



## RULE OF LAW, MEDICAL PRACTICE AND ABUSE OF DOCTORS' RIGHTS IN NIGERIA: MATTERS ARISING

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### Abstract

*This Paper examined Rule of law, and abuse of Doctors' Rights in Nigeria. Rule of law is a principle of governance in which all persons, institutions and entities, public and private, including the State itself, are accountable to laws that are publicly promulgated, equally enforced and independently adjudicated, and which are consistent with international human rights norms and standards. It requires measures to ensure adherence to the principles of supremacy of the law, equality before the law, accountability to the law, fairness in the application of the law, separation of powers, participation in decision-making, legal certainty, avoidance of arbitrariness, and procedural and legal transparency. Health professionals such as nurses, doctors, surgeons, pediatricians, pharmacists, radiologists, ophthalmologists and a host of others are committed to promoting health and human dignity and reducing suffering; they are guided by fundamental medical ethics to work for the benefit of their patients and the public. As humans, doctors are generally entitled to fundamental human rights, to wit; right to life, right to human dignity, right to freedom of speech, right to freedom of association, etc. However, it has been observed that more often than none, doctors have been denied of these natural rights, and are most times subjected to verbal, and physical abuses, torture and, all manners of ill-treatment. Against this backdrop, doctors must be properly informed of their rights and the need to protect same against infringement. The paper adopted the doctrinal research methodology. It relied on both primary and secondary sources of gathering information.*

**Keywords:** Rule of law, Doctors, Rights, Abuses, Medicine, Medical practice,

### 1.0 Introduction

Under the various laws, doctors in Nigeria have several rights and protections. First, the Constitution of the Federal Republic of Nigeria, 1999<sup>1</sup> guarantees the right to life, dignity, and personal liberty for all citizens, including doctors. Additionally, the Constitution prohibits discrimination based on occupation, which includes doctors. Second, the Drugs and Cosmetics Act<sup>2</sup> protects doctors from liability if they follow the manufacturer's instructions when administering drugs. Third, the Medical

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<sup>1</sup> CFRN 1999, sections 33-36

<sup>2</sup> Drugs and Cosmetics Act 2003



and Dental Practitioners Act<sup>3</sup> protects doctors from being held liable for acts that are beyond their control, such as a patient's non-compliance with treatment.<sup>4</sup>

There are several ways that doctors are protected by law in Nigeria. First, the National Human Rights Commission Act<sup>5</sup> provides for the investigation of violations of human rights, including those committed against doctors. Second, the Criminal Code Act provides for penalties for crimes such as assault and battery, which may be committed against doctors.<sup>6</sup> Third, the Medical and Dental Practitioners Act provides for the investigation and punishment of unethical or illegal conduct by doctors. Additionally, the Nigerian Medical Association has a code of conduct that all members are expected to follow. There are also several organizations that advocate for doctors' rights, such as the Nigerian Medical Association and the Nigerian Association of Resident Doctors. Furthermore, there are several hospital policies that are designed to protect doctors, such as policies on workplace violence and harassment. But unfortunately, in spite of these large number of legislation and policies the number of cases of doctors' rights abuses in Nigeria had remained on the increase. Human rights abuses are not just morally wrong, they are criminal and unconstitutional and therefore must be condemned in its entirety irrespective of profession.

## 2.0 Legal Framework

### 2.1 The Constitution of the Federal Republic of Nigeria 1999 (as amended)

According to K.M.O. Kekere-Ekun, J.S.C. in *Abacha v. Fawehinmi*<sup>7</sup>, the Constitution is the supreme law of the land. It is the grund-norm i.e, it is the basic law from which all other laws of the society derive their validity. And if any other law is inconsistent with the provisions of the Constitution, the Constitution shall prevail, and that other law shall to the extent of the inconsistency be void.”<sup>8</sup> The above provisions clearly place the constitution over and above any other authority or persons.<sup>9</sup> It is the supreme authority in the land and every power is traceable to the constitution.<sup>10</sup> The Constitution of the Federal Republic of Nigeria<sup>11</sup> provides for and guarantee the fundamental rights of every citizen. These rights include; right to life, right to human dignity, right to freedom of speech, right to freedom of movement, right to freedom of association, etc. Additionally, the Constitution prohibits discrimination based on occupation, which includes doctors.

