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AN EXPLORATORY STUDY ON THE IMPACT OF ARMED SECURITY ON HOSPITAL SUSTAINABILITY

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ABSTRACT

Hospitals have faced a number of insecurity challenges in Nigeria in recent times. Although attacks on medical personnel and destruction of hospital property have existed for some time, they have become somewhat more common; it has reached a whole new level. These have created an unpredictable situation that leads to loss of life, property damage, and injury, causing serious damage to the quality of health care in hospitals. This study is a historical survey focusing on the sustainability of hospital security challenges in Nigeria through the use of armed security. Scholarly research highlights the importance of comprehensive security strategies that address insecurity challenges in the hospital but has failed to employ armed security as part of the security measures. The study also identified key factors/areas that hospitals should consider when considering improving their approach to safety and security.

Keywords: Hospital, Attack, Healthcare provider, Armed Security, Sustainability

1.0 INTRODUCTION

Hospitals are institutions that provide quality health services. Patients, visitors, and staff (caregivers or health care providers) make up the hospital's population. Many factors related to the hospital and its environment complicate unarmed security arrangements in Nigeria. Hospitals should be a safe and secure environment for the delivery of therapeutic care among staff, patients and visitors. Although many hospitals have unarmed security arrangements to protect patients and hospital staff, hospital management must establish high security standards and anticipate the possibility of unstable or impaired patients, conflicts between patients and staff/caregivers, and security threats from the surrounding community (Kenneth, 2003)

Health professionals, especially nurses and hospital doctors are increasingly facing attacks from hospital. These attacks, which include threats, physical attacks, and verbal abuse, endanger the safety and well-being of these workers, ultimately reducing the quality of care provided. According to oral tradition, hospital wards work under extreme stress, the health challenges of some patients and the stress experienced by patients, patients' families, relations, and concerned members of the society generally contribute to the aggravation of aggressiveness and irrational and conflictual behavior leading to conflicts either on the part of

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the patient, the relatives of the patient or the staff/caregiver. As a result, hospitals in Nigeria can no longer be insulated from the anxieties and conflicts of society. Hospitals, the health environment and other related institutions are part of a society that is experiencing increasing security challenges that require the replacement of unarmed security with armed security.

Armed Security is a recognized force in society. They are to protect and defend. They focus on protecting property and human beings against various threats. Armed security involves one or more professional guards who are trained in the safe handling and storage of weapons. They provide protection and protection for specific needs and can use lethal force if the situation calls for it. Places like hospitals offer high-value products and services. In these cases, the visible presence of armed security can act as a deterrent to criminals.

Recent situations in hospitals regarding security challenges require the prevention that armed security can provide. Having armed security in the hospital provide peace of mind and protection from potential threats. For example, the sight of a gun on the hip of a security guard can be enough to convince a criminal that his plan is not worth risking his life or well-being. Armed security can apprehend criminals and take control of the situation by engaging their weapons. The primary objective of armed security in hospitals is to protect people and property.

The presence of armed security forces in hospitals reduces anxiety among patients, visitors and staff. Unfortunately, most public and private hospitals in Nigeria do not have an effective security system. Security personnel working in the hospital must demonstrate tact, sensitivity, patience and diplomacy to handle situations in a stressful environment. Hospital management is responsible for establishing the policy framework for the integration of adequate security in the organizational culture of a hospital, to guarantee maximum security for all people who interact in the hospital and its environment. Hospitals must overcome the growing challenges of insecurity by providing a well-organized hospital security service and proactively armed security will help create an atmosphere of security and services so that patient care can continue undisturbed.

2.0 THE ORIGIN AND DEVELOPMENT OF HOSPITALS IN NIGERIA

The origin of hospitals in Nigeria is dated back to the colonial era. Before contact with the early settler European explorers and missionaries, traditional medical practitioners such as herbalists, local midwives, bone settlers, and other esoteric practices were dominant (Scott, 2010). The foundation of medical care in Nigeria were laid by the European naval surgeons and the army medical officers. However, it was the missionary doctors who brought medical services to the natives (Schram, 1971).

