

## **STRENGTHENING MEDICAL EMERGENCY SERVICES IN NIGERIA: THE NEED FOR REFORMS**

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### **Abstract**

*The life expectancy of any Nation is somewhat tied to the Nation's ability to respond to medical emergencies. This article critically examines the urgent need for reforms to strengthen medical emergency services in Nigeria among other contributions. The paper explores the preparedness of the Nigerian system, both in terms of infrastructure and institutions, to respond to medical emergencies, revealing gaps that hinder effective interventions. The paper points out key components of an effective emergency response system. Furthermore, the article addresses various barriers impeding progress in Nigeria, such as inadequate legislation, poor funding among others. It argues for a rights-based approach to emergency care and proposes strategies for improvement, including legislative overhauls, policy development, and other strategies. The conclusion emphasizes the imperative of coordinated legal, institutional, and social efforts to transform Nigeria's medical emergency services into a robust and responsive system capable of meeting the nation's health needs.*

**Keywords:** Emergency services, Medical emergencies, Fundamental Human rights, Rapid response

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## 1. INTRODUCTION

Preservation of life is crucial to the continuous existence of the human race. Consequently, progressive societies put in measures that ensure that life being sacred, must be preserved regardless of the attendant costs. Conversely, issues that cut short human existence occasionally arise as emergencies, giving the individual involved and persons around, little or no time to intervene in saving the life of the individual. Progressive nations in showing the premium attached to life, show a great understanding of the need to preserve life even under serious constraints. These nations create systems that ensure that individuals who unfortunately fall prey to life-threatening emergencies are well attended to and given a chance to survive. From responsive ambulance services to effective emergency care units, there are obligations on the service providers, security agencies and even the citizenry to assist individuals beleaguered by some medical emergency, in providing the ebbing human life with a chance to survive.

Sadly, Nigeria and most developing countries have an abysmal response to medical emergencies, increasing the chances of death among its citizens.<sup>1</sup> Most citizens are yet to understand that an ambulance is different from a hearse because most ambulance service providers use the said ambulance as a hearse. Despite the campaign for the initial treatment of gunshot

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<sup>1</sup> On the 27<sup>th</sup> day of April 2025, the researcher and several Lawyers were returning from the NBA Section on Legal Practice (SLP) Conference, which took place in Jos, when one of the vehicles in the convoy was pushed out of the road by a trailer. The vehicle (a Coaster Bus) was badly damaged, with occupants sustaining varying degrees of injuries. It took the efforts of colleagues, passers-by and officials of the Federal Road Safety Corps who used axes and other instruments to free one of the occupants of the vehicle from the wreckage. His bones were broken in several places because of the impact of the crash. A vehicle was commandeered to carry the badly injured lawyer to the closest hospital, which was some distance from the crash site. The first aid at the hospital (General Hospital Gwantu, Sanga Local Government Area, Kaduna State) was abysmal. The Ambulances at the hospital were all broken down with deflated tyres. The medical personnel at the hospital simply dressed the wound, while a commercial vehicle was arranged to drive back the badly injured Lawyer to a hospital in Jos for more effective treatment.

victims without a police report, hospitals still reject gunshot victims from initial treatment until police clearance is obtained.<sup>2</sup>

## **2. IMPORTANCE OF EFFICIENT MEDICAL EMERGENCY SERVICES**

A healthy society is the foundation for economic progress, social stability, and overall national development. It reflects the well-being of individuals and communities, ensuring that people can live fulfilling lives and contribute meaningfully to their environment. On the other hand, efficient medical emergency services (EMS) are a key cornerstone of any robust healthcare system. Medical emergency services provide rapid and specialised care during critical moments, giving the victim a chance to survive and often making the difference between life and death. Efficient medical emergency services are essential for safeguarding lives, reducing health disparities, and enhancing public confidence in healthcare systems.<sup>3</sup>

The critical nature of medical emergency services makes their provision indispensable. Several emergencies, such as heart attacks, strokes, or other severe injuries, require immediate medical attention, and an efficient medical emergency service is poised to save lives in critical situations.<sup>4</sup> A well-organised medical emergency service ensures timely response, increasing survival rates, minimising complications and improving

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<sup>2</sup> In September 2023, the Maitama District Hospital refused to treat a lady, Greatness Olorunfemi, who was pushed out from a moving vehicle until a police report was produced. The lady subsequently bled to death. See O Dania “Hospital rejection sending many to early grave despite law” <[Hospital rejection sending many to early grave despite law \(punchng.com\)](#)> accessed 7 January 2025.

<sup>3</sup> “Emergency Care Saves Lives” <[Emergency care saves lives](#)> accessed 7 January 2025.

