

# Denying Emergency Care in Nigeria:


Legal Implications and Redress Under the Nigerian National Health Act





# Introduction

Emergency healthcare is often the first and most critical point of contact between a patient and the healthcare system.<sup>1</sup> In life-threatening situations, time is of the essence, and the expectation is that care will be provided swiftly and without prejudice. Yet, in Nigeria, access to emergency care remains a subject of significant legal and ethical concern. This article explores the provisions of the Nigerian National Health Act (NHA)<sup>2</sup> relating to emergency care, the legal consequences of non-compliance, and what redress is available for patients and their families.



## Legal Provisions on Emergency Care in Nigeria

The National Health Act 2014 was enacted to provide an overarching framework for the regulation, development, and management of Nigeria's health system. A pivotal provision with regards to emergency care within this Act is Section 20, which explicitly addresses emergency medical treatment.<sup>3</sup> Specifically, Section 20(1) states that "*A healthcare provider, health worker or health establishment shall not refuse a person emergency medical treatment for any reason.*"<sup>4</sup> This provision applies universally across all healthcare establishments in Nigeria, encompassing both public and private institutions. The Act's unequivocal language establishes emergency care as a non-negotiable right, thereby placing a direct legal duty on healthcare providers to administer prompt treatment without delay or discrimination.<sup>5</sup>

Section 20 of the Act further imposes a binding legal obligation with enforceable sanctions on health care providers, health workers and health establishments. As a result, healthcare providers or establishments that refuse emergency treatment commit a criminal offence under Nigerian law. The penalties for such contraventions include a fine of 100,000; imprisonment for a term not exceeding six months; or both fine and imprisonment upon conviction.<sup>6</sup>

<sup>1</sup> World Health Organization n.d 'Emergency Care as an Essential Component of Universal Health Coverage in the Eastern Mediterranean Region' [https://www.emro.who.int/images/stories/about-who/ecs\\_in\\_emr\\_pre-rc\\_paper\\_18\\_september\\_2016.pdf](https://www.emro.who.int/images/stories/about-who/ecs_in_emr_pre-rc_paper_18_september_2016.pdf)

<sup>2</sup> National Health Act 2014

<sup>3</sup> The National Health Act 2014, s. 20(1)

<sup>4</sup> *Ibid.* s. 20(1)

<sup>5</sup> *Ibid.*

<sup>6</sup> *Ibid.* s.20 (2)

Beyond criminal liability, healthcare providers may also face civil claims for damages arising from negligence or breach of statutory duty, especially where denial of emergency care results in harm or death. Additionally, the legal framework for emergency care in Nigeria further extends protection through the Compulsory Treatment and Care for Victims of Gunshot Wounds Act 2017, which mandates that all hospitals, public or private, must accept and treat gunshot victims immediately, without requiring police clearance or upfront payment.<sup>7</sup> Failure to comply attracts similar criminal sanctions and this reinforces the supremacy of saving lives over procedural formalities.<sup>8</sup>



## Reasons for Persistent Denial of Emergency Care in Nigeria

Despite the clear legal provisions of the National Health Act, denial or delay of emergency care remains a troubling reality in Nigeria. These challenges highlight the gap between statutory provisions and practical realities, underscoring the need for systemic reforms and greater awareness. Several factors contribute to this persistent problem.

One significant barrier to the effective implementation of emergency care provisions under the National Health Act is the widespread lack of awareness among healthcare workers and patients alike. Many medical practitioners, especially in private and rural settings, are not fully informed about their legal obligation to provide emergency treatment without preconditions. This ignorance can lead to hesitation or outright refusal to treat patients in critical conditions. Similarly, patients and their families often do not know their rights, which limits their ability to demand timely care or seek redress when denied.<sup>9</sup>

Also, many healthcare facilities in Nigeria, particularly those in rural or underserved areas, face severe resource limitations that hamper their ability to provide adequate emergency care. These constraints include a shortage of essential medical equipment, inadequate infrastructure, and insufficient numbers of trained healthcare professionals capable of handling complex emergencies.<sup>10</sup> As a result, patients with urgent medical needs are often referred to better-equipped centres, sometimes located far away, leading to dangerous delays or outright refusal of care. The lack of emergency ambulances and poor transportation infrastructure further exacerbate these challenges. Without significant investment in healthcare infrastructure and human resources, these systemic deficiencies will continue to impede access to emergency treatment.<sup>11</sup>

<sup>7</sup> Compulsory Treatment and Care for Victims of Gunshot Wounds Act 2017, s.1& 2.