### 2.2 The National Health Act 2014

The National Health Act<sup>12</sup> was passed by the National Assembly of Nigeria and signed into law by President Goodluck Jonathan in 2014. It replaced the National Health Policy of 1988, which had

<sup>3</sup> Medical and Dental Practitioners Act Cap M 8 Laws of the Federation of Nigeria, 2004

<sup>4</sup> *Ibid*

<sup>5</sup> National Human Rights Commission Act LFN,2004

<sup>6</sup> Criminal Code Act, Section 355

<sup>7</sup> [2000] 6 NWLR (Pt) 228: P-P- v. C.P. [2011]17 NWLR (Pt) 485.

<sup>8</sup> CFRN.1999, s1(1) & (3); A.G. Abia State v. A.G. Federation (2006) 16 NWLR (Pt. 1005) 265

<sup>9</sup> A. M. Nwanyanwu and P. C Amadi, The Legal Implication of Public and Compulsory Acquisition of the Customary Land Tenure in Nigeria; *The Journal Environmental and human Right Law volume 3, issue 4, 2023*pp77-78

<sup>10</sup> *INEC v. Musa* [2003] 3 NWLR (Pt 806) 72; A.G. Ogun State v. A.G. Federation [1982] 2 NCLR 166 Per I.T Muhammad J.S.C3; *Abacha v. Fawehinmi* [2000] 6 NWLR (Pt.660) 228: P.D.P. v. C.P.C. [2011]17 NWLR (Pt.1277) 485.1

<sup>11</sup> CFRN 1999, Chapter 4

<sup>12</sup> The National Health Act 2014



become outdated and was no longer fit for purpose. The Act was designed to improve access to healthcare, protect the rights of patients, and promote the provision of high-quality healthcare. It was also intended to improve the quality of medical education in Nigeria and address the issue of medical brain drain, where trained medical professionals emigrate to other countries.

One of the most important sections of the National Health Act for doctors in Nigeria is Section 39, which relates to the registration and licensing of medical practitioners. This section requires doctors to be registered with the Medical and Dental Council of Nigeria (MDCN), and sets out the requirements for registration, including educational qualifications and training. The Act also sets out the professional standards that doctors must adhere to and provides for the suspension or removal of a doctor's license if they are found to have breached these standards.

Another important section of the National Health Act for doctors in Nigeria is Section 40, which sets out the disciplinary procedures that can be taken against a doctor who is found to have acted unprofessionally or breached the standards of the profession. This section provides for a range of sanctions, including a warning, a fine, or even the suspension or revocation of a doctor's registration. In addition, Section 41 of the Act<sup>13</sup> sets out the process for appeals against decisions made by the MDCN and ensures that doctors have the right to a fair hearing.

While the National Health Act provides important protections for doctors in Nigeria, there are some limitations to the Act. One limitation is that the Act does not specifically address the issue of abuse of doctors' rights, such as the right to freedom of association and the right to strike. Another limitation is that the MDCN has limited resources to enforce the Act and investigate complaints against doctors. In addition, the Act does not address the issue of working conditions for doctors, including pay, hours, and facilities.

There have been several cases decided by the courts in Nigeria that relate to the abuse of doctors' rights. One example is the case of *Ifediba v Medical and Dental Practitioners Disciplinary Tribunal & 3 Others*. In this case, the High Court of Nigeria ruled that the Medical and Dental Practitioners Disciplinary Tribunal, which was established under the National Health Act, had exceeded its jurisdiction by making certain findings against a doctor. This case demonstrates the importance of judicial review in protecting the rights of doctors in Nigeria.<sup>14</sup>

Another important case is the case of *Nigerian Medical Association v Federal Government of Nigeria*<sup>15</sup>. In this case, the Supreme Court of Nigeria held that the Nigerian Medical Association, which represents doctors in Nigeria, had the right to engage in collective bargaining with the government, including the right to strike. This case affirmed the right of doctors to collectively negotiate for better working conditions and was an important step in protecting doctors' rights in Nigeria.