<sup>4</sup> *Ibid.*

outcomes in trauma cases.<sup>5</sup> For instance, in cases of cardiac arrest, every minute of delay reduces survival chances by 7-10%.<sup>6</sup>

An efficient medical emergency service also assists in reducing disability and long-term complications.<sup>7</sup> For example, early medical interventions, such as administering clot-busting drugs for stroke patients, can significantly improve recovery outcomes and quality of life.<sup>8</sup>

Furthermore, an efficient, nation-wide medical emergency system plays a critical role in managing large-scale emergencies such as natural disasters, pandemics, enhancing public health preparedness, ensuring efficient resource allocation, coordinated response, and timely medical care, and reducing the overall impact on public health systems.<sup>9</sup>

Additionally, an efficient, nationwide medical emergency system helps bridge the healthcare gap between urban and rural healthcare services.<sup>10</sup> An inefficient but existing nation-wide medical emergency system concentrates its efforts on urban areas, or the privileged environment, leaving the less privileged susceptible to the vagaries of the rough environment.<sup>11</sup> Sadly, the privileged may require medical emergency attention when out of the privileged areas. By providing rapid response

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<sup>5</sup> EN Ekwonwune et.al “Analysis of Emergency Healthcare System model using Integrated Database and Datamining Technique” *Journal of Intelligent Information Management* Vol. 17, No. 5, 2025.

<sup>6</sup> WH Ibrahim “Recent advances and controversies in adult cardiopulmonary resuscitation” <[Recent advances and controversies in adult cardiopulmonary resuscitation - PMC](#)> accessed 6 April 2025.

<sup>7</sup> OC Kobusingye et al., “Emergency Medical Services” in DT Jamison et al. (eds), *Disease Control Priorities in Developing Countries*: (Oxford University Press, New York, 2006), 1261-1280.

<sup>8</sup> *Ibid.*

<sup>9</sup> *Ibid.*

<sup>10</sup> *Ibid.*

<sup>11</sup> *Ibid.*

units, air ambulances in remote areas, other necessary emergency services, and ensuring equitable access to emergency care for all citizens, regardless of their location, the well-being of all citizens are better protected.

Again, efficient emergency services help facilitate early diagnosis and treatment, since in most cases, the first point of contact for patients in critical conditions are the emergency service providers or units, and by providing swift diagnosis and treatment, they play a key role in stabilising patients and ensuring they receive specialised care at appropriate facilities.<sup>12</sup>

Ultimately, quick medical interventions reduce the severity of illnesses and injuries, leading to shorter hospital stays and lower healthcare costs.<sup>13</sup> Thus, by minimising the economic burden of lost productivity due to prolonged recovery or disabilities, efficient medical emergency services support broader economic stability.

The value of a strong, efficient medical emergency service cannot be overstated, being a fundamental pillar of a healthy and resilient society.

### **3. KEY COMPONENTS OF EFFECTIVE EMERGENCY SERVICES**

As earlier on posited, in times of crisis, the effectiveness of emergency services can mean the difference between life and death. In cases of medical emergencies, the ability of emergency response teams to act swiftly and efficiently is crucial. However, effective emergency services do not operate on chance, but they are the result of well-coordinated systems, trained personnel, strategic planning, and modern technology.

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<sup>12</sup> *Ibid.*

<sup>13</sup> *Ibid.*

Effective emergency services rely on several key components that form the backbone of effective emergency services to ensure timely, efficient, and life-saving responses. Some of these components include:

- i. **Skilled medical personnel:** Qualified professionals such as paramedics, emergency medical technicians (EMTs), nurses, and emergency physicians trained to handle a wide range of critical medical situations.<sup>14</sup>
- ii. **Efficient dispatch and communication systems:** Centralized call centres (e.g., 911 or 112) and real-time communication networks to ensure rapid coordination between responders, hospitals, and support services.<sup>15</sup>
- iii. **Rapid response vehicles:** Well-equipped ambulances and mobile medical units stocked with essential life-saving equipment and medications to provide immediate care en-route to hospitals.<sup>16</sup>
- iv. **Triage<sup>17</sup> and on-site medical assessment:** Systematic assessment of patients at the scene to prioritise treatment based on the severity of their condition, ensuring that the most critical cases receive urgent attention.<sup>18</sup>
- v. **Hospital coordination and access:** Strong integration with emergency departments and trauma centres, allowing seamless patient transfer, bed availability updates, and readiness of hospital staff.<sup>19</sup>

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<sup>14</sup> TO Oyedokun et al. "Out of hospital emergency care in Nigeria: A narrative review" *African Journal of Emergency Medicine* Vol. 13, No. 3, 2023.

<sup>15</sup> *Ibid.*

<sup>16</sup> *Ibid.*

<sup>17</sup> Triage is the rapid assessment of sick or injured individuals, such as in the aftermath of an accident or conflict, to prioritise treatment based on the severity of their condition, ensuring that those in the most critical state receive care first. <[TRIAGE definition and meaning | Collins English Dictionary](#)> accessed 9 April 2025.

<sup>18</sup> TO Oyedokun et al. "Out of hospital emergency care in Nigeria: A narrative review" *African Journal of Emergency Medicine* Vol. 13, No. 3, 2023.

<sup>19</sup> *Ibid.*

- vi. Public education and first aid training: Community awareness programs and first responder training for the public, including CPR<sup>20</sup> and use of automated external defibrillators (AEDs), to empower immediate care before professionals arrive.<sup>21</sup>
- vii. Medical equipment and technology: Use of defibrillators, ventilators, portable monitors, and diagnostic tools in the field to stabilize patients before hospital admission.<sup>22</sup>
- viii. Standard operating procedures (SOPs) and protocols: Clear, evidence-based guidelines to ensure consistent, safe, and effective care delivery under pressure.<sup>23</sup>
- ix. Continuous training and quality assurance: Ongoing education, simulations, and performance evaluations to maintain high standards of service and adapt to emerging medical practices and challenges.<sup>24</sup>

#### **4. EFFICIENT MEDICAL EMERGENCY SERVICES AS A LEGAL RIGHT**

Institutional efficiencies are mostly hinged on the legal frameworks that govern their operations, ensuring they function transparently, accountably, and equitably. Recognising medical emergency services as a fundamental human right reinforces the moral and legal obligation to save lives, uphold dignity, and reduce inequities in healthcare. It demands collective action at local, national, and global levels to ensure timely and equitable access for all.