<sup>8</sup> Ibid. s.11

<sup>9</sup> Nnebe V, "Patients' Right to Emergency Healthcare in Nigeria: Laws, Limitations and Solutions" (Elsevier BV 2024) <<https://doi.org/10.2139/ssrn.4971013>> accessed May 29, 2025

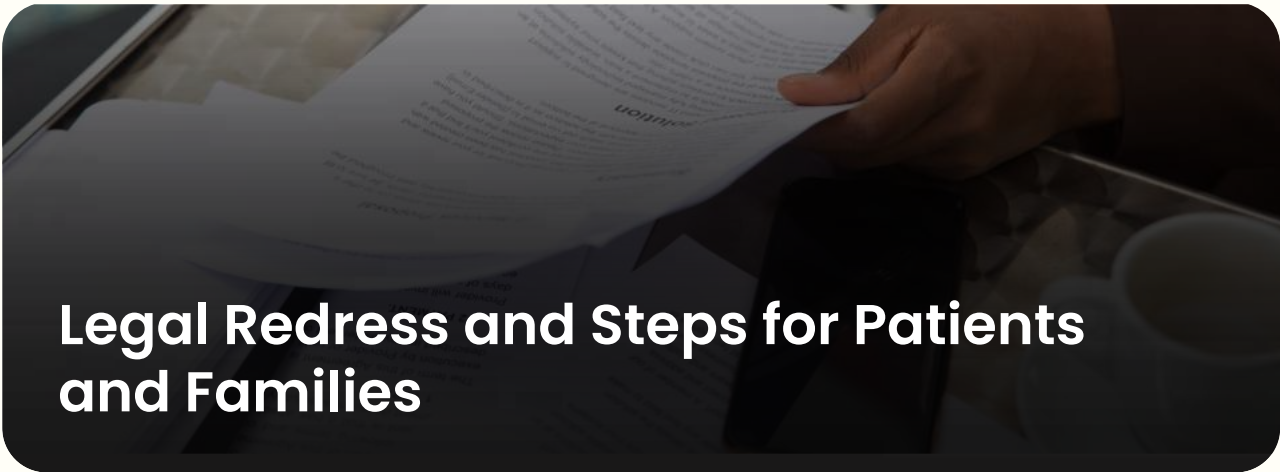
<sup>10</sup> Mgbodi, G.O. (2023). INADEQUATE HEALTHCARE SERVICE ADMINISTRATION AND MANAGEMENT IN NIGERIA AND SOLUTIONS.

<sup>11</sup> Nnebe V, "Patients' Right to Emergency Healthcare in Nigeria: Laws, Limitations and Solutions" (Elsevier BV 2024) <<https://doi.org/10.2139/ssrn.4971013>> accessed May 29, 2025

Additionally, in Nigeria's largely out-of-pocket healthcare payment system, financial concerns frequently influence the provision of emergency care, especially in private hospitals. Many private facilities require upfront payment or deposits before initiating treatment, fearing non-payment or financial losses. This practice directly contravenes the National Health Act's prohibition on refusal of emergency treatment for any reason, yet it persists due to economic pressures.<sup>12</sup> Although the National Health Insurance Authority (NHIA) Act of 2022<sup>13</sup> now mandates health insurance coverage for all Nigerians and legal residents, thus, signaling a shift toward universal healthcare financing. However, implementation gaps and low enrolment still leave many patients without coverage. Lagos State has reinforced this mandate through an Executive Order requiring all residents and employers to subscribe to a health insurance scheme, either through the state agency or approved private providers.<sup>14</sup> However, until widespread compliance is achieved, patients without immediate funds may continue to face denial of lifesaving interventions or dangerous delays while payment arrangements are made. This creates a significant ethical and legal dilemma, as the right to emergency care clashes with the financial realities faced by healthcare providers.

Furthermore, despite legal reforms, outdated bureaucratic practices continue to obstruct timely emergency care in Nigeria. A notorious example is the insistence by some hospitals on police clearance or reports before treating gunshot victims, a requirement explicitly prohibited by law. Such procedural hurdles cause fatal delays, as patients are denied immediate medical attention while awaiting documentation. Moreover, administrative red tape often complicates referrals and transfers between facilities, further delaying critical interventions.<sup>15</sup>

Lastly, the effectiveness of the National Health Act's emergency care provisions is undermined by weak enforcement mechanisms within Nigeria's health regulatory framework. Agencies responsible for monitoring compliance, such as the Medical and Dental Council of Nigeria and state health ministries, often lack adequate funding, personnel, and political support to carry out their mandates effectively. This results in limited inspections, slow investigations of complaints, and rare prosecution of offenders who deny emergency care.



## Legal Redress and Steps for Patients and Families

<sup>12</sup> Nnebe V, "Patients' Right to Emergency Healthcare in Nigeria: Laws, Limitations and Solutions" (Elsevier BV 2024) <<https://doi.org/10.2139/ssrn.4971013>> accessed May 29, 2025

<sup>13</sup> National Health Insurance Act, 2022.

<sup>14</sup> In August 2024, the Lagos State Government issued an Executive Order mandating all residents, employers, and workers in the state to subscribe to a Social Health Insurance Scheme (SHIS). This can be done through the Lagos State Health Management Agency (LASHMA) or a private health insurance provider accredited by both the NHIA and the Lagos State Government.

