negligence extend beyond individual cases; they have broader societal consequences. The right to health is enshrined in various international treaties and national legislation, yet ongoing incidents of negligence signify a failure to uphold these rights. Given these pressing issues, this study is critical for several reasons. First, it aims to identify and analyze the systemic factors contributing to medical negligence in Nigeria, providing insights that can inform policy reforms. Understanding these gaps can lead to actionable recommendations that improve training, accountability, and legal protections for patients. Second, this research will contribute to the broader discourse on human rights in healthcare, advocating for a paradigm shift that prioritizes patient safety and well-being.

Understanding Medical Negligence:

Medical negligence is a crucial issue in healthcare that involves the failure of medical personnel to provide the standard of care expected, resulting in harm to patients. In Nigeria, as in many countries, understanding the nuances of medical negligence is essential for promoting patient safety, protecting human rights, and ensuring accountability within the healthcare system. Medical negligence can be defined as the failure of a healthcare provider to exercise the degree of skill and care that a reasonably competent provider would have exercised under similar circumstances (Donald, 2014). Key concepts in this context include "duty of care," which refers to the obligation of healthcare professionals to provide care to patients, and "breach of duty," which occurs when that standard of care is not met. Furthermore, for a claim of medical negligence to be valid, it must be established that the breach directly resulted in harm or injury to the patient, also known as "causation" (Adejumo & Adejumo, 2020).

In Nigeria, Oluokun (2024) observed that medical negligence is a pressing issue, with 61.69% of patients perceiving practitioners as arrogant and careless. Alarmingly, 33.3% have suffered additional injuries from treatments. Despite this, lawsuits remain rare, attributed to cultural attitudes, poverty, illiteracy, limited options, and ignorance of legal rights. Raising awareness about patients' rights to seek redress is crucial. Legal frameworks, including the Medical and Dental Practitioners Act and the National Health Act, govern these matters. Holding healthcare providers accountable could enhance the quality of care, benefiting both patients and the healthcare system.

Aspect	Details
Public Perception	- 61.69% of Nigerian patients feel medical practitioners are arrogant and careless.
	- 33.3% experienced extra injury due to doctor's treatment.
Lawsuit Filing	- Low number of recorded lawsuits despite high victim numbers.
Reasons for Low Claims	- Cultural notions regarding adverse medical events.
	- Poverty and illiteracy.
	- Limited treatment options.
	- Reluctance to seek redress.
	- Ignorance of rights and legal options.
Need for Patient	- Importance of informing patients about their rights to claim and sue negligent health
Awareness	providers.
Potential Improvement	- Quality of care may improve if health care providers are held liable for negligence.
Governing Laws	1. Medical and Dental Practitioners Act CAP M8, LFN 2004
	2. Nursing and Midwifery (Registration, etc.) Act 1979
	3. National Health Act 2014
	4. Code of Medical Ethics in Nigeria (pursuant to section 1(2) (c) of CAP M8)
	5. Constitution of the Federal Republic of Nigeria 1999 (As Amended)
	6. Medical Oath/Vow
	7. Compulsory Treatment and Care for Victims of Gunshot Act 2017
	8. Patients' Bill of Rights

 Table 1: Medical negligence laws in Nigeria:

Source: Oluokun (2024).

There are several types of medical negligence that can occur in clinical practice as captured in Figure 1. Diagnostic Errors occurs when a healthcare provider fails to diagnose a condition correctly or within a reasonable time frame, leading to delayed or inappropriate treatment (Adeyemo, 2019). Studies have shown that misdiagnosis accounts for a significant percentage of negligence claims in Nigeria, particularly in the fields of oncology and infectious diseases. Surgical Errors and Surgical negligence include errors made during procedures, such as performing the wrong surgery, leaving surgical instruments inside a patient, or causing unnecessary harm (Oluokun, 2024). Reports indicate that these errors are particularly problematic in public hospitals, where surgical teams may be overworked and underresourced.