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<sup>20</sup> *Ibid.*

<sup>21</sup> *Ibid.*

<sup>22</sup> “Prehospital emergency care: Operational Standards and resources for ambulance systems” <[https://cdn.who.int/media/docs/default-source/integrated-health-services-\(ihs\)/csy/operational-standards-and-resources.pdf?sfvrsn=503bcdad\\_1](https://cdn.who.int/media/docs/default-source/integrated-health-services-(ihs)/csy/operational-standards-and-resources.pdf?sfvrsn=503bcdad_1)> accessed 10 October 2025.

<sup>23</sup> *Ibid.*

<sup>24</sup> *Ibid.*

Consequently, laws play a critical role in defining the scope, authority, and responsibilities of institutions. It provides the legal framework that governs how these services are structured, delivered, regulated, and improved. Proper legal framework helps define institutional roles and responsibilities, clearly outlining the roles of emergency medical agencies, healthcare providers, ambulance services, and supporting institutions, preventing overlap, confusion, or gaps in response during medical emergencies.<sup>25</sup>

Effective laws help establish standards and protocols, setting national or regional standards for training, certification, and operational protocols for paramedics, emergency medical staff and emergency departments, promoting consistency, quality care, and patient safety.<sup>26</sup>

Efficient legal framework will ensure that only qualified professionals and institutions provide emergency medical services, promulgating licensing and accreditation regulations that help maintain service quality and public trust.<sup>27</sup> An effective legal system ensures proper funding and infrastructure support, ensuring that through budgetary laws and health policies, governments are legally bound to allocate resources for ambulances, emergency departments, medical supplies, and staff salaries, enabling an efficient response system, while private ventures are mandated to make provisions in this regard.<sup>28</sup>

Laws will provide medical professionals the authority to perform life-saving interventions, administer medication, or make urgent decisions in

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<sup>25</sup> S Bello “Enforcing the Right to Emergency Medical Care in Nigeria: A Legal Analysis of Section 20 of the National Health Act, 2014” <[5351066.pdf](#)> 10 October 2025.

<sup>26</sup> *Ibid.*

<sup>27</sup> *Ibid.*

<sup>28</sup> *Ibid.*

the field, sometimes without prior consent when the patient is incapacitated.<sup>29</sup>

An efficient law providing wholistic protection, will mandate integration with broader emergency systems, directing coordination between medical services and other sectors like police, fire services, and disaster management, ensuring a unified response during complex emergencies.<sup>30</sup> Efficient legal framework will provide ethical standards, protecting the rights of patients during emergencies, including the right to emergency care, informed consent (where possible), confidentiality, and non-discriminatory treatment.<sup>31</sup> A proper legal framework will mandate proper documentation, reporting of emergencies, and sharing of medical data that help monitor outcomes, identify service gaps, and improve response strategies.<sup>32</sup>

Efficient laws ensure that emergency medical providers are held accountable for malpractice or negligence, while also offering legal protection to those acting in good faith under emergency conditions.<sup>33</sup>

In essence, the law acts as both a guide and a guardrail, ensuring that medical emergency services are well-structured, legally empowered, ethically sound, and responsive to the needs of society. Without this legal foundation, emergency medical care would be disjointed, inconsistent, and potentially harmful to public health and safety.

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<sup>29</sup> E Avci “Protecting incapacitated Patients’ Rights and best interests” <[Protecting Incapacitated Patients’ Rights and Best Interests - PMC](#)> accessed 10 October 2025.

<sup>30</sup> This situation is readily found in developed countries.

<sup>31</sup> “Why Medical Law Matters: Protecting Patient Rights and Healthcare Providers” <[Catastrophic Injuries: Impact on Victims & Families](#)> accessed 10 October 2025.

<sup>32</sup> This is because data holds an important key to effective service provision, and coordinated sharing of data will ensure better efficiency. *Ibid.*

<sup>33</sup> In Nigeria, several good Samaritans trying to assist persons in need of medical emergencies sometimes get into trouble.

The idea of emergency medical services (EMS) as a legal right revolves around the principle that individuals should have guaranteed access to urgent medical care, regardless of their ability to pay or their status in life.<sup>34</sup> The Universal Declaration of Human Rights<sup>35</sup> and the International Covenant on Economic, Social and Cultural Rights<sup>36</sup> recognise the right to health, which incorporates access to timely and appropriate emergency care as part of the broader right to health.

