**Welcome Address by the Director General of the Consumer Protection Council, Mr. Babatunde Irukera**

**“Patients’ Bill of Rights: Empowering the Consumer”**

**At the**

**Launch of the Patients’ Bill of Rights**

**Tuesday, 31st July 2018**

**Banquet Hall, State House**

Good morning Your Excellency, the Vice President of the Federal Republic of Nigeria, Honourable Ministers, Distinguished Senators, fellow heads of agencies, distinguished ladies and gentlemen.

As such, today is an important and momentous day for more reasons than one. So, it is with immense pleasure that I welcome you all. First, I start by recalling a conversation His Excellency had with me shortly after President Muhammadu Buhari and he were elected President and Vice President, but before they were sworn in. He said:

*“Tunde, time in this place must count for something. It must change the land and benefit people. Whether sung, or unsung, newsworthy, or not, appreciated, or not, it is important that after this time, no matter how long, the contributions must continue to reverberate in improving lives and society. Indeed, some of the benefits may not be visible during the time, while others may only truly emerge after the time; this is what nation-building is about, and now is the time to build a nation”.*

And when I got this job, he again said to me:

*“Tunde as private lawyers pursuing public interest cases with passion and dedication, we have caused organizations to modify their behaviour or confront their past wrongs, whether it was an inappropriate clinical trial in one corner of the country, or how a business plies its trade in products that result in injury, or in the capital market with how companies raise money from the public; all these were done, case by case, one by one. But now there is an opportunity to more robustly change the entire landscape, to protect consumers, save lives, prevent injury and inculcate fundamental value for people, either in how they are treated, or what they use or eat.*

*This is the transformation that calls for urgent action, and this is the charge upon you as you lead CPC. There is an urgency to protect the rights and dignity of people in this nation, there is an emergent reason to ensure that citizens are lifted up from poverty, there is an unequivocal responsibility to humanize all, and pay particular attention to the most vulnerable. It is what counts most, it is the work of a lifetime, and succeeding is a lifetime achievement, and this is what this administration of President Muhammadu Buhari is about, it is what it campaigned on, it is its most important objective, and the most important legacy it intends to be remembered for.*

*Align with that, ensure you create a legacy of an institution that is a better place, and a nation where the citizens are in a better space”.*

The broad scope of people we have in this hall today underscores exactly what those charges were, and how vital the purpose of this gathering is. It is also the evidence of the broad collaboration and consensus that has resulted in the Patients’ Bill of Rights (PBoR). This is an example of what has become the abiding theme of the CPC in how we engage with other regulators, stakeholders and entities. That theme is “Partnership for Protection”. There is absolutely no better space for this partnership than in the healthcare of our nation, and there is no better place to reinforce it than at the very seat of power under the leadership of the Vice President. The whole idea of needing medical attention, regardless of status, inherently and as a matter of default, connotes vulnerability. As such, anything done to protect those in our society who are vulnerable is truly noble.

I am gratified that His Excellency, the Vice President has graciously agreed to launch this ground-breaking effort to promote Quality, Equality and Dignity in healthcare (QED, *"quod erat demonstrandum"*). It is not fortuitous that he is launching this. As a matter of fact, it is logical because, in many ways, he championed it.

Protecting rights in the healthcare sector is of particular importance, and is a defining feature of how society should, and must operate. The reason is not farfetched. Like I said earlier, needing medical attention is many times the most vulnerable or weakest point for both patient, and many times family. It necessarily connotes desperation, and a combination of these lead to significant impairment in decision making and exposure to abuse and exploitation. How people are treated at that time of need; through that process, including after it, are features in measuring the quality and values of society and attention to our shared humanity.

The PBoR is our boldest step yet in soft infrastructure in healthcare. It is the vital vehicle upon which, even physical infrastructure must ride to truly deliver service. In the absence of a humane, attentive and secure approach by healthcare professionals, we neglect inclusiveness, and in reality, lessen access.

I do not in any way diminish the hard infrastructure gaps and other challenges that exist in the healthcare sector, on the contrary, in recognizing that, what we and our collaborators have done is to develop a mechanism that narrows the access and quality gap regardless, and one that, in complimenting the hard infrastructure, truly delivers a standard that is consistent with our aspirations. Together, we appreciate the fact that the hard infrastructure, without the right attitude and rights protection, will still fail us, and fall short of those aspirations.

Defining, promoting and protecting the rights of consumers is not only for the benefit of consumers, the concept of rights derives from the need to address and enshrine the values of our shared humanity. The basic tenets of consumer rights include value for money, dignity and honesty. As such, we are all consumers one way or the other.

Today, we take a definite step in ensuring peoples’ rights in the healthcare sector are truly respected and protected in part because no one in our country is insulated or immunized from needing medical services. Essentially, our comfort, lives and life expectancy are in part determined by the quality and delivery of healthcare services. Indeed, there are standards, and there are examples of those who operate above those standards, and some who even gave their lives for the standards, such as heroes and heroines like late Dr. Stella Adadevoh and some of her colleagues who have paid the utmost sacrifice in saving the lives of others. Yet, there are many, who unqualified, pass themselves off as professionals, and others, who though qualified do not know, nor live up to applicable standards. This PBoR will assist healthcare professionals and professional associations to identify and eliminate these quacks, and educate those who are qualified, but unaware of their obligations and the rights of their patients.

