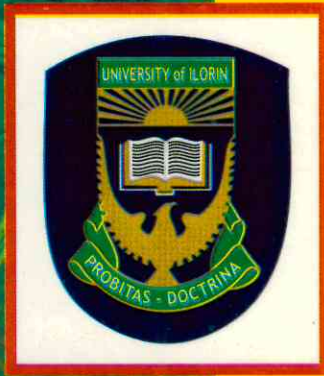
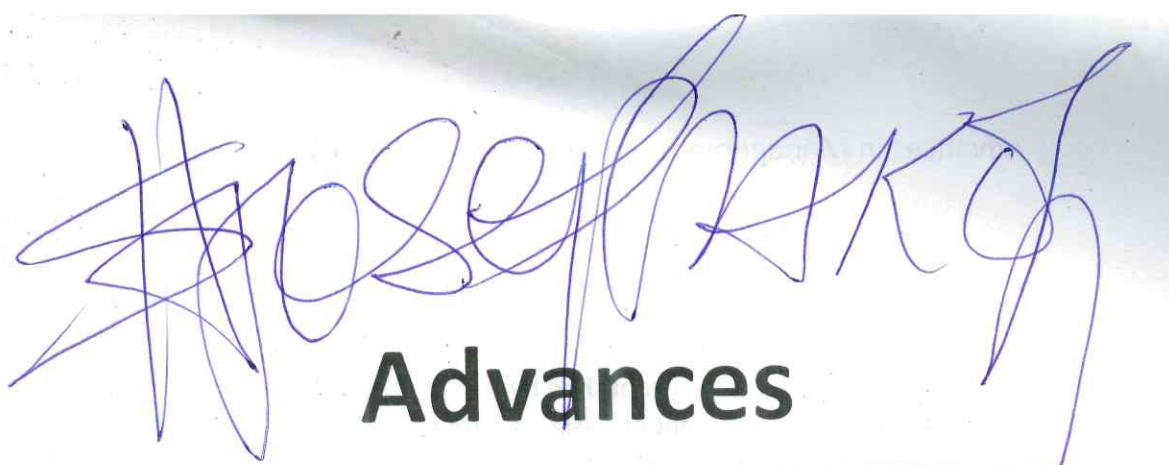




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CONFLICT AND THE RIGHTS OF PATIENTS IN GOVERNMENT HOSPITALS IN NIGERIA: AN ASSESSMENT

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Abstract

The major aim of this theoretical paper titled conflict and the rights of the patients in government Hospital in Nigeria is to discuss and assess the extent of actualization of the rights and obligations of patients. The paper make use of conflict theory as a guide. The paper pointed out that Hospital environment which is supposed to be a place where the sick and the needy are cater for is often plagued with incessant conflict. The paper noted that there are several social grouping in government hospitals in Nigeria and different kinds of social relationships which makes conflict inevitable. The paper also further asserted that the major conflict that often plague the government hospital in Nigeria is between the labour on one side and the government on the other side. The paper maintained that the ever increasing demands on the part of the various labour union in government hospitals and the failure of government to fulfill her obligations to the labour is one of the major causes of conflict in government hospitals in Nigeria. The paper posited the incessant conflict in government hospitals often lead to untold hardship and suffering by patients that often leads to loss of lives and disability. The paper further asserted that one of the so many consequences of conflict is mass exodus from government hospitals to private hospitals both in Nigeria and outside Nigeria by those patients that can afford the costs. The paper concluded that the conflict situation in government hospitals given the government negative publicity both within and outside the country. The paper makes some recommendation that will bring about reduced conflicts in government hospital in Nigeria. Part of the recommendation among others include increased government funding and deliberate policy that will discourage Nigerians seeking medical treatment abroad.

Introduction

Herbert Spencer (cited in Onigu Otite2010) predicted that "all societies in the world would be progressing along one part toward a state where political restraints, peace, and lack of internal conflicts would be the order of the day" This prediction cannot stand the test of time. This is so because contemporary social life in human society is witnessing all forms of conflicts across the globe. Due to the dynamic nature of human society in general and coupled with divergent views, goals and interest breed conflict.

