

ADDRESS DELIVERED BY COMRADE NURSE ABDRAFIU ALANI ADENIJI, NATIONAL PRESIDENT NATIONAL ASSOCIATION OF NIGERIA NURSES AND MIDWIVES (NANNM) ON THE OCCASION OF THE COMMEMORATIVE CEREMONY OF THE INTERNATIONAL NURSES' DAY AND INTERNATIONAL DAY OF THE MIDWIFE ON 11TH MAY, 2018 AT NAF CONFERENCE CENTRE, ABUJA, NIGERIA.

Protocols

It is with great pleasure that I welcome you all from the length and breadth of the country to Abuja, the Federal Capital Territory, on the occasion of this year's commemoration of the International Nurses Day with the theme; **"Nurses A voice to lead: Health is a human right"** and International Day of the Midwife with the theme; **"Midwives: leading with quality care"**. The International Council of Nurses started commemorating this day since 1965. The annual celebration acknowledges the contributions nurses make to societies around the globe, as well as observing the birthday of one of the world's most famous nurses, Florence Nightingale, born in Italy on May 12, 1820. The nurses' week is also about honoring the unmatched dedication and service of all nurses and ensuring that the attention of government and policy makers at all levels is drawn to issues that matter most to nurses in their respective countries.

I therefore want to congratulate Nigerian nurses and midwives indeed across the globe on this year's event. I want to also salute our courage and commitment for our unique, selfless and unparalleled contributions to the health sector despite the magnitude of the challenges we are being confronted with. Like Bill Gates noted during his visit to our country that Nigeria is one of the worst places to give birth, I dare add that Nigeria is one of the worst places to practice as a nurse or midwives. This year's event is historic because 2018 marks the 40th anniversary of the famous Alma Ata declaration on health in 1978 which expressed the need for urgent action by governments, all health and development workers and indeed the global community to protect and promote the health of all people. It is however not encouraging that 40 years later governments and people still need to be reminded and sometimes coerced to see health as something that deserves utmost attention. During this period, the Nigerian health indices started nose-diving, groaning and suffering under bad management.

Forty years after the Alma Ata declaration, it is imperative that we scrutinize and x-ray our health system in Nigeria because 40 is a landmark age in a person's life and in order not to be guilty of the maxim "a fool at forty". The pertinent questions to be asked about the healthcare sector in Nigeria remain, one, "have we achieved anything in regards to the Alma Ata declaration?" Two "is there anything worth celebrating as achievement in terms of protecting and promoting the people's health"? With a ranking that dropped from 4th in commonwealth nations to that of 187 out 190 health systems in the world, we need no prompt to recognize that Nigeria's healthcare system is lagging behind and the reasons are not far-fetched from mismanagement, insecurity and inattention to the plight of nurses and other health workers. Health workers most especially nurses have not been receiving commensurate attention from the government and their welfare is being neglected. Aside this, I bring god tidings and wish to congratulate all nurses and midwives in Nigeria for the birth of the most populous professional association cum trade union that clocks 40 years in 2018.

Back to the themes for this year's celebration, "Nurses a voice to lead: Health is a human right", the International Council of Nurses (ICN) to which NANNM is an affiliate has expressed the belief that health is a human right and is at the forefront of advocating for access to health noting that nurses are the key to delivering it. All over the world, there are individuals and communities who are suffering from illness due to a lack of accessible and affordable health care. We however must also remember that the right to health applies to nurses as well! We know that improved quality and safety for patients depends on positive working environments for staff. That means the right to a safe working environment, adequate remuneration, and access to resources, and education. We must add to this the right to be heard and have a voice in decision making and policy development implementation! For nurses and midwives, Health is a Human Right means that all humans have the right to access affordable, safe and quality health care at a time when they need it most. And there are nurses and midwives working in everyday health care settings and in positions of influence and decision making that are doing this right now. Governments must continue to empower them as the form the foundation of a truly functional health system. The theme for this year's international Day of the Midwife is "Midwives leading the way with quality care" resonates with the first of ICM's three strategic directions viz quality, equity, and leadership. This theme is significant as it highlights the vital

role that midwives play not only in ensuring women and their newborns navigate pregnancy and childbirth safely, but also receive respectful and well-resourced maternity care that can create a lifetime of good health and wellbeing beyond the childbirth continuum. The quality of a midwife's care is of paramount importance. Midwives who are educated, trained, licensed, and regulated to ICM standards work beyond the parameters of just one situation, one setting, one community or one country: they are able to lead the way towards improved maternal and newborn health outcomes locally, nationally and globally. As nurses and midwives, we know that leading with quality care means providing evidence-based and people-centred reproductive health services and this is a privilege that will gladly bear despite the numerous challenges we face.