Figure 1: Types of medical negligence

Medication Errors are type of negligence involves mistakes in prescribing or administering medication, such as incorrect dosages or failure to consider patient allergies. A study by Momodu and Oseni (2019) found that medication errors are prevalent due to communication breakdowns within healthcare teams and inadequate patient education. Failure to adequately monitor a patient's condition can lead to deterioration and complications. In critical care settings, this can have fatal consequences, underscoring the importance of vigilant patient monitoring (Adegboyega, 2023). The legal framework governing medical practice in Nigeria is primarily based on tort law, which provides the foundation for claims of medical negligence. The Nigerian Constitution, alongside laws such as the Medical and Dental Practitioners Act, outlines the responsibilities and standards expected of healthcare providers (Nigerian Medical Association [NMA], 2021). However, despite these legal provisions, significant gaps remain in enforcement and patient recourse. One notable issue is the burden of proof that falls on the patient. The victim must demonstrate that negligence occurred and that it directly resulted in harm, a challenging task given the complexities of medical practice (Adegbile, 2022). Furthermore, the judicial process can be lengthy and costly, deterring many from pursuing legitimate claims. Additionally, regulatory bodies like the Medical and Dental Council of Nigeria (MDCN) are responsible for overseeing the conduct of medical professionals. However, criticisms have arisen regarding their effectiveness in addressing complaints and enforcing standards. A lack of transparency and accountability often leads to a culture of impunity among healthcare providers (Kirya, 2020).

<u>Proof of medical negligence Under Nigerian</u> <u>Jurisprudence</u>:

Under Nigerian jurisprudence, proving medical negligence hinges on establishing three key elements: duty of care, breach of that duty, and resultant damage. The burden of proof lies with the patient-complainant, who must demonstrate that the medical practitioner failed to meet the standard of care expected in their profession. In the case of Delta State Hospitals Management Board & Ors v. Onome, the Court emphasized that the plaintiff must show the defendant's duty and the breach of that duty leading to harm (Atoyebi 2024). Additionally, the doctrine of res ipsa loquitur allows plaintiffs to infer negligence from the circumstances when the facts speak for themselves, shifting the burden to the defendant to rebut this presumption. Expert testimony is crucial in medical negligence cases, as it helps establish the standard of care.

Table 2: Key Aspects of Proof of Medical Negligence in Nigeria

m	The burden of proof lies on the patient-complainant to substantiate claims against the nedical practitioner. If the claimant proves negligence, the burden shifts to the defendant to show absence of negligence. If no damage is proven, the defendant is not liable.
- n	If the claimant proves negligence, the burden shifts to the defendant to show absence of negligence.
n	negligence.
-	If no demaga is proven, the defendant is not light
	In no damage is proven, the defendant is not hable.
Key Case -	Otti v. Excel-C Medical Centre Ltd & Anor: Highlights that a medical professional's
a	ctions must be a mistake compared to their peers.
Doctrine of Res Ipsa -	Allows a plaintiff to assert negligence when circumstances clearly indicate it, shifting the
Loquitur b	burden to the defendant to rebut this presumption (Adejumo & Adejumo, 2020)
Requirements to Prove -	Delta State Hospitals Management Board & Ors v. Onome: Establishes three
Negligence el	elements:
1	. Duty of care owed by the defendant.
2	2. Breach of that duty.
3	B. Damage resulting from the breach.
Who Can Sue -	Directly affected individuals can sue.
-	Exceptions: Deceased patients or minors can be represented by close relatives or
g	guardians.
Expert Testimony -	Defined in the Evidence Act as skilled individuals; relevant in determining standards of
са	care.
-	ANPP & Anor v. Alhaji Saidu Nasamu Usman: Court decides the qualification of an
ez	expert witness.
-	Expert testimony is crucial in specialized medical cases to inform the court on standards
0	of care.

Source: Atoyebi. (2024).