The empirical and social realities in terms of economic, political, religion and social changes in general make human society prone to conflicts. This is why Cozer(2005) asserted that "inherent in every human relationship is the idea

of conflict". This is due to social reality of rival claims by individuals and sub-groups to limited resources, power and prestige. In every human societies individual and sub-groups have goals, values and or interest which they pursue and hope to preserve. Acquiring this goals and preserving them by one group leads to other groups being deprived of the opportunity to be satisfied by the limited resources of society. This resulted into conflict among and between the various groups in the society.

Generally, conflict situations is viewed as a produce labour market. This situation places human being in the society into two groups: Those that have their labour power (workers) to sell and the buyer of labour power (employers), who own the means of production. This kind of relationship is unequal and will definitely lead to the exploitation of the disadvantaged groups i.e. workers, the end result of such relationship is conflict. Conflict is a universal phenomenon and its manifestation applies to both ordinary life and industrial organization . No wonder, McCordrick et al(2012) maintained that " Conflict in some form and degree is part and parcel of virtually every facet of human life and one would therefore not expect the industrial scene to be free of it; by and large people tend to view conflict as an undesirable component of human life which is indeed can be "due to individual differences in nature, needs, interest and expectations from organization, conflict is bound to exist in every organization. This is why we agree with the position of Grant and Marson (2007) that; "it is already become clear that conflict must arise in setting and implementing objectives. A business organization is composed of different groups and factions such as shareholders, management, workers and customers and each all requires something different from the organization.

Government owned hospitals in Nigeria like every other industrial organization in Nigeria is not devoid of conflict. This is so because government hospitals in Nigeria is composed of various interest group and factions. The various groups in the government hospital environment have their aims and objectives and enter into competition with others. The competitions could be at the level of individuals and sub-groups and sometimes this could be fierce or peaceful. It is common to identify different associations or unions with different aims and objectives. For example, there is medical Doctors Associations, Nurses Associations, Health workers Associations, laboratory attendants Associations, Senior non-medical staff association, Junior staff Association, Management staff Association among others. The different Associations in government hospitals are either in direct

competition with one another or with the government. Such competition often than not make government hospitals in Nigeria like a theater of war.

A glance at some Nigeria newspapers and news reportages are full with headlines of incessant strikes actions or conflict reporting in government owned hospitals. For example, "Osun state government vs. Striking health workers" - Nigeria Tribune (2016) "Strike: Relatives withdraw patients from Ondo State Government Hospitals"(www.nigeriatoday.or.za June 2016); "Nationwide strike looms in government hospitals" (www.nigerianewsapaertoday 12th may 2016), "Doctors strike disrupts services at UCH" (Premium times 2016); "NLC members Police clash just to force government hospitals to join strike"" (www.nija.com 2016), "Health workers strike: Emergency Burial in Oyo" (Vanguard May 2016); "Strike action forced patients to withdraw from government hospital in Kwara" (Herald newspaper February 2016); " Doctors and Nurses withdraw services in government hospital in Benue state"- (The voice newspaper January 2016).

Incessant conflict in government Hospital makes government owned hospital very unconducive for patients to recover from illness and diseases. According to Talcott Parson (1957), every sick person has the right to be assisted to recover from sickness and illness. The reality on ground is incessant strike or conflict obstruct the rights and obligations expected from individual who is sick in government hospitals in Nigeria. This is so because every one that is only biologically but socially. The relevant question at this juncture is, what are the nature of conflict in government hospital in Nigeria that infringes on the rights and obligations of patients in their attempt to recover from sickness and diseases? The answer to this question inform the basis for this theoretical paper titled conflict and the rights of patients in government hospitals in Nigeria. The discussion will be done from the following perspectives under the following sub-heading:

- a. Introduction
- b. Theory that explain conflict
- c. Causes of conflict in government hospitals in Nigeria
- d. The right and obligations of patients
- e. An Assessment
- f. Conclusion and Recommendation