Central to the human right nature of health is the achievement of Universal Health Coverage which encompasses not only availability and accessibility but also affordable quality health care services. Nurses and midwives have once again been proven to be indispensable in this regards. This is evidenced by the assertion of the Director General of the World Health Organization, Dr. Tedros Adhanom Ghebreyesus, that achieving Universal Health Coverage and Sustainable Development Goals (SDG) will remain a mirage if the nursing and midwifery workforce are not brought back into the midstream of health care services, policy formulation and execution. The International Council of Midwives {ICM} have noted that if adequately empowered, the training and services of midwives are enough to provide 70% needed health care services to the women of child bearing age, ante natal, natal, post-natal and childhood care. It is not only enough for healthcare services to be available, it is of paramount importance also that the services being provided are of maximum quality. This is why the National Association of Nigeria Nurses and Midwives {NANNM} is calling on the government, professionals and indeed all stakeholders to join us in the fight against quackery which is bedeviling our nation. The menace of quackery portends great danger to our health care system which is deadlier than effects of all kinds of viral hemorrhagic fever combined. This fight against quackery should not be left for the professionals alone but all stakeholders and indeed the entire society must join hands with the practitioners to combat it so that we can be rest assured that only quality health care services are obtainable in our health care system. All hands must be on deck like it was done when we fought the scourge of Ebola disease and Lassa fever. The process of health facility classification,

task sharing, shifting must take notice of professional ethics, standards of practices, professional jurisdiction and safety of life.

Another danger for our health care system is the recent clamour in certain quarters for privatization of certain services in the health sector. Let me be quick to point out that the proponents of this idea are clamouring for such for certain selfish and parochial interests. The implementation of the PPP initiative in Nigeria has been maneuvered to be a means of putting the public wealth of the majority into the private pockets of the few elites. A PPP arrangement that does not ensure better accessibility, improved quality and most importantly affordability is useless. If the cost of treating malaria under a PPP arrangement is not cheaper than what is obtainable in the public hospital, then the goal of PPP has failed. NANNM joins other stakeholders to condemn such move which is targeted at further impoverishing the citizenry under the guise of providing health care services. We must take a cue from the present state of the power sector in Nigeria.

Let me quickly point out another challenge that is making the upholding the human right to health difficult, the worsening security situation in Nigeria on a daily basis. The Nigerian health care delivery system have been affected by a rise in the experience of terrorism starting from militancy in the Niger Delta, Boko Haram in north, herdsmen/farmers clash all resulting to wanton killings and destruction. The situation is being made complex by the dimension of abduction of health workers in the hospitals, community health care centres and in the communities. This has created fear, anxiety and apprehension in the mind of the health professionals resulting a drastic reduction in their optimal level of functioning. This decreases accessibility to health care facilities, professional and quality health care services thereby heightening the risk of maternal and infant morbidity and mortality among our people. Let me use this medium to sound a note of warning to militants and others in armed struggle that they should desist because their struggles are not worth the lives of innocent Nigerians and further destruction of our health system. Our political elites should also be warned about their insatiable quest for power as their personal interests should not override the public interest of access to health as a human right.

On the ongoing JOHESU strike, it is a pity that this year's nurses' and midwives' day celebrations are taking place when all the federal health institutions in Nigeria have been pushed to the wall to down tool and the health workers in the state and local government settings have been constrained to join them due to the failure of the government to do the needful even after 3 weeks. Let me quickly point out that this present strike action became inevitable as a result of the government's insensitive disposition. It is most unfortunate that while other countries are counting their gains and achievements towards attaining universal health coverage, what the federal ministry of health in Nigeria is counting are the losses occasioned by the inevitable though very much avoidable strike. No patriotic Nigerian will visit any of our health institutions and observe their states today without shedding tears for our healthcare system. NANNM has a key stakeholder aligns with the struggle which is for justice and equity and NOT equality and advise the federal government to accede to the requests of the health workers without any further delay. The government and their representatives need to learn from a simple life principle that without justice, there cannot be peace and without peace, there cannot be growth and development.

We also want to condemn in the strongest of terms the unproductive approach being employed so far by the ministry of health in handling this crisis. Rather than simply implement agreements entered into willfully with JOHESU and obey court orders, the federal ministry of health has chosen to employ draconian measures targeted at frustrating and humiliating our members into jettisoning this just struggle. Such atrocious measures include churning out obnoxious circulars, intimidating our members with law enforcement agencies and peddling half-truths and pure falsehoods to blackmail us. The latest is the withholding of the April salaries of members who have worked dutifully until the early hours of the 18th day of the month before they were compelled to down tool as a result of the insensitive attitude of the government. The illegal withholding of legitimate salary is not known to the Laws of the Federal Republic of Nigeria {LFN}, as only an illegal strike attract implementation of CAP 432. Besides this, all employees that have worked for more than half of a month deserve their payment as enshrined in civil service regulations. We are not unaware that some people are self-promoted to management cadre during crises but the reality is that their punishment is they were not even paid for the period of time they worked in disobedience to their professional association directives. The fact

is that these people are not recognized as top management staffs and are not usually involved in policy formulation except during crises of this nature. I pity emergency managers that will be reverted to their positions after the strike. Let it be made known loud and clear to the perpetrators of these evil machinations that their strategies have failed right from the point of conception. JOHESU members, having exercised due diligence and patience in the prosecution of this struggle, are resolute and determined to see this struggle to a logical conclusion. What we demand for is justice, fairness and equity, these are ideals we strongly believe in and if need be they are ideals for which we are prepared to die. Aluta Continua!!! Victoria Ascerta!!! We must drive home the point that until the philosophy that holds one race, creed, colour and indeed profession superior and holds another inferior is finally discredited and totally abandoned, the end result is war. **The apartheid in the health sector must end now.**