Human Rights Implications of Medical Negligence:

Medical negligence poses serious human rights implications, particularly in the context of healthcare in Nigeria. This issue underscores the intersection of medical ethics, patient safety, and the fundamental rights of individuals. Understanding these implications is crucial for fostering a healthcare environment that respects and promotes human dignity. The right to health is recognized internationally and enshrined in various legal frameworks, including the Universal Declaration of Human Rights (UDHR) and the International Covenant on Economic, Social and Cultural Rights (ICESCR). In Nigeria, the right to health is also articulated in the Constitution and the African Charter on Human and Peoples' Rights (Larbi, 2023). These frameworks assert that every individual has the right to accessible, acceptable, and quality healthcare, which includes not only the provision of services but also protection from negligence and harm. However, despite these legal provisions, the reality of healthcare delivery in Nigeria often falls short of these ideals. Factors such as inadequate infrastructure, insufficient training for medical personnel, and systemic corruption contribute to a healthcare system where patients' rights are frequently violated (Obaro, 2022). The implications of medical negligence thus extend beyond individual cases, highlighting systemic failures to uphold human rights in healthcare.

<u>Rights to Life and Health</u>:

At the core of medical negligence are the rights to life and health. The right to life, as articulated in Article 3 of the UDHR, implies not only the right to exist but also to access essential health services that can protect and enhance life (Okpalaobi, & Nzewi, 2021). In Nigeria, the failure to provide adequate medical care can lead to preventable deaths and suffering, constituting a direct violation of this right. Moreover, the right to health is multifaceted, encompassing not only access to healthcare services but also the conditions necessary for achieving good health. Medical negligence, therefore, undermines these rights by denying patients the quality of care they are entitled to receive.

Impact of Medical Negligence on Patients' Rights: The impact of medical negligence on patients' rights is profound and multifaceted. Firstly, it can lead to a loss of trust in the healthcare system. When patients experience negligence, they may become wary of seeking medical help in the future, fearing further harm (Fyanka & Ekpendu, 2023). This erosion of trust not only affects individual patients but also has broader implications for public health, as communities may avoid necessary medical services. Secondly, medical negligence can result in significant psychological trauma for victims and their families. The emotional and mental toll of suffering due to negligence can lead to long-term psychological issues, including anxiety and depression (Iyioha, 2016). This is particularly concerning in a country like Nigeria, where mental health resources are already scarce. Additionally, the socioeconomic implications cannot be overlooked. Patients who suffer from negligence often face mounting medical bills, loss of income due to inability to work, and other financial burdens. This can perpetuate cycles of poverty and inequality, further marginalizing vulnerable populations (Chukwuneke, 2015).

Causes of Medical Negligence in Nigeria:

Medical negligence in Nigeria is a multifaceted issue influenced by several systemic factors. Understanding the underlying causes is critical for developing effective interventions to enhance patient safety and improve the quality of healthcare services. Among the primary causes of medical negligence are inadequate training and education of medical personnel, poor healthcare infrastructure, and a lack of accountability and oversight.



Figure 2: Causes of Medical Negligence in Nigeria

One of the most significant contributors to medical negligence is the inadequate training and education of healthcare providers. The World Health Organization (WHO) has highlighted the importance of ongoing professional development for medical personnel to ensure that they remain competent in their fields. In Nigeria, however, many healthcare providers do not have access to continuous education programs or sufficient practical training opportunities (Khanam & Rubina, 2023). This gap in education often leads to misdiagnoses and inappropriate treatment decisions, which can have dire consequences for patients. For instance, inadequate training in recognizing critical health conditions can result in delayed interventions, worsening patient outcomes (Ashokka et al, 2020). Furthermore, the lack of mentorship for junior medical staff further exacerbates the issue, as these individuals may lack the guidance necessary to develop their skills and decision-making capabilities.

The state of healthcare infrastructure in Nigeria is another critical factor contributing to medical negligence. Many hospitals and clinics face severe shortages of essential equipment, medications, and facilities. This inadequacy creates an environment where medical personnel are unable to perform to the best of their abilities, increasing the risk of errors and negligence. Moreover, the infrastructure challenges extend beyond physical resources. Issues such as overcrowding in hospitals, inadequate patient-to-staff ratios, and poor sanitation further hinder effective medical care (Cohen et al, 2020). In such conditions, healthcare providers are often overworked and overwhelmed, leading to burnout and increased likelihood of mistakes (Cohen et al, 2020). The combination of these infrastructural deficits creates a systemic environment that is conducive to negligence and malpractice.