Theory that explains conflict in hospital environment

The origin of conflict theory is attributed to Karl Marx (1818 - 1883) and it was the foundation he laid that led to other theories, that explain social conflict in hospital environment in particular and in human society in general. Marx's brand of conflict theory view conflict from a materialist interpretation of history, and he make use of dialectical materialism as a basis for his analysis. Marx took a critical stance towards existing social arrangements and political programs of revolution. Marx started his analysis by positing that economic organization, particularly ownership of property, determines the organization of the entire society. Marx maintained that work is the most important determinant of social life especially the nature of work that geared towards provision necessities of life, food, clothing and shelter.

Marx further assert in his theory that everything of value in society is traceable to human labour. Marx opined that the central institution of capitalist is private property system in which capital is controlled by a small minority of the population. This arrangement gave rise to two opposing classes, that is , the bourgeoisie(the owners of capital) and the proletariat (the workers) whose only property is their own labour power, which they have to sell to the capitalists. Marx posits that the root of industrial conflict is because workers are pay less while owners are seen as making profits.

Proponent of conflict theory see conflict as a "necessary evil", which finds expressions in human interactions. The position of Marx that conflict is part and parcel of human society, is collaborated by Thomas Hobbes when he pointed out that, the hopeless chaos of the state of nature as a life without gentility or beauty. Without charm or peace and without industry and culture (Beradat 1999). Marx believes the exploitation of the workers by the capitalist has created a situation of distress and misery for the workers against oppressive conditions of work and eventual downfall of the capitalist system and later communism. Marx's theory of conflict has to do with the clashes of class interests which makes history of society a class struggle. The Marxism conception of conflict in industrial setting is that the very nature of work is the main source of conflict especially that between the employers and labour. Marx's position is that the workers through their labour create value and will come to a point whereby the workers would become conscious of their value and rights and would always demand for a redress of the condition via many different means and one of such means is showing grievance against the employers wishes and hence the inevitability of industrial conflict.

This particular theory under review is very relevant to this study. There are two major opposing groups in government Hospitals in Nigeria. That is, Management and labour. The management represent the government who is the owners of government hospitals while the labour or union represent the collective interest of all the workers. The major and well published conflict in government Hospitals in Nigeria is always between management and labour. Part of the reason why there is conflict in government hospitals in Nigeria is the labour always posit that they are putting so much to do their work and being paid less by the management(government) Hence the inevitability of conflict in government hospitals in Nigeria.

The relevant question at this juncture is, what are the major reasons for conflict in government hospitals in Nigeria? The answer to the above questions will lead to the next section of this theoretical paper, that is, Conflict in government hospitals.

Conflict in Government Hospitals in Nigeria

Government hospitals in Nigeria like every other industrial sectors has its own share of conflict which is frequent occurrence in every contemporary organizations. The major differences is the degree, the frequencies and nature of the conflict.

To McCormick et al(2010) conflict in some form and degree is part and parcel of virtually every facet of human life and one would therefore not expect the industrial scene to be free of it, by and large people tend to view conflict as an undesirable component of human life which its indeed can be. Instead if industrial harmony, peace and tranquility in human societies it is conflict of different that its becoming the order of the. So many social researchers, scholars from the field of sociology, economics, psychology and social philosophers among others have written so much about conflict in particular, with the view to bringing out the general causes, types and effects.

One of the major reasons for conflict in Nigeria has to do with disagreement over conditions of services. It is often the failure on the part of government (who owns the government hospitals in Nigeria) to honour the agreement reach with labour contain in their conditions of service, that often lead to conflict in Hospital environment in Nigeria. This position is supported by Ibeku (2009) that industrial conflict is seen by different scholars as something

to be associated with strikes, work - to - rules, lock-outs, disagreement over conditions of services.

In the hospital environment there are different social groups that interact with one another. In the course of social interaction conflict cannot be ruled out. In other words, social interaction is also one of the reasons for conflict in government hospitals in Nigeria. McCormick (2010) supported this position when he asserted that industry like every other human activity involves social interaction, it is from this social interaction that contradictions emerge leading to conflict.