The earliest form of modern medical services in Nigeria was introduced by the various European explorers but it was not accessible to natives until the arrival of the church missionaries. The establishment in 1880 of a dispensary in Obosi by the Christian Missionary Society marked the beginning of the chronicle of the earliest established health facilities in the country. The Sacred Heart Hospital in Abeokuta was built soon after, in 1885 by the Roman Catholic Mission and became the first hospital established in the country, while St Margaret's Hospital, built in Calabar in1889 was the first public hospital built for civilians (Scott, 2010). Of the six national development plans that were implemented between 1945 and 1985, the third national development plan of the 1970s seems to have provided the greatest impetus to improve

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the Nigerian health system, but according to some, it lacked a framework of policy for the division of responsibility for health between the three levels of government (Asusu, 2005).

This era saw massive investment in health infrastructure and development of ancillary health workforce under the Basic Health Service Scheme (BHSS). The objective was to increase health care coverage, correct the mal-distribution of facilities between urban and rural areas, strengthen preventive care and create a health care system suitable for the country (Olise, 2011). Later, Nigeria runs a plural health care system with orthodox (public and private), alternative and traditional health care working side by side without any problem of insecurity until recently.

3.0 HOSPITAL SECURITY THREATS AND VULNERABILITIES

All hospitals are liable to seen and unseen vulnerabilities. Vulnerability in the context of hospitals can be defined as something that can result in injury, damage, or threat to people, property, etc. These vulnerabilities, which include threats, physical attacks and verbal abuse, endanger the safety and well-being of these essential workers and ultimately reduce the quality of care provided. (Gillespie et al., 2010). Hospital management must be familiar with these vulnerabilities to be able to manage and monitor the security department. Common threats and vulnerabilities that a hospital may face include:

- Thefts -external or internal
- Loss of patient property losses/vandalism of property
- Employees' property losses
- Destruction or damage to property including motor vehicle accidents, attributable to negligence, lack of training, or out of pure malice or external and natural causes
- Loss of information, related to confidential or privileged medical information patient records, research materials; and IT security
- Assaults or thefts against employees, staff or visitors (workplace violence)
- Fire and arson
- Violation of work-safety norms, including environmental pollution, hazards to safety, health and hygiene.
- Anti-national activities, e.g., bomb threats, sabotage, and subversion of employees
- Threats to medical and non-medical executives or their family members
- Drug theft and drug abuse
- Internal or external disasters
- Medical impostors include, assassins, among others
- White-collar crimes, like corrupt practices by unethical employees, in collusion with outsiders or independently
- Cases of sexual assault/harassment on the premises
- Strikes or civil disturbances
- Infant abduction
- Violence/aggression against individuals

3.1 Threat Groups

The above threats may emanate from any of the following sources:

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- 1. Disgruntled patients/former patients/relatives/employees/former employees or their friends
- 2. Members of the public with real or imagined grievances
- 3. Terrorists/sympathizers

Hospitals must also consider the possibility of unstable or impaired patients, the conflict between patients and staff, and patient's families and staff among others.

3.2 Security Sensitive Areas

There are a number of places and functions in a hospital that can be considered securitysensitive and where the hospital should try and improve its communication with patients in scheduling appointments upon arrival to less distress. Here are some of the most sensitive areas/functions of a hospital where special/additional armed security aside from the one at the gate/entrance of the hospital is needed:

- 1. Out-Patient Department (OPD)
- 2. Pharmacy
- 3. Cash handling areas/Accounting Section (cashier, cafeteria, retail shops)
- 4. Medical Records Office
- 5. Emergency Department
- 6. Computer Centre
- 7. Infant and Pediatric Units
- 8. Parking Areas
- 9. Wards
- 10. Blood donation building- It is noted that patient's families/patients arriving for blood donation, or at places mentioned above are often becoming agitated due to long wait times
- 11. Morgue- cases of disappearance of the morgue in the mortuary recently at a high rate.
- 12. Intensive Care Unit.