<sup>15</sup> Daniel Obi, 'Why Doctors Insist on Police Report to Treat Accident/Gunshot Victims', Business Day Newspaper, February 27th 2020. <https://businessday.ng/amp/uncategorized/article/why-doctors-insist-on-police-report-to-treat-accident-gunshot-victims/>



Where emergency care has been wrongfully delayed or denied, affected individuals can take the following steps:

### **1. Seek Immediate Clarification**

When emergency care is denied or delayed, patients or their families should promptly ask healthcare providers for the specific reasons behind the refusal. Sometimes, what appears to be a denial may result from genuine limitations, such as lack of equipment or the need to refer to a better-equipped facility. Understanding the cause can help manage expectations and guide next steps. Immediate clarification also helps prevent misunderstandings that could escalate tensions. This initial inquiry is a critical first step before pursuing formal complaints or legal action.

### **2. Document the Incident**

Accurate documentation is essential for any follow-up action against wrongful denial of emergency care. Patients or their families should record details such as the exact time of arrival, names and roles of healthcare personnel involved, and any explanations given. Keeping copies of any written communications, receipts, or referral notes strengthens the evidence base. This information is invaluable when filing complaints or pursuing legal remedies. Thorough documentation ensures that the facts are clear and supports accountability.

### **3. File Formal Complaints**


Victims of denied or delayed emergency treatment can lodge formal complaints with several regulatory bodies in Nigeria. These include the Federal or State Ministries of Health, which oversee healthcare standards and facility operations. The Medical and Dental Council of Nigeria (MDCN) regulates medical practitioners and can investigate professional misconduct. Filing complaints initiates official investigations and can lead to sanctions or corrective measures.

### **4. Seek Legal Counsel**

Engaging a qualified lawyer is advisable to navigate the complexities of legal redress for denial of emergency care. Legal counsel can clarify the patient's rights and the viability of civil claims such as negligence, breach of statutory duty, or constitutional violations. Lawyers assist in preparing formal petitions, negotiating settlements, or representing clients in court. They also guide patients through regulatory complaint procedures and advocate for appropriate remedies. Professional legal support increases the chances of obtaining justice and compensation.

### **5. Engage Civil Society and Human Rights Institutions**

Civil society organizations and human rights bodies play a vital role in supporting patients denied emergency care. Institutions like the National Human Rights Commission can intervene in cases involving systemic violations or public interest concerns. These organizations provide advocacy, legal aid, and help raise awareness about patients' rights. They also pressure government agencies to enforce healthcare laws effectively. Partnering with such groups empowers individuals and promotes broader reforms in emergency healthcare access.



## Strategies to Improve Compliance with Emergency Care Obligations

Bridging the divide between legal provisions and healthcare practice requires coordinated efforts across multiple fronts. However, we can improve compliance through the following measures.

### 1. Education and Training:

Regular training programs for healthcare workers, especially in private and rural facilities, on the legal requirements and ethical imperatives of emergency care are essential.

### 2. Clear Referral and Treatment Protocols:

Facilities should establish and publicize protocols for the rapid transfer of patients when specialized care is unavailable thereby minimizing delays in emergency care.

### 3. Financial Support Mechanisms:

Government initiatives such as emergency treatment subsidies, insurance schemes, or dedicated funds can alleviate financial barriers to treatment.

### 4. Strengthening Regulatory Oversight:

Enhancing the capacity and authority of regulatory bodies to monitor compliance, investigate complaints, and enforce penalties will deter violations.

### 5. Public Awareness Campaigns:

Educating the public about their right to emergency care fosters demand for accountability and helps patients advocate effectively for themselves

## Conclusion

In summary, although Nigeria has put in place laws to protect patients' access to emergency medical care, persistent obstacles like limited infrastructure, inadequate funding, and weak enforcement hinder the full realization of these rights. Overcoming these issues demand coordinated actions from government bodies and private stakeholders to enhance healthcare financing, increase public knowledge of patient rights, and rigorously apply existing legal provisions. By implementing these strategies, the assurance of emergency healthcare can be strengthened, leading to better health outcomes and the preservation of lives.

## AUTHORS



**Adebomi Adekeye**  
Senior Associate



**Toluwalase Oliver-Jude**  
Associate

# KEY CONTACTS

For further information, kindly reach the contact below:



**Chinyere Okorocho**

Partner, Sector Head, Health & Pharmaceutical

[chinyere.okorocho@jee.africa](mailto:chinyere.okorocho@jee.africa)



**Toyosi Odunmbaku**

Partner, Co-Sector Head, Health & Pharmaceutical

[toyosi.odunmbaku@jee.africa](mailto:toyosi.odunmbaku@jee.africa)

## Telephone

+234 (02) 014626841/3,  
+234-(02) 012806989

## Email

[jee@jee.africa](mailto:jee@jee.africa)

## Victoria Island

RCO Court,  
3-5 Sinari Daranijo Street,  
Victoria Island, Lagos, Nigeria.

## Abuja

42, Moses Majekodunmi  
Crescent.  
Utako, FCT, Abuja

## Ikeja

1st floor, ereke house, Plot 15,  
CIPM Avenue  
CBD Alausa Ikeja  
Lagos Nigeria

## Accra

## Yaoundé

## Harare