Most Countries have evolved national legal frameworks explicitly protecting EMS, like the Emergency Medical Treatment and Labor Act (EMTALA) of the United States which mandates that hospitals provide emergency care to anyone needing it, regardless of insurance status or ability to pay,<sup>37</sup> the South African Constitution which guarantees the right to emergency medical treatment,<sup>38</sup> and the Indian Constitution which the

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<sup>34</sup> “Global Comparative Research on Right to Emergency Medical Care” <[https://savelifefoundation.org/emc/EMCReport2023\\_WebVersion.pdf](https://savelifefoundation.org/emc/EMCReport2023_WebVersion.pdf)> accessed 19 April 2025.

<sup>35</sup> Article 25 of the Universal Declaration of Human Rights (UDHR) provides thus “Everyone has the right to a standard of living adequate for the health and well-being of himself and of his family, including food, clothing, housing and medical care and necessary social services, and the right to security in the event of unemployment, sickness, disability, widowhood, old age or other lack of livelihood in circumstances beyond his control.” See “Universal Declaration of Human Rights” <[Universal Declaration of Human Rights | United Nations](#)> accessed 19 April 2025.

<sup>36</sup> Article 12 of the International Covenant on Economic, Social and Cultural Rights provides thus “The States Parties to the present Covenant recognize the right of everyone to the enjoyment of the highest attainable standard of physical and mental health”. See “International Covenant on Economic, Social and Cultural Rights” <[International Covenant on Economic, Social and Cultural Rights | OHCHR](#)> accessed 19 April 2025.

<sup>37</sup> J Zibulewsky “The Emergency Medical Treatment and Active Labour Act (EMTALA); What it is and what it means for physicians” <[The Emergency Medical Treatment and Active Labor Act \(EMTALA\): what it is and what it means for physicians - PMC](#)> accessed 19 April 2025.

<sup>38</sup> Section 27(3) of the South African Constitution provides thus “No one may be refused emergency medical treatment”. See Constitution of the Republic of South Africa, 1996 -

Indian Supreme Court has held that the right to emergency medical care falls under the right to life.<sup>39</sup> Incidentally, Nigeria has through its National Health Act (NHA), 2014 criminalises the refusal to give emergency medical treatment.<sup>40</sup>

The implications of recognising EMS as a legal right are that there is a guaranteed access for all, ensuring that individuals cannot be denied emergency treatment based on financial status and such services are readily available, while providing the right to seek legal remedies when such rights are violated holding medical service providers accountable.

It must be pointed out that the impact of laws becomes more profound and enduring when enshrined in a nation's constitution, the supreme legal document that guides governance. Constitutional provisions help promote the supremacy and enforceability of the system, ensuring that institutional mandates cannot be easily altered or undermined by political interests, creating stability and continuity, even amidst political transitions or regime changes, integrating core values, easily enabling the judiciary to intervene

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Chapter 2: Bill of Rights <[Constitution of the Republic of South Africa, 1996 - Chapter 2: Bill of Rights | South African Government](#)> accessed 19 April 2025.

<sup>39</sup> The Indian Supreme Court in *State of Punjab v. M.S. Chawla* AIR 1997 SC 1225, has interpreted Article 21 which provides thus “No person shall be deprived of his life or personal liberty except according to procedure established by law”, as encapsulating the right to medical care. See “Article 21 in Constitution of India” <[Article 21 in Constitution of India](#)> accessed 19 April 2025.

<sup>40</sup> Section 20 (1) and (2) of the National Health Act provides that; (1) A health care provider, health worker or health establishment shall not refuse a person emergency medical treatment for any reason. (2) A person who contravenes this section commits an offence and is liable on conviction to a fine of N100,000.00 or to imprisonment for a period not exceeding six months or to both. See also NE Emeka “The Legal Framework for Emergency Medical Care In Nigeria: Messiah or Mirage?” <[https://www.researchgate.net/publication/384396474\\_EMEKA\\_The\\_Legal\\_Framework\\_for\\_Emergency\\_Medical\\_Care\\_in\\_Nigeria\\_Messiah\\_or\\_Mirage\\_83\\_THE\\_LEGAL\\_FRAMEWORK\\_FOR\\_EMERGENCY\\_MEDICAL\\_CARE\\_IN\\_NIGERIA\\_MESSIAH\\_OR\\_MIRAGE](https://www.researchgate.net/publication/384396474_EMEKA_The_Legal_Framework_for_Emergency_Medical_Care_in_Nigeria_Messiah_or_Mirage_83_THE_LEGAL_FRAMEWORK_FOR_EMERGENCY_MEDICAL_CARE_IN_NIGERIA_MESSIAH_OR_MIRAGE)> accessed 10 October 2025.

when institutions fail to act within their legal mandates, ensuring corrective measures, and empowering Citizens to demand accountability and participate in governance processes. Principles governing institutions when incorporated into or become an offshoot of a nation's constitution, they gain unparalleled legitimacy and permanence.