3.3 Strategic Security System

A pragmatic assessment by the hospital administrator of security vulnerabilities will facilitate the visualization and the possibility of threats which invariably will also help in the formulation of an effective and cost-effective security management plan for the hospital system. This will help in providing Total Security for pro-active assets protection, security of staff, patients, and prevention to minimize the loss of materials and information.

Hospitals have become increasingly attractive targets for crimes, because of their vulnerability, valuable equipment, materials, and drugs. A hospital administrator acts as an anchor in the hospital security system in the assessment and continuous updating of threats that are simultaneously formed policies and directions for monitoring security needs.

3.4 Roles and Functions of Armed Security in Hospitals

The role of the hospital security department is to "provide protective services to all staff, patients, and visitors and to protect hospital property on the premises, through the use of well-

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trained personnel, technology, prevention activities and rapid response to requests". It involves treating people equally and with absolute care and respect, regardless of their gender, religion, age, disability challenge, or any other factor that may be subjected to discrimination.

Functions of the Hospital Security Department

- 1. Analyze security threats and vulnerabilities in collaboration with the management, civil police and others.
- 2. Preparation of the strategic security architecture. The plan, permanent security instructions and guarantee of safety, operational implementation, and its periodic update, is according to the management objectives.
- 3. Organization and monitoring of security operations and implementation of security plans to archive and eliminate theft/theft of property and crime on the premises of the hospital.
- 4. Advise hospital management on security issues.
- 5. Conduct investigations into inefficient and confidential matters.
- 6. Inspect and patrol hospital premises.

3.5 Physical Security Measures

Certain security measures must be taken. A safe hospital environment depends on the implementation of effective hospital security measure. (Mufaddai et al, 2024). Academic research highlights the importance of comprehensive security strategies that address both staff and physical security. (Gilespie et al, 2010). Physical security measures are essential elements of a hospital security system. These will serve as physical deterrents to discourage the indeterminacy:

- This includes fencing of the hospital's environment to channel movement. This will in no way affect the free movement of patients, visitors, and staff but will ensure minimization of losses and allow patientcare activities to be carried out without hindrance.
- Armed security guards at the gate and other strategic points of entry to the hospital. This means that every person entering the facility will be in contact with armed security personnel. This will help to control people entering or leaving the hospital premises.
- Hospital Administrators must have to respond to security challenges using armed security and increase security personnel in the light of readily available and effective security technology devices, that are becoming available locally in a cost-effective way.1
- Hospital management must constantly review the security organization and its composition, based on constantly evolving threats and vulnerabilities.
- Hospital management must develop and implement clear policies to maintain hospital identification (ID). This is to make it mandatory for all staff, visitors, and probably patients respectively, to wear/display hospital identification badges (ID) at all times to allow access to the premises/specified segments, when they are located on the hospital premises.
- Failure to display the identity badge, regardless of position or seniority, will subject individuals to reprimands and reporting for possible disciplinary action.

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- An identification badge must include the following information. Hospital logo, serial number to avoid forgery, preferably a photo in color, and must indicate the destination of the visitor (e.g. unit, department, etc.)
- In addition, there must be a way to snap and print with the software photograph of the visitor on the temporary identification. Visitors entering with their vehicles must scan their driver's license to verify the information given in the visitor's book.
- There should be magnetometers (i.e. metal detectors) to prevent concealed weapons or contraband from the hospital.
- There should be stationary CCTV cameras to monitor and record activities in specific locations and mobile cameras to assess situations in the hospitals. At the entrance/exits, there must be cameras that can record and store footage for 60 a day's cycle, also ensuring that the images are of high resolution to identify people and objects. This will enable hospitals to manage security activities on daily basis.
- All those identified must be prosecuted, which will prevent further attacks.
- Visitors must sign a logbook upon entry/exit and provide identification to keep for the duration of their stay in the facility.
- There should be some type of general security alert in the hospital to notify staff, patients, and visitors if there is a threat to hospital security.
- Staff must be trained to appropriately report any suspicious behavior to security.