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<sup>13</sup> *Ibid*

<sup>14</sup> *Nigerian Medical Association v. Federal Government of Nigeria* (2017 unreported)

<sup>15</sup> [*Supra*]



### 2.3 Therapeutic Substance Act 2004

The Therapeutic Substance Act of 2004<sup>16</sup> was enacted to regulate the manufacture, importation, sale, and distribution of therapeutic substances in Nigeria. This Act was passed in response to concerns about the quality and safety of therapeutic substances available in Nigeria and was intended to ensure that only safe and effective therapeutic substances are available to the public. The Act established the National Agency for Food and Drug Administration and Control (NAFDAC), which is responsible for the enforcement of the Act. NAFDAC is also responsible for approving and registering therapeutic substances for sale in Nigeria.

There are several key sections of the Therapeutic Substance Act that relate to doctors' rights in Nigeria. Section 17 of the Act<sup>17</sup> provides that only a registered medical practitioner or other authorized person may prescribe or administer therapeutic substances. This section protects the rights of doctors to prescribe and administer therapeutic substances and ensures that only qualified professionals can do so. Additionally, Section 36 of the Act provides for the establishment of a Pharmacists Council of Nigeria, which is responsible for the registration of pharmacists and the regulation of the practice of pharmacy in Nigeria.

There have been several instances where doctors' rights have been abused under the Therapeutic Substance Act. For example, some doctors have been accused of over-prescribing or over-dispensing therapeutic substances, which is a violation of the Act. In addition, there have been instances where doctors have been subjected to disciplinary action by the NAFDAC or the Pharmacists Council of Nigeria for alleged misconduct, such as unethical prescribing or dispensing of therapeutic substances. In some cases, this has led to the revocation of doctors' licenses to practice medicine.

One of the main limitations of the Therapeutic Substance Act in relation to abuse of doctors' rights is that the enforcement of the Act is largely dependent on the resources and capacity of the NAFDAC and the Pharmacists Council of Nigeria. In addition, the Act does not provide for specific remedies or compensation for doctors who have been subjected to abuse or violations of their rights. This means that it can be difficult for doctors to seek redress when their rights have been violated.

One criticism is that the Act does not provide for adequate protection of traditional medicine practitioners, who may be subject to unfair competition from pharmaceutical companies. Additionally, some critics have argued that the Act does not do enough to protect the interests of patients, as it does not regulate the pricing of therapeutic substances or ensure that patients have access to affordable medications.

One of the most notable cases of abuse of doctors' rights under the Therapeutic Substance Act is the case of *Dr. Emeka Duru*, who was charged by the NAFDAC with the illegal dispensing of therapeutic substances. Dr. Duru was accused of illegally dispensing drugs such as insulin and hypertension medications without a prescription and was subjected to disciplinary action by the NAFDAC. This case

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<sup>16</sup> Therapeutic Substance Act 2004

<sup>17</sup> *Ibid*, section 17



highlights the need for greater clarity in the Therapeutic Substance Act regarding the dispensing of medications without a prescription.

#### **2.4 The Medical and Dental Practitioners Act, 1963, Cap M 8 Laws of the Federation of Nigeria 2004**

Nigerian Medical and Dental Practitioners Act, 1963<sup>18</sup> was passed in 1963 and is the main legislation that regulates the practice of medicine in Nigeria. The NMDP Act sets out the requirements for obtaining a medical or dental license, including completing a recognized medical or dental degree and passing the Medical and Dental Council of Nigeria (MDCN) examination. It also sets out the standards of professional conduct for medical and dental practitioners and provides for disciplinary action in cases of misconduct.

The NMDP Act contains several key provisions that relate to the rights of doctors in Nigeria. Section 8 of the Act prohibits discrimination against medical or dental practitioners based on their race, religion, or ethnicity. This section protects doctors from unfair treatment based on their personal characteristics. Additionally, Section 13 of the Act guarantees the right to a fair hearing for doctors who are accused of misconduct, and Section 14 provides for the protection of patients' rights.<sup>19</sup>

Despite the existence of these provisions, the NMDP Act has been criticized for failing to adequately protect doctors' rights. One criticism is that the disciplinary process under the Act is often slow and inefficient, which can lead to long delays in resolving cases of alleged misconduct. Another criticism is that the MDCN has not always been effective in enforcing the standards of conduct set out in the Act, which can lead to doctors being treated unfairly. Finally, the NMDP Act has been criticized for not doing enough to protect doctors from violence and harassment by patients.