As in other aspects of our national life, majority of Nigerians are dissatisfied with the quality of care they receive from both private and government facilities or institutions. A 2016 study by PwC revealed that 90 percent of respondents associate health care in Nigeria with low quality, while over 80 percent and over 70 percent respectively, associate it with words like “rude” and “fear”. Conversely, less than 20 percent felt that the health care provided in Nigeria gave value for money, and less than 10 percent felt that it was transparent. The public dissatisfaction with the system does not end with the providers, as only 6 percent of the respondents felt confident that if things were to go wrong with their care, they would be protected by the authorities.[[1]](#footnote-1)

According to the report,

*“The lack of patient protection within the system is perhaps the most significant factor affecting the level of trust in Nigerian healthcare... Stories abound of patients who have had undesired healthcare outcomes or had concerns about the quality of care received in hospitals, but few cases of successful medical malpractice investigations / action have been recorded in the last 5 years.”[[2]](#footnote-2)*

This assessment underscores the importance of what we are doing today. We have an urgent responsibility to reverse this scorecard. We at the CPC recognize that for any meaningful change to occur, patients and their families must become conversant with their rights and responsibilities; and providers must be familiar with their roles and duties to patients. It is in that demand and supply side awareness and education; as well as enforcement, that we can change the sad perception, or narrative, and in the process save lives and build mutual confidence. This is what underpins our **“Demand and Insist Campaign”** to empower consumers in ensuring they are better served.

The rights of patients have always existed in various places - professional ethical codes, or pieces of legislation, such as the Constitution, Chid Rights Act, Freedom of Information Act, National Health Act, and even the Hippocratic Oath. What we have done with the PBoR is really to aggregate all these into one educational material that serves both patients and care providers. In addition, we have articulated the responsibility of patients too, as they take control over the course of their own treatment to the extent supported by law and ethics. For instance, patients have a responsibility to pay their bills and treat care-providers with respect. In order to expect, and ensure compliance to these responsibilities, they need to have full information, including transparent billing, and consent or choice, where applicable.

My work will not be done here, if I do not take the time to thank those who made the PBOR a reality starting with the Consumer Protection Council’s team that worked tirelessly to see it come to life. In particular, I commend the initial responsiveness of the Nigeran Medical Association, the openness and cooperation that led to our strong work with the Pharmaceutical Society of Nigeria, the Pharmacists Council of Nigeria, the Medical and Dental Council of Nigeria, the National Association of Nigeria Nurses And Midwives, the Nursing and Midwifery Council of Nigeria, the Association of Medical Laboratory Scientists of Nigeria and Medical Laboratory Science Council of Nigeria, as an expanded technical team working with CPC to produce these rights, and I will not be fair if I do not mention Prof. Mike Ogirima, then NMA president, who led his team to an early meeting with me, and some of the senior doctors that our country should be proud of, because, at their own cost, they repeatedly, humbly and respectfully visited and engaged till the work was done. I would like to mention by name Dr. Nkem Ene, Dr. David Olayemi, Dr. Jubril Abdullahi, Dr. Micheal Olagbenro, Dr. Henry Ewunonu and Dr. Ben Anyene, who led the technical committee that drafted the PBoR document. I would also like to specially note and thank:

1. Akinlabi Akinwale (Medical Laboratory Science Council of Nigeria),
2. Gregory Uchumo (Medical Laboratory Science Council of Nigeria),
3. Pharm. Okosun Daniel Amamosa (Pharmacists Council of Nigeria),
4. Pharm. Peter Iliya (Pharmacists Council of Nigeria),
5. Pharm. Moji Aizobu (Pharmacists Council of Nigeria),
6. Pharm. Bridget Otote (Pharmaceutical Society of Nigeria) and
7. Pharm. Ellen Eleojo Cassidy (Pharmaceutical Society of Nigeria).

In addition, I would like to appreciate the efforts of Serah Makka and Damilola Onyia of the One Campaign in making this project a reality. I am grateful, and you can all take pride in the work you have done with us.

The Vice President recently noted the tradition of orderly transition from one National Executive Council to another in the NMA, we experienced that here, and thank the current leadership under Dr. Francis Faduyile, for immediately endorsing and adopting this effort.

I must especially thank the Honourable Federal Minster of Health, Prof. Isaac Adewole, who immediately embraced and provided strong and inclusive leadership, personally and on behalf of the Ministry of Health.

Finally, and returning to where I started, I again thank His Excellency the Vice President of Nigeria, Prof. Yemi Osinbajo, SAN, GCON. Sir, your leadership has been exemplary and inspiring, and your unequivocal commitment and support remain immeasurable and invaluable.

To everyone here today, I say, the launch of the PBOR is a watershed in our history and in our journey to being the best society we can be. It represents our collective commitment to improving care. This turning point in our development as a nation has been a long time coming, and I am glad that it is finally here. It represents a point where we set a new culture for ourselves. It is now up to us to ensure the culture survives. We must preach, practice and defend it, only then will it perpetrate and perpetuate.

I thank you all for coming.

**Babatunde Irukera**

Director General

1. PwC 2016, Restoring Trust to Nigeria’s Healthcare System, pages 4 and 6. Available at <https://www.pwc.com/ng/en/assets/pdf/restoring-trust-to-nigeria-healthcare-system.pdf> [↑](#footnote-ref-1)
2. PwC 2016, Restoring Trust to Nigeria’s Healthcare System, page 6. Available at <https://www.pwc.com/ng/en/assets/pdf/restoring-trust-to-nigeria-healthcare-system.pdf> [↑](#footnote-ref-2)