3.6 Facts & Events in the years 2015-2022

Hundreds of hospital attacks occurred between 2015-2022. These incidents of attacks continue to increase, including some notable hospital incidents:

In 2013, family members of a patient attacked a doctor and tried to throw him down off a twostory building because their mother had died. (Punch (Nigeria) 15 January 2023)

A hospital was destroyed because a certain man who died was loved by a group of people who found themselves beating doctors, nurses, and workers on sight.

Nigerian doctors are becoming an endangered species, as they are now frequent targets of brutality and vicious attacks by patient's family's criminals. Recently, there have been attacks on doctors across the country. A report on workplace violence against doctors published by the Nigerian Association of Resident Doctors says that 345 incidents of violence against Nigerian doctors were reported in 2022. This is extremely dangerous trend that the government at all levels must stop quickly. (Punch (Nigeria) 15 January 2023)

The report said that 74% of attacks required medical attention, while 15% were life-threatening. He notes that 65% of attacks are due to the loss of patients, 56% due to not attending to patients promptly, 41% due to poor communication, 28% due to inadequate security and surveillance, 26% due to lack of facilities and drugs, 24% due to an excessive capacity to accommodate patient, and 23% due to the personality of the attacker. (Punch (Nigeria) 15 January 2023)

The World Health Organization reports that between 8.0 and 38% of healthcare workers experience physical violence at some point in their careers, mostly from patients and visitors.

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In particular, nurses of the Federal Medical Centre, Owo, Ondo State staged a protest on the hospital premises following the alleged attack on their colleagues by some relatives of a patient who dies in February 2021. Relatives of the deceased patient, brought to the hospital on Saturday, allegedly invaded the ward where the patient died the next day, beating the nurses on duty, and accusing her of being responsible for the patient death. It is barbaric. In a decent society, no one takes justice into their own hands. (Punch (Nigeria) 15 January 2023)

On Dec 31, 2022, a doctor, Dr Uyi Iluobe was killed by gunmen who attacked his hospital, Olive Clinic, at Oghareki, Western Ethiope Local Government Area. (Punch (Nigeria) 15 January 2023)

One of the doctors in Ondo was attacked by a relative of a patient but the man who assaulted the doctor was eventually arrested by the operatives of Amotekun (Nigerian western security network) operatives after the information was transmitted.

Similarly, there was chao at the Osun State Teaching Hospital, Osogbo, when some hoodlums, said to be graduates, attacked hospital workers over the death of a patient in April 2022. The hospital said that the group invaded the Accident and Emergency Unit of the facility and beat the doctors and nurses on duty after the death of the patient who was not identified.

In December 2022, The Punch reported that an angry father and son attacked a doctor and a nurse at the Federal Medical Centre, Idi-Aba, Abeokuta, after losing a family member. The couple lashed out at the doctor when told the news of their loved one's death. (Punch (Nigeria) 15 January 2023)

In December 2022, at the Ilorin Teaching Hospital in Kwara State, a patient's relative of a patient attacked one of the doctors. (Leadership (Nigeria) January 2022)

In February 2022, at the University of Medical Sciences Teaching Hospital (UNIMED), Akure, Ondo State, a relative of a patient beat a doctor on duty. (Leadership (Nigeria) January 2022)

The Chairman of the Bauchi Branch of the Nigeria Medical Association (NMA), Dr. Adamu Sambo, during a press conference in July 2022, gave a description of the attack: "On July 8 2022, Dr. Mohammed Sani, who is the Principal Medical Officer in charge of General Hospital, Misau, was attacked by a relative of a patient's with an axe, intending to kill him. (Leadership (Nigeria) January 2022)