Incidentally, like South Africa and India earlier mentioned, under the Nigerian Constitution, the citizens' fundamental right to life is guaranteed by section 33 of the Constitution, while Section 17 (d) of the Constitution, though under Chapter II of the Constitution and not enforceable,<sup>41</sup> mandates the government to ensure that "there are adequate medical and health facilities for all persons". In 2016, Nigeria evolved a policy on emergency medical services with its focus on streamlining emergency services, including trauma pathways, an integrated National Ambulance system, and the use of the toll-free number 112.<sup>42</sup> The policy was enacted to coordinate the efforts of various actors involved in emergency medical services, including government agencies, private sector partners, and international organisations.<sup>43</sup> The National Health Policy, 2016 was also amongst other things enacted to strengthen emergency medical services within Nigeria.<sup>44</sup>

Sadly, even when it can be inferred that efficient medical emergency services are a constitutional requirement, and the Nigerian state has evolved some policy on emergency medical services, baseline medical emergency

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<sup>41</sup> Chapter II of the Constitution of the Federal Republic of Nigeria, 1999 (as amended) specifically provides that

<sup>42</sup> "Policy on Emergency Medical Services (EMS) In Nigeria" <[https://nesgroup.org/download\\_policy\\_drafts/EMS%20Policy%202016\\_1661866073.pdf](https://nesgroup.org/download_policy_drafts/EMS%20Policy%202016_1661866073.pdf)> accessed 19 April 2025.

<sup>43</sup> *Ibid.*

<sup>44</sup> "National Health Policy" <[https://nesgroup.org/download\\_policy\\_drafts/National-Health-Policy-2016-1661874323.pdf](https://nesgroup.org/download_policy_drafts/National-Health-Policy-2016-1661874323.pdf)> accessed 19 April 2025.

services are still non-existent.<sup>45</sup> This brings to fore that Nigeria incidentally is not in want of good laws; the implementation of those laws is the real issue.

It is submitted that even where a constitution provides a foundation for institutional effectiveness, institutions will truly serve the people and advance national development when their operations are governed by a robust legal foundation, with the constitution serving as the ultimate guarantor of their effectiveness, and necessary safeguards and cohesive force set in motion to ensure adherence. As earlier pointed out, it is also further emphasised that emergency medical services, as a fundamental human right, strengthen the moral and legal duty to preserve lives, maintain dignity, and address healthcare disparities.

In sum, the provision of medical emergency services as a fundamental human right emphasises the idea that every individual, regardless of their socio-economic status, race, nationality, or other circumstances, has the inherent right to access life-saving medical care during emergencies.

## **5. PREPAREDNESS OF THE NIGERIAN CLIME TO MEDICAL EMERGENCIES**

Nigeria, like many developing nations, grapples with challenges of delivering timely and efficient medical emergency services. Medical emergencies that are borne out of injuries or illnesses that are acute, posing an immediate risk to an individual's life or long-term health, are such that the patient must be attended to immediately.<sup>46</sup> These can range from continuous bleeding, breathing difficulties, fits and/or epileptic seizures,

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<sup>45</sup> JS Ehiozua "Nigerian Healthcare and Its Non-existent Medical Emergency Services" <[Nigerian Healthcare and Its Non-existent Medical Emergency Services – THISDAYLIVE](#)> accessed 19 April 2025.

<sup>46</sup> RPJC Ramanayake, S Ranasingha and S Lakmini "Management of emergencies in general practice: Role of general practitioners" <[Management of Emergencies in General Practice: Role of General Practitioners - PMC \(nih.gov\)](#)> accessed 7 January 2025.

cardiac arrests, strokes, loss of consciousness, change in mental status, abdominal pain, head or spine injuries and trauma, acute attacks of asthma, myocardial infarction, anaphylactic shock, hypoglycaemic coma, convulsions, and the like.<sup>47</sup>

It takes a functional system that has pruned its mechanism over the years, holding accountable any infractions to the rules, and creating awareness about the patient's expectations, to elicit an efficient timely response to medical emergencies.

Sadly, the state of Nigeria's response to medical emergencies is abysmal. There is a dearth of paramedic services or practitioners, who provide professional emergency health care services before or in the process of getting the patient to a hospital.<sup>48</sup> Medically untrained relatives or bystanders assist patients who need emergency medical care, mostly exacerbating the patient's condition.<sup>49</sup> Most hospitals in Nigeria just have ambulance drivers,<sup>50</sup> and their services are only activated after the patient has accessed the hospital facility because emergency rescue phone numbers may exist but are not readily operational<sup>51</sup> and their existence or otherwise, differ from state to state.<sup>52</sup>

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<sup>47</sup> *Ibid.*

<sup>48</sup> F Olorokor "Every state in Nigeria deserves paramedics- Neurological surgeon" <[Every state in Nigeria deserves paramedics - Neurological surgeon - Punch Newspapers \(punchng.com\)](#)> accessed 8 January 2025. See also "Paramedic" <[Paramedic Definition & Meaning - Merriam-Webster](#)> accessed 8 January 2025.

<sup>49</sup> V Adepoju "Nigeria's worrisome emergency response and the need to look beyond infectious diseases" <[Nigeria's worrisome emergency response and the need to look beyond infectious diseases - healthnews.ng](#)> accessed 8 January 2025.

<sup>50</sup> F Olorokor "Every state in Nigeria deserves paramedics- Neurological surgeon" <[Every state in Nigeria deserves paramedics - Neurological surgeon - Punch Newspapers \(punchng.com\)](#)> accessed 8 January 2024.

<sup>51</sup> U Nwagboso "Calling 112: Is Nigeria ready for an emergency response" <[Calling 112: Is Nigeria ready for an Emergency Response? - Daily Trust](#)> accessed 8 January 2025.