The lack of accountability and oversight within the Nigerian healthcare system also plays a pivotal role in perpetuating medical negligence. Regulatory bodies such as the Medical and Dental Council of Nigeria (MDCN) are tasked with overseeing medical practice and ensuring compliance with established standards. However, these bodies often face significant challenges, including corruption, inefficiency, and a lack of resources to effectively monitor and enforce standards (Shukar et al, 2021). As a result, many healthcare providers operate without fear of repercussions for negligent behavior, contributing to a culture of impunity. Furthermore, the legal framework

surrounding medical negligence in Nigeria places a heavy burden on patients seeking redress. Victims of negligence often encounter lengthy legal processes, high costs, and significant barriers to obtaining justice. This situation discourages many individuals from pursuing legitimate claims, allowing negligent practices to persist unchecked.

Case Studies of Medical Negligence in Nigeria:

Medical negligence in Nigeria has manifested in various notable incidents that highlight systemic flaws within the healthcare system. These cases not only underscore the gravity of the issue but also illustrate the significant repercussions on victims, their families, and the broader community. Through a closer examination of specific incidents, one can gain insights into the outcomes for victims and the public and legal reactions that follow.

Notable Incidents and Their Impact:

One of the most widely publicized cases of medical negligence occurred in 2024 when a woman died during childbirth at a public hospital in Lagos due to alleged inadequate care and delayed intervention (Ojuroungbe, 2024a, Ojuroungbe, 2024b). Reports indicated that the hospital staff were overwhelmed and that critical resources were lacking, which resulted in the woman not receiving timely medical assistance. This tragic incident sparked outrage among the public and drew attention to the chronic issues within Nigeria's healthcare system, including underfunding and understaffing. Another significant case involved a wrong-site surgery following trauma from road-traffic accident. The first case was a closed reduction of the 'wrong' dislocated hip in the trauma/emergency unit under the care of senior residents, while the second case was attempted wrong-site surgery on the right leg in a patient with fracture of the left tibia, in conjunction with bilateral femoral fracture and right radio-ulnar fracture; by an experienced Chief Consultant Orthopaedic Surgeon operating elective list (Nwosu, 2015). This incident not only led to physical harm but also caused emotional trauma for the patient and their family. Such cases have highlighted the critical importance of procedural checks and the need for stringent adherence to protocols to prevent similar errors in the future. These notable incidents serve as stark reminders of the human cost associated with medical negligence. Victims often endure prolonged suffering, and in many cases, their families are left grappling with the emotional and financial burdens of negligence. The implications extend beyond individual cases; they reflect systemic failures that affect public trust in the healthcare system.

Analysis of Outcomes for Victims:

The outcomes for victims of medical negligence in Nigeria can be devastating. Physical injuries, prolonged recovery times, and mental health challenges are common among those affected. Furthermore, the psychological impact of medical negligence should not be underestimated. Many victims experience anxiety, depression, and posttraumatic stress disorder (PTSD) following their experiences (Nwoye, 2024). The trauma associated with medical negligence can lead to a reluctance to seek further medical care, exacerbating health issues and creating a cycle of distrust in the healthcare system.

<u>Public and Legal Reactions</u>:

Public reaction to incidents of medical negligence is often one of outrage and frustration. The aforementioned cases have spurred protests and calls for accountability from both the public and advocacy groups. Citizens demand improved standards of care and more rigorous regulatory oversight to prevent such tragedies from recurring. Social media has played a crucial role in amplifying these voices, allowing victims and their families to share their stories and mobilize support. Legally, the response to medical negligence in Nigeria is complex. The burden of proof lies heavily on victims, making it difficult for them to seek redress (Yang, 2023). Many victims face daunting legal challenges, including high costs and lengthy litigation processes, which deter them from pursuing claims. This lack of accountability often perpetuates a culture of impunity within the healthcare system. However, there have been some legal advancements aimed at improving accountability. Advocacy for the establishment of medical tribunals and clearer guidelines for negligence claims has gained traction in recent years. These efforts reflect a growing recognition of the need for a more robust legal framework to protect patients' rights and ensure that healthcare providers are held accountable for negligent acts.