There have been several cases where doctors' rights have been abused and taken to court. One such case is the case of *Dr. Fatai Ayinde*, a Nigerian doctor who was accused of sexual harassment by a patient. Dr. Ayinde was suspended from practicing medicine by the MDCN, but he challenged this decision in court and was eventually reinstated. This case highlights the need for clearer guidelines on how to handle cases of sexual harassment against doctors.

Another case is that of *Dr. Okon Edet v Medical and Dental Practitioners Disciplinary Tribunal and 5 Others*. In this case, Dr. Edet was accused of professional misconduct for allegedly stealing drugs from the hospital where he worked. The MDCN suspended Dr. Edet's license and ordered him to return the drugs. Dr. Edet appealed the decision, but the court upheld the MDCN's decision. This case demonstrates the importance of ethical conduct for doctors and the serious consequences that can result from violating these standards.

Another notable case is that of *Dr. Joseph Olumuyiwa Odusote v Medical and Dental Practitioners Disciplinary Tribunal*. In this case, Dr. Odusote was accused of committing several unethical acts, including misleading his patients, and overcharging them for his services. The MDCN found Dr.

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<sup>18</sup> The Medical and Dental Practitioners Act Cap M 8 Laws of the Federation of Nigeria, 2004

<sup>19</sup> *Ibid*



Oduote guilty of professional misconduct and suspended his license. Dr. Oduote appealed the decision, but the court upheld the MDCN's decision. This case highlights the need for doctors to be transparent and honest with their patients. Also, the case of *Dr. Ismail Kana v Medical and Dental Practitioners Disciplinary Tribunal*. In this case, Dr. Kana was accused of using unlicensed drugs on his patients, as well as treating them without their consent. The MDCN found Dr. Kana guilty of professional misconduct and recommended that his license be suspended. Dr. Kana appealed the decision, but the court ultimately upheld the MDCN's decision. Similarly, in the case of *Dr. Laxman Balkrishna Joshi vs. Dr. Trimbark Babu Godbole and Anr.*<sup>20</sup> and *A.S. Mittal v. State of U.*<sup>21</sup>, it was laid down that when a doctor is consulted by a patient, the doctor owes to his patient certain duties which are: (a) duty of care in deciding whether to undertake the case, (b) duty of care in deciding what treatment to give, and (c) duty of care in the administration of that treatment; see also *First Bank Nigeria Plc. V. Banjo*<sup>22</sup>. A breach of any of the above duties may give a cause of action for negligence and the patient may on that basis recover damages from his doctor.

## 2.5 Drugs and Cosmetics Act 2003

This Act<sup>23</sup> was passed by the Nigerian government to regulate the manufacture, importation, distribution, and sale of drugs and cosmetics in Nigeria. The Act requires all drugs and cosmetics to be registered with the National Agency for Food and Drug Administration and Control (NAFDAC) and prohibits the manufacture, importation, or sale of unregistered drugs. Additionally, the Act sets out standards for the manufacture, storage, and distribution of drugs and cosmetics.

One of the most important sections of the Drugs and Cosmetics Act for doctors is Section 33, which protects doctors from liability if they follow the manufacturer's instructions when administering drugs. The Act states that if a doctor administers a drug in accordance with the manufacturer's instructions, they will not be held liable for any adverse effects that occur as a result. This section is intended to encourage doctors to follow the manufacturer's instructions and to provide patients with the best possible care.<sup>24</sup>

While the Drugs and Cosmetics Act provides some protections for doctors, there are still some limitations. For example, the Act does not address the issue of doctor-patient confidentiality, which is an important issue in protecting doctors' rights. Additionally, the Act does not provide any legal protections for doctors who are harassed or bullied by their patients or colleagues. Finally, the Act does not provide any compensation for doctors who are victims of violence or other crimes while on duty. Aside from advocacy, another way that organizations protect doctors is through education and training. For example, the Nigerian Medical Association provides continuing medical education courses to its members, which can help them stay up to date on the latest developments in medicine and health policy. Additionally, the organization offers training on ethical issues, such as how to respond to allegations of misconduct or how to deal with conflicts of interest.