As a corporate citizen however, the National Association of Nigeria Nurses and Midwives {NANNM} will want to advise the government to look inwards and begin to take urgent steps that will restore the glory of our health sector. The Nigerian health sector needs to retrace her steps to identify the cause of the disharmony in the sector with a view to find lasting solutions. To start with, there is need for the government to declare a state of emergency in the health sector and call for an encompassing dialogue. It should be noted that the government have set up various committees to look into the health sector but with no visible solution in sight. We hereby call on the government to fast track the implementation of the 2008 Oronsanye job evaluation committee and the 2014 Yayale Ahmed presidential committee on disharmony in the public health sector.

Finally, there is no gainsaying that nurses and midwives are crucial to the attainment of universal health coverage, sustainable development goals and overall development of their nation's economy. According to the immediate past president of ICN, Judith Shamian, "the wealth of our nations depends on the health of our populations, and the health of our populations depends on nursing". Countries with effective and functional healthcare systems have only learnt to treat their nurses well. It is high time the Nigerian government borrowed leaf from them. We must learn how to treat nurses right and accord them the necessary respect and treatment they deserve otherwise Nigeria will only continue to train nurses for countries that

value them to enjoy. On this note, the association {NANNM} is calling on the government to hastily attend to the following demands of nurses;

1. Urgent gazette of the unified scheme of service with the expectation that subsequent upon that, proper placement will be done for professional nurses and midwives like their counterparts.
2. Mass employment of nurses: there is now an urgent need for the recruitment of more nurses and midwives into the public service, this will reduce work burden and burnouts that have consistently become a plague to nurses and midwives due to shortage of this skilled healthcare professionals in government healthcare facilities at all levels. This chronic shortage of manpower has caused a situation where the remaining few nurses are being overworked and stretched almost beyond their elastic limit. Under the present working conditions, productivity is affected and efficient service delivery is hindered. We have also noted the toll effect of the present service conditions on the health of our members who are fast becoming victims of ill health and untimely deaths.
3. Employment of nurse interns: Internship is a prerequisite for professional development, capacity building and professional competency for graduates of nursing sciences. We call on the government to ensure that all health institutions to employ nurse interns. The Association wishes to sound a note of caution to Medical Directors and Chief Medical Directors who are hiding under the guise of "replacement of interns" thereby denying nurse interns the opportunity of undergoing the internship programme as approved by the National Council on Establishment {NCE}, adopted and accepted by the National Council on Health {NCH} and upheld by the Federal Ministry of Health {FMOH}. We advise these lot to refrain from any action or inaction that will undermine the full implementation of the internship programme for nurses.
4. Enhancement of the entry point for graduate nurses: we wish to point out that nurses are being disenfranchised at their entry points into the civil service when compared with other health professional. In line with the IAP award of 1981 which was affirmed by the NICN in 2012 and 2014, nursing has been designated a profession *sui generis* and rated to be at par with pharmacy and medical laboratory science, however, graduates of nursing science are employed on CONHESS 7 while those of pharmacy and medical

laboratory science are employed on CONHESS 9. This injustice must stop. Permit me to also use this opportunity to note the ugly experience of MDAs and parastatal agencies churning out advertisements for nurses on ridiculous entry points such as CONHESS 6 and 7. It is pathetic to observe that at this age and time, some chief executives will be ignorant of the fact that nursing training is being offered in the universities for the period of seven {7} years. This is sheer demonstration of crass ignorance and administrative incompetence. The Association strongly frowns at this and notes that such CEOs and whoever in their establishment responsible for such obnoxious advertisements are not fit to remain in their offices. We urge the government and other stakeholders to redress this anomaly as the Association will not leave any stone unturned in fighting this injustice.

5. Adequate remuneration and motivation of nurses: the deprivation of our members on CONHESS 7 and 8 teaching allowances, deprivation of nurses in primary health care allowances are both contributing to demotivation of willing and dedicated nurses and midwives. Nurses on NYSC scheme are not been treated like professionals in the manner with which they are being remunerated. This also requires urgent attention as it also worsens the brain drain of nurses being experienced by the country. Dr. Mahler, former DG of W.H.O notes that the training and recruitment of health workers is not enough but motivating, and retention of health workers is paramount at attaining the health goals worldwide.

Before I conclude, let me use this moment to congratulate in advance our students who will be concluding their final qualifying examination of the nursing and midwifery council of Nigeria. I wish them the best of luck and Godspeed in their future endeavours.

In concluding this address, I wish to appreciate our partners, sponsors in particular all executives and members including the education committee of the association who worked tirelessly to ensure the success of this event.

Long Live Nigerian Nurses!!!

Long Live Nursing Profession!!!

Long Live Federal Republic of Nigeria!!!

Thank you and God bless.