Another factor that can be traceable to reason for conflict in government hospitals in Nigeria has to do with wages and salaries. Government inability to meet the wages and salary demand by labour often breed conflict. Either the workers are demanding for their salary and allowances that has not been paid or demanding for increase in wages and salary. It is the failure between government and labour to reach an agreement concerning wages and salary that often cause conflict. Hyman (2012) supported the above view by positing that of all strikes recorded the highest is caused by wages. It is a general held view and argument that conflict arises from the argument on who get what, this in itself is regarded as product of labour market in which on one hand, there are workers who have to sell their labour power in order to subsist, while on the other hand there are buyers of labour power who owns the means of production.

According to Allen (2012), in supporting the view of Hyman (2012) is of the opinion that this two interest are irreconcilable. They are engaged in a perpetual conflict over the distribution of revenue. It might be stated that the interests have a common purpose in increasing total revenue and so they have. But the conflict over distribution for additional increment of revenue is determined by the power situation. Employees with no power may get nothing. There is no automatic distribution based on a sense of fairness or equity.

One can point out that due to this unfairness or lack of equity in distribution of resources forced workers to continue to demand for increase wages and / or salary because of feeling that the reward of their labour is not commensurate with that expended. And in most cases such demand often conflict with management position.

Another reason for conflict in hospitals owned by government in Nigeria is the concentration of power in the hands of a few people that is the

management. The workers that constitute the vast majority are often alienated from power sharing. This position of the employee place them at disadvantages in terms of demand, the resultant effect is often conflict. In addition to the above factors that contribute to the conflict situation in government hospitals, working conditions have also been identify to influence industrial conflict. There is a general clamour by labour in terms of poor working conditions in Nigeria government hospitals. The working conditions are manifested in poor housing, transport and safety facilities in both work and residential place. Morley(2009) supported this view when he asserted that, "among other things,when people embark on industrial action,they aim at improving their working condition".

Another factor that is often cited as the major reason for conflict in government hospital in Nigeria is poor informed human relationship communication and authoritative supervision. Scholar like Kerr(2013) seem to agree with this position when he claim that bad communication and the ensuring misunderstanding are not always conducive to organizational conflict, as human relations manual triumphantly declare, they can equally well operate as dampers of conflict in so far as they prevent organization members from finding out about their interest position and forming group for its promotion. No doubt,as a result of bad communication and restriction in interest group formation. A vacuum can be created in the minds of the workers. It is this vacuum situation that often lead to a conflict situation in hospital environment.

Government intervention in the affairs of industrial organizationin in most cases affect the or positively. Government intervention in the affairs of industrial organization in most cases affect the organization either negatively or positively. Government leadership approach (to industrial conflict) which is patterned after the "classical school of thought" does give room for free association and union activities. Union leadership activities coupled with workers self-consciousness also bring about industrial conflict. Research has shown that, workers feel for or sympathize with their fellow co-workers suffering what they perceive as that "universal injustice" by going or embarking on an industrial action especially sit-ins (Jackson 2008).

Failure on the part of government to expose the staff to training and further education outside the work place is often cited for the reason for conflict in hospitals. According to Obot (2007), the factors which influence conflict in any organization have to do with management style. This is in turn will depend on external factors like education, training and development of

leadership and followers. From the above analysis, one can state that, Factors that can contribute to industrial conflicts are both internally and externally generated. By sending the workers to educational institution for further training will help to diffuse conflict situation and enhance high productivity.