<sup>52</sup> *Ibid.*

Remarkably, Nigeria has an impressive emergency response to outbreaks of diseases but sadly, victims of road accidents and other medical emergencies are at the mercy of “good Samaritans” to have a chance of survival.<sup>53</sup> In fact, the average Nigerian is oblivious of the workings of an ambulance, believing that ambulances are hearses used in transporting the dead.<sup>54</sup> The abysmal nature of the emergency medical services in Nigeria, is further shown by the insufficient emergency care units in the average hospitals,<sup>55</sup> a dearth of trained first aid providers, insufficient Emergency Care Units in Hospitals,<sup>56</sup> bureaucratic hospital procedures,<sup>57</sup> attitudinal character of hospital staff who are no longer moved by human frailty as a result of long exposure to the hospital environments.<sup>58</sup>

The sad reality as was aptly stated, is that “we are all one step away from a medical or other health emergency, so every functional health system needs a functional emergency medical service with the right personnel and supporting infrastructure to meet the needs of patients at their point of need”.<sup>59</sup>

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<sup>53</sup> V Adepoju “Nigeria’s worrisome emergency response and the need to look beyond infectious diseases” <[Nigeria's worrisome emergency response and the need to look beyond infectious diseases - healthnews.ng](#)> accessed 8 January 2025.

<sup>54</sup> The researcher while growing up, thought that ambulances were for dead people until he lived in the United Kingdom. See also, DC Selorm “The Ambulance is not a Hearse” <[The Ambulance Is Not A Hearse \(modernghana.com\)](#)> accessed 8 January 2025.

<sup>55</sup> TO Oyedokun et al. “Out of hospital emergency care in Nigeria: A narrative review” *African Journal of Emergency Medicine* Vol. 13, No. 3, 2023. See also, “A Usoro et al. “Perspectives on the current state of Nigeria’s emergency care system among participants of an emergency medicine symposium: a qualitative appraisal” <[Perspectives on the current state of Nigeria’s emergency care system among participants of an emergency medicine symposium: a qualitative appraisal | BMJ Open](#)> accessed 8 January 2025.

<sup>56</sup> *Ibid.*

<sup>57</sup> *Ibid.*

<sup>58</sup> *Ibid.*

<sup>59</sup> U Nwagboso “Calling 112: Is Nigeria ready for an emergency response” <[Calling 112: Is Nigeria ready for an Emergency Response? - Daily Trust](#)> accessed 8 January 2025.

On the other hand, from the legal angle, the current Nigerian legal landscape has not risen to drive responsiveness, coordination, and effectiveness of medical emergency services across the country, in the face of growing health concerns and population demands, using the law as a catalyst. Thus, in addition to the inadequate infrastructure and limited resources, inconsistencies in protocols due to a dearth of an efficient regulatory framework exacerbate the volatile emergency structure, leaving the nation with a patchwork of agencies, including the National Ambulance Service, state-level emergency medical services, and various hospital-based emergency departments, which are very deficient.<sup>60</sup>

In sum, Nigeria's medical emergency services, in spite of the blessings of a vibrant, diverse and dynamic population, weighed down by the inability to navigate the complexities of the healthcare system, coupled with various socio-economic factors, are plagued with several factors that hinder the swift and efficient delivery of emergency medical services. Some of these factors include:

- i. Infrastructure deficiency: from the shortage of well-equipped healthcare facilities to insufficient road networks that impede the quick transport of medical personnel and resources to emergency sites, and all other facilities that make modern life easier, the Nigerian state still grapples with the basics of life, making it difficult for a facet of essential human services to thrive, exacerbating the struggle to provide immediate and quality care.<sup>61</sup>

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<sup>60</sup> SA Abdussalaam et al "Institutional Framework for Disaster Risk Management in Nigeria; Need for a Paradigm Shift" *Journal of Applied Sciences and Environmental Management* Vol. 28 No. 8, 2024.

<sup>61</sup> TO Oyedokun et al. "Out of hospital emergency care in Nigeria: A narrative review" *African Journal of Emergency Medicine* Vol. 13, No. 3, 2023. See also, "A Usoro et al. "Perspectives on the current state of Nigeria's emergency care system among participants of an emergency medicine symposium: a qualitative appraisal" <[Perspectives on the current state of Nigeria's emergency care system among participants of an emergency medicine symposium: a qualitative appraisal | BMJ Open](#)> accessed 8 January 2025.

- ii. Limited resources: the scarcity of resources, ranging from an insufficient number of ambulances lacking in essential life-saving equipment, medical supplies, and trained personnel, poses a significant hurdle, amplifying response times and compromising the quality of care delivered during critical moments.<sup>62</sup>
- iii. Communication barriers: ineffective communication systems hinder the coordination of emergency response efforts.<sup>63</sup> Poor telecommunication infrastructure, coupled with a lack of standardised communication protocols, results in delays and misunderstandings between emergency personnel, dispatch centres, and healthcare facilities, which is further exacerbated by the absence of centralised emergency service call centres.<sup>64</sup>
- iv. Inadequate training and education: emergency response personnel require specialised training to handle diverse medical situations effectively.<sup>65</sup> The shortage of standardised training programs and ongoing education opportunities for these professionals leaves a yawning gap contributing to the suboptimal performance during emergencies.
- v. Public awareness and education: a lack of awareness and education among the general public regarding emergency response procedures is a significant challenge.<sup>66</sup> Many individuals may not know how to

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<sup>62</sup> *Ibid.*

<sup>63</sup> *Ibid.*

<sup>64</sup> *Ibid.*

<sup>65</sup> Very few institutions have trained first aiders. In 2016, a legal practitioner complained of severe chest pains while in Court, and there was not a single trained first aider to administer even CPR. The legal practitioner died before he could be rushed to the hospital. "Lawyer slumps, dies in Court" <[Lawyer slumps, dies in court - The Nation Newspaper](#)> accessed 9 January 2025.