In August 2022, a gynecologist working in a hospital in Abuja was brutally attacked by a relative of patient and sustained a traumatic brain injury, (Leadership (Nigeria) January 2022)

The cycle of violence perpetrated by kidnappers and bandits, and in some cases by security personnel have taking their toll. Beyond prosecuting those responsible for the assault on doctors and other health workers, hospital administrators and local authorities must put in place mechanisms to manage emotional trauma and the mental health not only his patients but also relatives who cannot handle the news of losing family members. (Leadership (Nigeria) January 2022)

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According to the report on the internet and social media platforms, a female doctor at Maitama District Hospital, Abuja, was on beaten and robbed on January 9 by relatives of a patient she was treating.

In another incident at the Nnamdi Azikiwe University Teaching Hospital in Nnewi, two male doctors at the children's special care unit were beaten up by relatives of a patient early in the wee hours of January 14. This was after the perpetrators lost a newborn baby to neonatal asphyxia despite adequate resuscitation by the doctors on call.

On 11 occasions, health facilities were attacked, stormed, and damaged in Anambra State in the southeastern region, Benue and Nasarawa states in north-central Nigeria, Borno and Yobe states in the northeast, and Kaduna. (Humananglemedia.com)

In March 2021, assailants attacked Niima Clinic in Kaduna, killing one health worker and injuring three others.

The report also indicated that there were 13 incidents of looting of medical supplies, with at least six health facilities burnt down in Borno and Yobe states, attributed to ISWAP members and many others too numerous to mention. This partly explains why doctors travel abroad

3.7 Impact of Insecurity on Health Systems/Hospital

- Loss of life
- Loss and damage to property
- Injury
- Loss of corpse in the Hospital morgue. Examples of cases where the corpse was lost in a Nigeria hospital:

-According to Punch Newspaper, a corpse of a female who was to be buried that Saturday went missing from the morgue of the Olabisi Onabanjo Hospital, Sagamu, Ogun State on January 27, 2023.

-The female corpse of a woman disappeared from the mortuary of a private clinic in Owo Local Government of Ondo State.

-According to Independent News Paper, A man entered a mortuary at Jesus Hospital, Imo State and took the corpse of a woman away but was later arrested and among others.

- Staff shortages are associated with by physical and physiological dysfunctions of health workers, resulting in reduced work performance, increase absenteeism and burnout. Also, many health workers have left the country and many more are about to leave due to the insecurity challenges in Nigeria hospitals.
- Reluctance and unwillingness to attend to patients in case of emergencies and/or particularly unusual hours of the night and possibly, reluctance to the treat patients, and even some patients with a record.
- Difficulty accessing health care. As a result, thousands of people no longer have access to health care. For example in Gwoza and Pulka towns in Borno, according to Humanglemedia.com, the security situation has deteriorated to the point that Médecins

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Sans Frontières (MSF) suspended all its work in the region in August 2021, a hospital was closed in Pulka, and obstetric care was interrupted in Gwoza. Violence against health workers and facilities will significantly disrupt the health system across the country.

- Also, in one-third of the LGAs in the northeastern states visited by SHCC's protection monitoring teams since November 2020, family members reported feeling unsafe in the local hospitals.
- According to the survey, the reason for the recent increase in attacks on Health professions is that 2022has been difficult year for all Nigerians due to economic hardship, caused by high inflation, and high cost of goods and services. These attacks and the aggression shown by the average Nigerian, who are probably suffering emotional trauma themselves are signs of a society that had turned against itself. Clearly, anger management has become an issue that needs to be addressed in an increasingly traumatized society.
- The demand for health services increased in the number of casualties resulting from event of insecurity and violence including natural disasters
- Damages caused to health infrastructure by bombs and other explosives.
- Fear and feeling of insecurity on the part of health workers that affect their concentration and attitude to work.
- Destruction or loss of essential medical records due to conflicts/violence
- The flight of health personnel away from dangerous areas leading to a lack of services and shortage of skilled manpower in prone to attack.