Challenges in Addressing Medical Negligence:

Addressing medical negligence in Nigeria involves navigating a complex landscape of legal barriers, cultural attitudes, and limitations of regulatory bodies as captured in Figure 3. These challenges hinder the ability of victims to seek justice and perpetuate a culture of impunity within the healthcare system. Understanding these obstacles is essential for developing effective strategies to enhance accountability and improve patient safety.

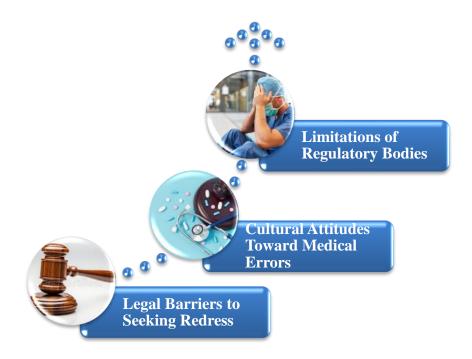


Figure 3: Challenges in Addressing Medical Negligence

One of the most significant challenges in addressing medical negligence in Nigeria is the legal framework surrounding claims. The burden of proof rests heavily on the victim, who must demonstrate that negligence occurred and that it directly resulted in harm (Obaro, 2022). This requirement poses significant obstacles for many patients, particularly those lacking legal representation or resources to pursue lengthy litigation. Furthermore, the legal process for negligence claims can be protracted and cumbersome, often taking years to resolve. This delay in justice not only discourages victims from seeking redress but also exacerbates their suffering, as many are left without compensation for medical expenses, lost wages, and emotional distress (Aluh et al, 2022). Additionally, there is often a lack of legal clarity regarding the standards of care expected from healthcare providers, leading to further complications in proving negligence.

Cultural attitudes towards medical errors significantly impact the reporting and addressing of negligence in Nigeria. In many communities, there exists a strong belief in the infallibility of medical practitioners, which can create a stigma around acknowledging medical errors (Adejumo & Adejumo, 2020). This cultural reverence for healthcare professionals discourages patients from voicing their concerns or filing complaints, as doing so may be perceived as a challenge to the authority of the medical profession. Additionally, patients may fear retaliation from healthcare providers if they report negligence, leading to a culture of silence that prevents accountability and learning from mistakes. A study by Momodu and Oseni (2019) found that many patients felt dissuaded from seeking redress due to fears of social ostracization and the potential for further harm in future medical encounters. This cultural dynamic contributes to an environment where negligence is

often unreported and unresolved, perpetuating systemic issues within healthcare.

Regulatory bodies, such as the Medical and Dental Council of Nigeria (MDCN), are tasked with healthcare practices overseeing and ensuring compliance with established standards. However, these bodies often face significant limitations that impede their effectiveness in addressing medical negligence. This inadequacy can lead to delays in addressing grievances and a backlog of cases, further frustrating victims seeking justice. Moreover, there are concerns about corruption and inefficiency within regulatory which undermine public bodies. can trust (Adegboyega, 2023). In some instances, allegations have been made regarding the influence of powerful medical professionals who may evade accountability due to their connections within these agencies (Larbi, 2023). This culture of impunity creates a significant barrier to effective oversight and enforcement, as victims may feel that their complaints will not lead to meaningful consequences for negligent providers.

RemediesandRecommendationsforAddressing Medical Negligence:

According to Ojo (2022), victims of medical malpractice in Nigeria have several avenues for redress, including filing criminal complaints, civil lawsuits, or utilizing the Medical and Dental Council's (MDCN) complaint process. According to the criminal code, medical practitioners must exercise reasonable skill and care; failure to do so can result in criminal negligence, as seen in the R v Akerele case, where a doctor was convicted for manslaughter due to overdose deaths. The MDCN can impose penalties such as license suspension or removal from the register for professional misconduct. Additionally, patients can pursue damages in civil courts for negligence.