<sup>66</sup> TO Oyedokun et al. "Out of hospital emergency care in Nigeria: A narrative review" *African Journal of Emergency Medicine* Vol. 13, No. 3, 2023. See also, "A Usoro et al. "Perspectives on the current state of Nigeria's emergency care system among participants of an emergency medicine symposium: a qualitative appraisal" <[Perspectives on the](#)

react in emergencies or may delay seeking help due to cultural beliefs, fear, or a lack of understanding of the urgency of their situation.<sup>67</sup> The existing abysmal emergency system makes the public rely on neighbours or bystanders for assistance in a medical emergency, being unaware of any public emergency system to call upon.

- vi. Socio-economic factors: socio-economic disparities play a role in the challenges faced by medical emergency response in Nigeria.<sup>68</sup> Poverty, limited access to healthcare, and unequal distribution of resources contribute to the vulnerability of certain populations, making it difficult to ensure equitable and timely emergency care for all.<sup>69</sup>
- vii. Weak policy and legal frameworks: Nigeria lacks an effective comprehensive and enforceable national policy or legal framework specifically dedicated to EMS, resulting in fragmented services and poor coordination.<sup>70</sup> The existing legal frameworks like the 2016 policy on emergency medical services, 2016 National Health Policy, National Health Act 2014, Compulsory Treatment and Care for Victims of Gunshots Act, 2017 are plagued with laxity.<sup>71</sup>
- viii. Security Concerns – the escalating security concerns pose a risk to meaningful emergency service systems especially in accessing certain areas due to conflict or insecurity, limiting their ability to reach individuals in need of urgent medical attention.<sup>72</sup>

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current state of Nigeria's emergency care system among participants of an emergency medicine symposium: a qualitative appraisal | BMJ Open accessed 8 January 2025.

<sup>67</sup> *Ibid.*

<sup>68</sup> *Ibid.*

<sup>69</sup> *Ibid.*

<sup>70</sup> *Ibid.*

<sup>71</sup> UP Okeke, SO Igwe, NM Ilodigwe and UM Okeke “Legal responses to emergency medical services in Africa” Experiences from Nigeria” *Nnamdi Azikiwe University Journal of Private and Property Law* Vol. 1, No. 1 2024.

<sup>72</sup> TO Oyedokun et al. “Out of hospital emergency care in Nigeria: A narrative review” *African Journal of Emergency Medicine* Vol. 13, No. 3, 2023. See also, “A Usoro et al.

The reality is that addressing the challenges of adequate medical emergency response in Nigeria requires a multi-faceted approach. The government, in collaboration with healthcare professionals, community leaders, and the private sector, must work towards improving infrastructure, allocating sufficient resources, enhancing communication systems, providing comprehensive training, and promoting public awareness. Overcoming these challenges is paramount to establishing a robust and responsive medical emergency system that can effectively cater to the diverse needs of Nigeria's population, ensuring that every individual has access to timely and quality emergency healthcare services.

## **6. RECOMMENDATIONS: STRATEGIES FOR IMPROVEMENT**

As previously posited, limited infrastructure, inadequate funding, shortage of trained personnel, and poor coordination among emergency response units continue to hinder the delivery of prompt and efficient care. As Nigeria faces a growing burden of road traffic accidents, infectious diseases, and other medical emergencies, there is an urgent need to strengthen its EMS framework. Developing effective strategies for improvement is essential not only to save lives but also to build a more resilient and equitable healthcare system. This section explores practical and sustainable approaches to enhancing EMS in Nigeria, with a focus on policy reforms, capacity building, infrastructure development, public awareness, and stakeholder collaboration.

To enhance the quality, accessibility, and effectiveness of medical emergency services in Nigeria, a multi-layered approach is required.

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“Perspectives on the current state of Nigeria’s emergency care system among participants of an emergency medicine symposium: a qualitative appraisal” <[Perspectives on the current state of Nigeria’s emergency care system among participants of an emergency medicine symposium: a qualitative appraisal | BMJ Open](#)> accessed 8 January 2025.