Patients' Rights and Obligations

A comprehensive view of the sick was formulated by Talcott Parsons in 1951 in his theory of 'sick role'. According to Parsons (1951), the sick role theory simply explains the characteristic behaviour the sick person adopts while experiencing sickness. The theory postulated that the sick person suffers not only biologically but socially. Parsons position, relates that illness is considered as a deviant behaviour because the victim acts in contradiction to the accepted norms and values of the society. Parsons again in 1951, submitted that everyone who is sick has assumed the 'sick role' and such a person entitled to two rights and obligations expected from such a person. The right of very sick person who has assumed the position of 'sick role' is the right to be excused from duty. The theory maintained that this 'right' is mandatory because the society is aware that it is not the fault of the sick person to be sick. The second right of a sick person is the right to be assisted to get well. In other words, the person who is sick is not expected to get well without assistance from other members of the society. The theory asserts that the first obligation of any sick person is to get well as soon as possible. That is the sick person must show a desire to get well as soon as possible. The second obligation is the sick person must cooperate to get well as soon as possible. According to the theory, the cooperation entails accepting to take drugs or medicine. In addition, a sick person is expected to follow the instructions of the physicians. The theory also maintained that unless a medical doctor validated a particular individual is not well, he/she cannot be excused from duty.

Parsons (1957) further postulated that in addition to the right and obligation, there is another attachment which he call the 'secondary gains'. To him, secondary gains is the extra attention given to a sick person when he or she deliberately does not want to get well. According to parson, the other aspect of the 'sick role' is the contingent role. this means anybody can come to ill-health and assume the status of a sick role irrespective of the persons position in the society. In other words ill-health is not a respecter of status or gender. Secondly, the 'sick role' is a temporary role and never permanent but it comes and goes (cure) or you die. The sick role is a negatively achieved role

because one acquire or achieved when one fails to keep a healthy form. In addition to other aspect of the sick role, is the inherently universalistic role. The submission is that sickness is found in every part of the world . That in every society there is a standard to judge who is sick or well. The sixth aspect of a sick role theory is, it is a functionally specific role. That is one can only do one thing at a time. That is, it is confined to the state of health only. The final aspect of the 'sick role' is collectively orientated. This is so because of the fallings and actions of other people around the sick people. This implies that the sick person in a hospital always have constant visitors that come and go for the purpose of rendering one help or another to the sick person. The theory of sick role is very relevant to this particular study. The theory asserts that every sick person must be assisted to get well as well as need to be excused from duty as a right. This position of the theory is in line with Nigeria labour law that emphasizes sick leave and absence from duty on the ground of ill-health for every worker in Nigeria. The theory also pointed out that sick people suffer biologically and socially. This is why the National Action committee on AIDs (NACA) (2008), is emphasizing that "people with HIV/AIDS are your relatives and friends. They need our love, care, compassion and support, show you care; lend a hand; be a friend". Parts of the social pains the sick people suffer particular HIV/AIDS positive victims is neglect by the inner and wider society. NACA (2009) observes that the key behavioral objectives across priority audiences will be reduced, same as reported stigma and discrimination among people living with HIV/AIDS, resulting in an increase in the number of community support services.

An Assessment

This assessment will take a critical look at conflict in government hospitals in Nigeria and how it affects the overall functions of hospitals. There is an adage that says, when two elephants are fighting it is only the grass that suffers. All forms of conflict in hospitals, whether it is conflict between labour and management\government or intra-union conflict in the final analysis affect the patients. In other words, patients are at receiving ends of all conflict situation in the hospital.

The law Hypocrith concerning the practice of medicine, the lives of patients are paramount to every other considerations. Doctors are expected to treat and take care of patients irrespective of both doctors and patient religion view, ethnic or racial background, political affiliation among other personal interest. But the rate doctors withdraw their service for just flimsy excuses is contrary to their oath of office. Since the major reason for conflict in

government hospitals (in most cases) bother on monetary issues it shows that Doctors value money more than human lives. A glance at most Nigerian newspaper is always full of captions like "no pay, no work", Doctors insist on full payment before they can work, Doctors threaten strike action "emergency evacuation of patients from government hospitals" etc. The attribute Doctor is comparable to exchange theory by Goffman (1957) who likened social life to a trading business where emphasis is on maximizing profit and minimizing losses. Doctors are the arrow - heads of all medical staff in Hospitals, every steps toward conflict initiated by doctors will motivate all other supporting staff like similar action. Doctors' action that bothers on monetary condition affects the right of patients to be assisted to get well as posits by Parson (1952) in his sick role theory. In most cases, patients without full payment are not treated. Accident patients are often left unattending to on account of lack of Police report or no money. The sick is who is considered to be helpless and need assistance to get well are often denied their rights as a result of doctors' demand.