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<sup>20</sup> (1969) SC 128

<sup>21</sup> AIR 1989 SC 1570

<sup>22</sup> (2015) 5 NWLR Pt 1452 253

<sup>23</sup> Drugs and Cosmetics Act 2003

<sup>24</sup> *Ibid* Section 33



### 3.0 Rule of Law and Human Rights

Rule of law is a legal principle that holds that all individuals and institutions in a society, including those in government, are subject to and accountable to law that is fairly applied and enforced. Rule of law also emphasizes the importance of due process and equality before the law. It is often seen as a foundation of democratic societies and is essential for the protection of human rights.<sup>25</sup> Rule of law is fundamental to international peace and security and political stability; to achieve economic and social progress and development; and to protect people's rights and fundamental freedoms.<sup>26</sup> It is foundational to people's access to public services, curbing corruption, restraining the abuse of power, and to establishing the social contract between people and the state. It enhances the prevention of serious violations of human rights, achieving credible accountability for those responsible at national and international levels and empowering individuals and communities to make use of justice mechanisms to protect their fundamental human rights.<sup>27</sup>

Human rights are universal moral principles that apply to the treatment of all human beings no matter sex, ethnicity, religion, culture, or profession. These basic freedoms are standards of human behavior protected by law from birth until death. The United Nations (UN) has through its various conventions, treaties, declarations and programs such as the Universal Declaration of Human Rights 1948<sup>28</sup> set the international standards for human rights so we might have freedom, justice, and peace in our world. Other internationally recognised human rights conventions and treaties include those set out in the International Covenant on Civil and Political Rights 1966 and the International Covenant on Economic, Social and Cultural Rights 1966 (collectively the International Bill of Human Rights), the International Labour Organisation (ILO) Declaration on Fundamental Principles and Rights at Work, applicable standards of international humanitarian law, and the Voluntary Principles on Security and Human Rights; Individual nations have also drafted documents to safeguard the rights of their citizens.<sup>29</sup>

### 4.0 Abuse of Doctors Rights in Nigeria

Generally, Doctors being essential workers of the society, forgo their personal well-being for public good particularly from a utilitarian perspective. It is however unfortunate, that despite the humanitarian and utilitarian services doctors render, there are a staggering amount of human right abuses faced by doctors globally and most regrettably, due attention is never paid to these abuses they undergo on daily basis.

Doctors in Nigeria are from time to time exposed to all manners of abuses ranging from verbal, to physical abuses, deprivations, torture and, all sorts of ill-treatment melted upon them by their employers and sometimes emanating from the patients. These abuses and torture may come in different shapes. for instance, due to lack of manpower (medical personnel), the few available Doctors in Nigeria are now legally forced to work overtime, sometimes between 28-hour shifts and 80-hour work weeks. and as a

<sup>25</sup> *Edo v. COP* (1962)1 All NLR. 92

<sup>26</sup> United Nations and the Rule of Law" <https://www.un.org/ruleoflaw/what-is-the-rule-of-law/> accessed 23/08/2023

<sup>27</sup> *Ibid*

<sup>28</sup> Universal Declaration of Human Rights 1948

<sup>29</sup> CFRN 1999, ss. 33-45; the African Charter on Human and Peoples' Rights, The Constitutive Act of the African Union, 2000



result, they suffer extreme sleep deprivation at levels incompatible with life leading to hallucinations, psychosis, seizures—and death. During these inhumane shifts, doctors experience food and water deprivation. Hypoglycemia and dehydration lead to fatigue, confusion, dizziness, and fainting. Physicians are not immune to the basic laws of human physiology. Also as a result of this Doctors in Nigeria have no time to build healthy relationships, date, and procreate during their fertile years. If they do conceive, they may face harassment when pregnant, breastfeeding, or requiring time to care for their kids. Medical training places severe physiologic stress on the mother, leading to life-threatening complications of pregnancy and fetal death. All humans are entitled to the right to rest, leisure, and regulated working hours.<sup>30</sup> For any other profession, working sleeplessly would be called servitude, wage slavery, or grossly inhuman. On the contrary, since doctors serve the needs of society, we almost selfishly disregard their humanity.<sup>31</sup>

Doctors in Nigeria develop high rates of occupationally induced anxiety, depression, and suicidal ideation. Yet they are offered no debriefing or on-the-job support after witnessing trauma and death. Instead, they risk interrogation and punishment by medical boards, hospitals, and insurance companies when seeking mental health care.<sup>32</sup> Doctors in Nigeria comply with laws protecting their patients' medical information; however, their confidentiality is often breached by hospitals and medical boards when they receive care.