Firstly, a National EMS policy and unified legal framework must be established. In developing and implementing a comprehensive national policy on emergency medical services, legislation that defines the structure, roles, funding, and standards for EMS across all states must be enacted and domesticated across the states of the federation. Meanwhile, standardised emergency numbers and protocols must be established nationwide.<sup>73</sup>

Secondly, governments at all levels must increase their funding and investment in emergency medical services. Specific budgetary provisions for EMS infrastructure, equipment, and training must be allocated, while public-private partnerships (PPPs) must be promoted to fund ambulance services, emergency centres, and mobile clinics, also ensuring transparent and accountable disbursement of EMS-related funds.<sup>74</sup>

Again, Emergency Medical Services infrastructure must be built, maintained and upgraded, by establishing and equipping emergency care units in all major hospitals, including rural and semi-urban areas, setting up strategically located trauma centres and ambulance outposts for rapid response, and improving access to reliable power and water supply in healthcare facilities.<sup>75</sup>

Skilled personnel must be developed and trained through the expansion of training programs for paramedics, emergency physicians, nurses, and EMTs, partnering with universities and health institutions to create accredited EMS courses, and the provision of continuous professional

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<sup>73</sup> TO Oyedokun et al. "Out of hospital emergency care in Nigeria: A narrative review" *African Journal of Emergency Medicine* Vol. 13, No. 3, 2023. See also, "A Usoro et al. "Perspectives on the current state of Nigeria's emergency care system among participants of an emergency medicine symposium: a qualitative appraisal" <Perspectives on the current state of Nigeria's emergency care system among participants of an emergency medicine symposium: a qualitative appraisal | *BMJ Open*> accessed 8 January 2025.

<sup>74</sup> *Ibid.*

<sup>75</sup> *Ibid.*

development and simulation-based training.<sup>76</sup> Every institution and building should ensure trained personnels in basic emergency like CPR are within those buildings.<sup>77</sup>

Integrated emergency communication systems must be created through the establishment of a centralised 3-digit nationwide emergency medical services number efficiently linked to trained call handlers and dispatch centres.<sup>78</sup> The communication system should integrate the police service, fire service, Federal Road Safety Corps and medical services for seamless coordination, while digital platforms that track ambulances and monitor response times must be established.<sup>79</sup>

Community engagement and public awareness must be strengthened through the education of citizens on recognising emergencies, calling for help, and administering basic first aid.<sup>80</sup> Good Samaritan laws to protect bystanders who assist in emergencies must be promoted, and law enforcement agencies trained to applaud good Samaritans instead of punishing them, while national awareness campaigns on how to access and use EMS must be pursued.<sup>81</sup>

Road infrastructure and efficient traffic management must be improved, emergency lanes and road conditions must be improved to support ambulance mobility, while traffic regulations are efficiently managed to prioritize ambulances and emergency vehicles.<sup>82</sup>

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<sup>76</sup> *Ibid.*

<sup>77</sup> *Ibid.*

<sup>78</sup> *Ibid.*

<sup>79</sup> *Ibid.*

<sup>80</sup> *Ibid.*

<sup>81</sup> *Ibid.*

<sup>82</sup> Most states within Nigeria are plagued with terrible road management and traffic management leading to incessant traffic chaos demeaning mobility for emergency medical service. See “Policy on Emergency Medical Services (EMS) in Nigeria”

Technology must be deplored and leveraged upon assisting in emergency alerts, reporting, coordination, providing needed support for remote diagnosis, consultation during emergencies and access to electronic health records for quicker patient data access.<sup>83</sup>

Efficient regulatory bodies must be set up to monitor, evaluate and regulate EMS providers to oversee the quality of emergency services and conduct regular audits and public reporting on EMS operations.<sup>84</sup>

Effective collaboration between federal, state, and local governments, as well as NGOs and international partners must be promoted, while robust research on emergency health trends, barriers, and solutions specific to Nigeria's context must be encouraged.

It is submitted that implementing these strategies would not only reduce preventable deaths and injuries but also build public trust in Nigeria's health system.

## **7. CONCLUSION**

Strengthening medical emergency services in Nigeria is not merely a matter of policy aspiration, it is a moral and practical imperative that demands urgent legal reforms. Clear, enforceable laws must be established to define responsibilities, guarantee timely responses, and protect both patients and healthcare providers in emergencies. Importantly, legal frameworks should

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<[https://nesgroup.org/download\\_policy\\_drafts/EMS%20Policy%202016\\_1661866073.pdf](https://nesgroup.org/download_policy_drafts/EMS%20Policy%202016_1661866073.pdf)> accessed 18 April 2025.

<sup>83</sup> TO Oyedokun et al. "Out of hospital emergency care in Nigeria: A narrative review" *African Journal of Emergency Medicine* Vol. 13, No. 3, 2023. See also, "A Usoro et al. "Perspectives on the current state of Nigeria's emergency care system among participants of an emergency medicine symposium: a qualitative appraisal" <[Perspectives on the current state of Nigeria's emergency care system among participants of an emergency medicine symposium: a qualitative appraisal | BMJ Open](#)> accessed 8 January 2025.

<sup>84</sup> *Ibid.*

explicitly recognise emergency medical care as a right, ensuring that access to life-saving services is not left to chance or circumstance.

However, legislation alone cannot drive change. Without consistent and effective implementation, even the most well-crafted laws will remain hollow promises. Governments must invest in emergency response systems, training, and infrastructure to build a robust and sustainable framework. Private entities also have a significant role to play in supporting and complementing public efforts, particularly through partnerships and innovation. Furthermore, international collaboration and aid are crucial to assist countries like Nigeria with limited resources, in developing the capacity to respond to emergencies effectively.

Only through a comprehensive approach, combining legal reform, dedicated investment, public-private collaboration, and global support, can Nigeria create a resilient, equitable, and responsive emergency medical system capable of saving lives and earning the trust of its people. Efficient emergency medical services are not only desirable but a necessity and a human right.