One of the rights of a sick person is the right to be excuse from work. In most cases, doctors who are suppose to enforce this right often them not abuse it. Patients who do not want to go work often get doctors' report to be excused even when they are not sick. This doctors' report has gone to another level such that students who are not really prepared for exam and are scared of failure go to obtain doctors report on ground of sickness, so they can be excused from writing their exams. One can assert that doctors' who are supposed to enforce the ethical practice of medicine are the one seeing as abusing it or violating it.

Part of the obligation expected of patient is to corporate with medical personnel to get well. That is, by taking their drugs and carrying out medical personal instructions but with incessant strike action or conflict in hospital. In most cases, no one is seen around and not to talk about corporation of patients.

The role of government that owns the hospital is not even well encourage for the fulfillment of the rights and obligations of patients. In most cases, government hospital are ill - equipped. Doctors often complain of lack of facilities to work with. Infrastructure development in government hospital is very poor and this account for the upsurge in establishment of private hospital and clinics.

Due to ill - equipped of government, hospitals family members of top government official often seek medical attention abroad. Due to poor state of government own hospital, people often refer to them as "mere consultancy clinic". Government themselves pave way for conflict in hospital. Government enter into negotiation and collective bargaining with labour, and often refuse to implement it. This is in line with the assertion of Far - ham et al (2013), " that bargaining may lead to collective sanction such as strike, demonstrations, work - to - rule and total breakdown of plant and machinery".

Government role as a bias umpire also encourage conflict in government hospitals. Government regards doctors as superior to all other staff in hospitals. Any matter that has to do with medical doctor will; attract urgent attention of the government. Doctors alone cannot carry out hospital functions that will enhance the protection of patient rights and obligations. But often them not, government threat any matter that concern medical doctors with preferential treatment at the expense of other unions in hospital. The government is expected to play a fatherly role to all the unions in the hospital for effective functioning.

Conclusion

The paper therefore come to a conclusion that, conflict in government hospital in Nigeria is man made and can be averted. The paper is also concluded based on the discussions that the rights and obligations of patients who has assume the status of "the sick role" is far from been realized. And the paper conclude that the practice of medicine in government hospitals in Nigeria is far below international standard with congestion in hospital words, heavy work load and fewer medical workers contributed to the poor state of government hospitals in Nigeria.

Recommendations

On the basis of the above discussion and conclusion the paper therefore make the following recommendations. First and foremost, the government should as a matter of urgency engage in massive upgrading of all government hospitals in Nigeria with a view to bringing them to international standard, and to the level of universal standard practice of medicine.

Budgetary allocation to the health sector should be increased and given top priority. Over the years, budgetary allocation to military has always be on the

rise, yet both internal and external crisis has not abated. Therefore, more monetary allocation be given to health sector to cater for the victims who always rely on hospital for socoure.

Government as a matter of urgency come up with a law that will discourage top government personnel for seeking medical cure abroad. This will save or conserve foreign reserve, spending and encourage local hospital for better and improved services.

Fourthly, government should compel by law any striking doctors that allow patients intending to, by reasons of strike or conflict situation should face the law.

Letter of excuse from work by patients who claim to be sick should be subjected to a third party scrutiny and should not be taken on face value. In other words, any patient who claim to be sick should undergo a laboratory test to ascertain the claim. And if found wanting, both the doctor that issued the excuse letter and the patient in question should be punished according to the rule of law.

Furthermore, government should avoid been hand twisted to enter into an agreement with labour particularly if the government know he will not honour such an agreement. In other words, any agreement that the government have enter into with the union should be honoured. Let government be bold enough to enforce the principle of "no work no pay". This will discourage unnecessary conflict or strike action in government hospitals.

Finally, government should embark on aggressive recruitment of medical workers and reduces the jumbo salary of politicians to give room for prompt payment of workers salary particularly medical workers.

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