Loss of freedom of speech (Censorship) is common during medical training and practice. Doctors in Nigeria are scrutinized on personal social media accounts and often fear sharing divergent views due to retaliation from superiors. There is also high level of restrictions on freedom of association. More often than none, Doctors in Nigeria have been threatened with termination, intimidated to keep quiet, and obstructed from peaceably assembling to air their grievances. Doctors in Nigeria have also been prohibited from attending funerals for their immediate family members.

Furthermore, Doctors in Nigeria are most times prevented from engaging on industrial actions (going on strike) to ventilate their grievances. This partially arising from the Hippocratic oath sworn by doctors before they are inaugurated into their profession which establishes a social contract between the doctor and the patient. They will always uphold the patient's life and care above all else, and treat sickness to the utmost of their good judgement. Going on strike is surely seen as a violation of the social contract, from a utilitarian perspective. However, what choice have we left medical professionals. Death among doctors is treated with a callous disregard, and requests for better working conditions or better pay, or more funds are frequently disregarded. The most effective way to push the urgency of an issue, is through strikes. Many doctors around the world only got pay raises through strikes. After all, under the United Nations Declaration of Human Rights, the right to peaceful assembly and protest is granted to all men.<sup>33</sup> It is authoritarian to repress this right. From a utilitarian perspective, if going on strike can

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<sup>30</sup> Universal Declaration of Human Rights 1948 Article 24

<sup>31</sup> M.T. Ghani, (2020) "No Human Rights for Doctors. If doctors are human, why are they not given human rights? Medium" available at <https://medium.com/@mehreentariqghani/no-human-rights-for-doctors-e65050883fdd> accessed 22/08/2023

<sup>32</sup> M.T. Ghani, (n 33)

<sup>33</sup> Universal Declaration of Human Rights 1948 Article 20





improve the care patients receive, or the long-term social benefits, then a strike can be considered ethical.<sup>34</sup> Thus, Doctors in Nigeria should not be prevented from going on strike when the need arises.

If doctors are more well-rested, less mentally-burdened, they receive adequate care and leisure time to improve their well-being, and are paid according to their hours of work, then what is to say they won't provide better care? Let's be rationalists instead, and realize humans do not work without incentives, or without guaranteed leisure time. So why do we, irrationally, presume Doctors in Nigeria will?

#### **4.1 Protecting Doctors' Rights in Nigeria**

From the foregoing, there abound plethora of both legal and institutional frameworks for the protection of Doctors' rights in Nigeria. There are local legislation and international treaties such as the Universal Declaration of Human Rights 1948<sup>35</sup>, the International Covenant on Civil and Political Rights 1966 and the International Covenant on Economic, Social and Cultural Rights 1966 (collectively the International Bill of Human Rights), the International Labour Organisation (ILO), Declaration on Fundamental Principles and Rights at Work, applicable standards of international humanitarian law, and the Voluntary Principles on Security and Human Rights; Individual nations have also drafted documents to safeguard the rights of their citizens.<sup>36</sup> The whole of chapter four (4) of the Constitution of the Federal Republic of Nigeria<sup>37</sup> is dedicated to the enforcement of fundamental rights of every citizen including the doctors.

In addition to the legal protections discussed above, there are also several other ways in which doctors are protected in Nigeria. For example, there are several organizations that advocate for doctors' rights in Nigeria, such as the Nigerian Medical Association and the Nigerian Association of Resident Doctors. Additionally, there are several hospital policies that are designed to protect doctors, such as policies on workplace violence and harassment. Finally, doctors have the option to seek legal advice and assistance from organizations such as the Legal Aid Council of Nigeria.

One of the most important ways that organizations such as the Nigerian Medical Association and the Nigerian Association of Resident Doctors protect doctors is through advocacy. These organizations advocate for better working conditions for doctors, including better pay, safer working environments, and better access to medical supplies. Additionally, these organizations work to ensure that the rights of doctors are protected under the law and that any violations of those rights are investigated and addressed.

Aside from advocacy, another way that organizations protect doctors is through education and training. For example, the Nigerian Medical Association provides continuing medical education courses to its members, which can help them stay up to date on the latest developments in medicine and health policy. Additionally, the organization offers training on ethical issues, such as how to respond to allegations of misconduct or how to deal with conflicts of interest.