Addressing medical negligence in Nigeria requires a multi-faceted approach that encompasses enhancing training and education for medical personnel, strengthening regulatory frameworks, and improving healthcare infrastructure. These recommendations aim to mitigate the occurrence of negligence and promote a culture of accountability and safety within the healthcare system.

Enhancing Training and Education for Medical Personnel: One of the foremost recommendations is to enhance the training and education of medical personnel. Continuous professional development is essential for ensuring that healthcare providers are equipped with the latest knowledge and skills (Okpalaobi & Nzewi, 2021). Institutions should implement mandatory training programs focusing on clinical skills, patient safety, and ethical considerations in medical practice. A study by Iyioha, I. O. (2016) highlights the need for simulation-based training, which has been shown to improve practitioners' decision-making abilities and technical skills in highpressure situations. Additionally, integrating human rights and patient-centered care into medical curricula can help future healthcare providers understand the importance of respecting patient rights and addressing their needs (Khanam & Rubina, 2023). Regular workshops and seminars should be organized to facilitate ongoing education, with particular emphasis on recognizing and mitigating risks associated with medical errors. Such initiatives can foster a culture of improvement, learning and where medical professionals feel empowered to report errors and learn from them rather than fear punitive measures.

Strengthening Regulatory Frameworks: Another critical recommendation is to strengthen the regulatory frameworks governing medical practice in Nigeria. Regulatory bodies, such as the Medical and Dental Council of Nigeria (MDCN), must be adequately resourced and empowered to enforce standards and conduct thorough investigations into allegations of negligence. This includes increasing the number of inspectors and providing them with training on the nuances of medical negligence cases. Moreover, establishing clear guidelines for the investigation and adjudication of medical negligence claims can help standardize processes and reduce ambiguity (Shukar et al, 2021). Transparency in these processes is essential; victims must be assured that their complaints will be taken seriously and addressed promptly. Implementing a public database of medical malpractice cases and their outcomes could serve as a deterrent to negligent practices and enhance public trust in the regulatory system.

Improving Healthcare Infrastructure: Improving healthcare infrastructure is also vital for reducing medical negligence. Investment in healthcare facilities, equipment, and supplies is necessary to ensure that medical personnel can provide quality care. According to Nwoye (2024), many public hospitals in Nigeria operate without essential life-saving equipment, leading to preventable medical errors. Upgrading facilities and ensuring the availability of necessary resources can significantly reduce the incidence of negligence. Furthermore, enhancing the patient-to-staff ratio is crucial. Overworked healthcare providers are more prone to errors due to fatigue and burnout (Obaro, 2022). Increasing staffing levels can help the healthcare facilities ensure that medical personnel can adequately monitor and care for their patients, thereby improving patient outcomes.

CONCLUSION:

The issue of medical negligence in Nigeria is a pressing concern that carries profound implications for patient safety and the protection of human rights. Throughout this discussion, several key points have emerged that underscore the critical need for reform in the healthcare sector. First, the prevalence of medical negligence is often rooted in systemic challenges such as inadequate training for medical personnel, poor healthcare infrastructure, and insufficient regulatory oversight. These factors not only contribute to incidents of negligence but also create an environment where patients may feel powerless to seek redress. The legal barriers and cultural attitudes surrounding medical errors further complicate the landscape, discouraging victims from coming forward and exacerbating the problem of accountability.

Moreover, the impact of medical negligence extends beyond individual cases. Victims and their families often face significant emotional, physical, and financial burdens as a result of negligent care. This situation highlights the urgency of addressing the systemic flaws within the healthcare system to ensure that patients receive safe and competent care. Upholding human rights in healthcare is paramount not only for safeguarding individual patients but also for fostering trust within the healthcare system as a whole. The right to health is fundamental, and ensuring that all individuals have access to quality medical care is a moral and ethical obligation. Addressing medical negligence is crucial for promoting patient safety and protecting these rights. As Nigeria moves forward, it is essential that stakeholders—including healthcare providers, policymakers, and regulatory bodies—work collaboratively to implement reforms that enhance education, strengthen regulations, and improve infrastructure.

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