4.0 RECOMMENDATIONS

Security is a prerequisite for health, healthcare delivery, and sustainable development in any nation. It is unfortunate that healthcare providers are currently the most affected by the failure of Nigerian healthcare system (for example, 30 doctors per 100,000 people), therefore, Nigerian hospitals must be brought up to the standards of world-class to perform better services.

The importance of establishing a culture of security by engaging and empowering facility employees, visitors, and vendors, and by implementing a multi-layered security approach that takes into account the unique vulnerabilities of certain hospital sectors. This will discourage Jungle justice to a large extent in Nigeria.

Identify two organizational or fundamental actions that hospitals can take to improve their culture of security. First, as with other preparedness activities, an organization should consider conducting a vulnerability analysis of its operations targeting safety and security issues. To do this, the hospital should pay particular attention to vulnerable places such as research laboratories, psychiatric wards, and the emergency department and the morgue.

Hospitals should develop a mechanism to report and track security incidents, including thefts, armed and unarmed threats, and physical altercations. To this end, the study recommends that all incidents, whether involving employees, patients, visitors, or some combination of them, are reported and followed up.

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Routine analysis of incident reports can inform the allocation of security resources, the targeting of training, and identification of areas where additional armed security measures are most needed. They can also inform workflow and protocol changes. For example, one hospital found that patients coming in for blood tests were often anxious because of long waits.

In addition, in the hospital, places like OPD, emergency wards, accounting Sections, etc. must have separate security aside from the one at the entrance of the hospital. In response, the hospital needs to improve its communications with these patients in scheduling appointments. Upon arrival, patients anticipate the wait, which reduces their stress. In the event of an attack on a hospital, hospital staff or patients should also try and contact armed hospital security.

It is possible that some members of the medical staff are negligent in their workplace. Some are very empathetic and act in ways that are not appropriate for the medical profession. There have been cases where doctors have been negligent in leaving instruments in the stomachs of patients they have operated on. A 200-level student at the University of Lagos, Patience Udunze, told The Punch how a nurse in at a health facility wrongly diagnosis her at the age of six left her blind. Although, the nurse fled the country and the facility was closed by the government but she lost her sight.

This is wrong, despite the disappointment and pain that the death of a loved one causes. In addition to the fact that that violence against doctors does will not bring back the dead, assault and battery are criminal offenses. There are appropriate ways to report these complaints and they will be determined by the relevant authorities when necessary. There is also the possibility of seeking compensation in a court.

It is true that the workload in hospitals in Nigeria can be high, take for example: 30 doctors per 100,000 patients especially with the small staff, but doctors should be more careful, knowing that a single mistake can harm a patient or cost his life. The Hippocratic Oath emphasizes that being a doctor carries many responsibilities, including protecting patients while upholding the highest medical standards. Nurses, too, are similarly committed to doing their best for the patients in their care. In Nigeria, not many health professionals seems to take these oaths into account when interacting with patients who flock to their health facilities for help.

NARD and the NMA as well as all other associations that deal with medical care should educate their members about their professional ethics. They have to do the job they signed up for without compromise.

Armed Security officers must demonstrate tact, sensitivity, patience, and diplomacy when handling situations in a stressful environment and also act with integrity, expertise, reliability, and accountability. Each guard has military or law enforcement experience, so they are well informed and ready to handle any situation.

Proactive, well-trained, and well-armed security that focuses on crime prevention can make a significant contribution to adequate security in the hospital.

5.0 CONCLUSION

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This study highlights the importance of strengthening hospital security measures in Nigeria through the use of armed security. Strengthening hospital security measures is key to addressing hospital security challenges in Nigeria. By implementing the proposed solutions, a safer work environment can be created, leading to a general improvement in the quality of care provided in the Hospital.

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