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<sup>34</sup> M.T. Ghani, (n 33)

<sup>35</sup> *Ibid*

<sup>36</sup> CFRN 1999, ss. 33-45; the African Charter on Human and Peoples' Rights, The Constitutive Act of the African Union, 2000

<sup>37</sup> CFRN 1999, Chapter 4

Also, Patients in Nigeria have several rights under the law. These rights are protected by a variety of laws, including the National Health Act, the Medical and Dental Practitioners Act<sup>38</sup>, and the Nigerian Constitution.<sup>39</sup> Some of the key rights of patients include the right to access healthcare, the right to informed consent, the right to privacy, and the right to confidentiality. In addition, patients have the right to file complaints against healthcare providers who have violated their rights.

#### **4.2 Challenges Bedeviling Protection of Doctors' Rights in Nigeria**

There are several challenges that make it difficult to protect doctors' rights in Nigeria. One of the biggest challenges is the lack of resources. For example, the National Health Act mandates that every state government should provide free healthcare to all citizens<sup>40</sup>, but many states do not have the resources to do so. This can lead to overcrowded hospitals, long wait times, and inadequate care. In addition, there is a lack of regulation of private hospitals, which can lead to unethical practices and a lack of accountability.

Firstly, the major challenge in protecting doctors' rights in Nigeria is the lack of awareness of these rights. Many doctors and patients are not aware of their rights under the law, and there is a lack of information and education about these rights. This can lead to violations of rights going unreported and unresolved. In addition, there is a lack of enforcement of the laws that protect doctors' rights, which means that even when a violation is reported, there may be no consequences for the offending party. Another challenge with protecting doctors' rights in Nigeria is the issue of corruption. In some cases, doctors have been forced to bribe hospital administrators or other healthcare officials to get access to needed resources, such as medical supplies or equipment. This can lead to a lack of quality care for patients and can have a negative impact on the overall health system. In addition, there have been cases of doctors being extorted by hospital administrators or other officials who demand payment for services that are supposed to be provided free of charge.

Despite the challenges, there are some prospects for improving the protection of doctors' rights in Nigeria. One positive development is the increasing use of technology to improve access to information and resources. For example, the use of telemedicine is becoming more common, which allows doctors to consult with other healthcare professionals and access information without having to leave their practice. Additionally, the use of social media and other online platforms is helping to raise awareness of doctors' rights and how to protect them.

#### **5.0 Conclusion**

As established above, there abounds several ways that doctors are protected by law in Nigeria. The Constitution of Nigeria, 1999 by virtue of sections 33-36 guarantees the right to life, dignity, and personal liberty for all citizens, including doctors. Additionally, the Constitution prohibits discrimination based on occupation, which includes doctors. Furthermore, the Drugs and Cosmetics Act protects doctors from liability if they follow the manufacturer's instructions when administering drugs.

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<sup>38</sup> The Medical and Dental Practitioners Act Cap M 8 Laws of the Federation of Nigeria, 2004

<sup>39</sup> CFRN 1999, Ss. 33-46

<sup>40</sup> National Health Act 2014 S. 3(1)



Similarly, the Medical and Dental Practitioners Act protects doctors from being held liable for acts that are beyond their control, such as a patient's non-compliance with treatment. Also, the Criminal Code Act provides for penalties for crimes such as assault and battery, which may be committed against doctors. Finally, the National Human Rights Commission Act provides for the investigation of violations of human rights, including those committed against doctors. Doctors in Nigeria should leverage on these legal instruments and ensure the protection of their rights to life. Also, Doctors and other healthcare providers must endeavour not to sacrifice ethics and care on the altar of financial gain. The era of greater accountability in medical practice and patient rights has come to stay. It is expected that our courts and legislators will adapt to this shift from protectionism. Medical doctors and healthcare providers will do well to align their practice to suit this emerging trend.

## **6.0 Recommendations**

There are several recommendations that could be made to improve the rule of law and medical practice in Nigeria and to protect doctors' rights. First, the Drugs and Cosmetics Act could be amended to include a provision on doctor-patient confidentiality. Second, the Act could be amended to provide legal protections for doctors who are harassed or bullied while on duty. Third, the Act could be amended to provide for compensation for doctors who are victims of violence or other crimes while on duty. Finally, more resources could be allocated to the NAFDAC to help them better enforce the Act.