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Appraisal of the impacts of human resource management on millennium development goal 6 in Abia state, Nigeria (2000-2015)

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ABSTRACT
The focus of this study is the impact of human resource management on millennium development goal 6 in Abia State (2000-2015). There is a strong link between human resources management and realisation of Millennium Development Goal 6 in the areas of recruitment, selection and compensation. The need to galvanize effort and resources to engender development has in recent times become one of the most preoccupations in the world as the Millennium Development Goals 6 depicted. Methodologically, the study used secondary sources of data collection like textbooks, journals, government documents etc and analysed issues The study adopted qualitative descriptive analysis which is an aspect of content analysis in analysing data collected. Therefore, through holistic discussion, the study found out that Abia State government failed to pay attention in getting information that are dependable which reflected the conditions on ground geared towards realising MDG 6. The study among others recommends that MDG 6 is no doubt concrete and laudable goal that a state in the quest for sustainable development should have embraced for its actualisation.

Keywords:
Human Resource Management, Millennium Development Goal 6, Recruitment, Policy, Abia State.

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1. INTRODUCTION

In the year 2000 Millennium Declarations, United Nations Organisation introduced eight goals for development known as Millennium Development Goals (MDGs). The aims of MDGs were to enhance the conditions of people by the year 2015. The targets of the goals were to develop economies like Nigeria, in other to raise its socio-political and economic levels to a reasonable standard by the United Nations (Izueke, 2009). Consequently, this study focuses on Millennium Development Goal 6 (MDG 6) in other to examine the roles of human resources management area such as recruitment in combating HIV/AIDS, malaria and other diseases in Abia State which was the sixth goal among the eight goals in the United Nations Millennium Summit in the year 2000 (Okotoni, 2004). Goal 6 had three (3) targets. Target 6A – to stop the spread of HIV/AIDS by the year 2015, target 6B – world-wide medical care for HIV/AIDS for everybody who are in need of such treatment, and target 6C – to stop the frequency of malaria and other diseases by 2010. These targets were to accelerate global progress in development through the prevention of the infection of Human Immune Virus and malaria, number of young people between the age bracket of 15 – 24 with broad knowledge of HIV/AIDS, number of people who are highly infected with HIV and with the means to get the required drugs, proper HIV test and availability of condom in case of necessity; hindering of transmission from the mother to the child, increasing the rate of treatment and given of necessary care for those who are infected by this transmittable disease; number of children below 5 years who are sleeping with treated bed nets, the rate of children below the age of 5 with fever who received the adequate anti-malaria drugs, the total number of death through tuberculosis and the number of such sickness discovered and treated adequately (Okotoni, 2004). The work on HIV intimately is linked to the maternal, newborn child, adolescent and its continuous hindering and treatment in all age brackets the age groups.

Recruitment of workforce/manpower could be central to the achievement of the MDG 6 in Abia State. As Onah (2003) observed, without an adequate, skilled and well motivated workforce operating within a sound human resource management programme, development is not possible. Therefore, there is a strong link between human resources management and achieving Millennium Development Goals on the areas of recruitment, selection and compensation. The need to galvanise effort and resources to engender development has in the recent times become one of the most preoccupations in the world as the Millennium Development Goals (MDGs) depicted (Chukwujekwu,2007). Nothing less than a satisfactory attention to the management of human resources by government and all major actors are fundamental in the realisation of the MDGs (Dressier, 2008). The focus of MDG 6 on the battle against Human Immune Virus/Acquired Immune Deficiency Syndrome was extended to malaria and other diseases that are transmittable, this appeared to be in synchronisation with the assertion of (Dele, 2002) who opined that having a wide focus on HIV/AIDS gave a misleading account of the budget on health, helped flows and health plans in a way that can affect health status adversely (HULME, 2009).

Furthermore, in a carefully considered path for the realisation of the development agenda, the regime of former President of Nigeria, Chief Olusegun Obasanjo was determined to raise the country to an enviable height (Aluko, 2009). As such, the then administration formulated the National Economic Empowerment and Development Strategy (NEEDs) which laid a foundation to reduce the level of poverty, generate employment opportunities, wealth creation and value re-orientation, because the poor are vulnerable diseases. In accordance with the goals of the Millennium Development Goals, NEEDs was a reform programme aimed to fight against poverty by creating job opportunities and empowering the people. (Dele, 2002). Abia State worked on advocacy programme to actualise the Millennium Declaration on HIV/AIDS, malaria and other diseases. In line with the development programme, the Abia State Economic Empowerment and Development Strategy (ABSEEDS) provided a state-wide sensitisation platform for stakeholders to embrace the benefits inherent in the Millennium Campaign. Abia State Economic Empowerment and Development Strategy (ABSEEDS) was structured in line with the National Economic Empowerment and Development Strategy (NEEDS) at the federal level. At the Local Government level, advocacy focused on value re-orientation and structured implementation of the policy thrusts through corporate collaboration and public-private partnership initiative in support of the grassroots outreach and development programmes. Local Economic Empowerment and Development Strategy (LEEDS) advocacy campaign informs, inspired and encouraged stakeholders' involvement, total commitment and measurable action. (Abia State Planning Commission, 2006).

1.1 Statement of the problem

The realisation of the Millennium Development Goal 6 in Abia State was seriously marred by a number of factors which made the attainment of the goal highly impossible. There were cases of poor or non implementation of community health projects by some local governments. As a result of this, patients missed medical appointments, needing but not

receiving other important health care services, or missing doses of HIV treatment particularly for children and those living in rural areas. Some of local governments in Abia State were not able to access funds for the implementation of goal 6 projects (Edwin & Chukwuka, 2019). There was Abia State governments' non-intention in executing and evaluating projects with effective parameters to measure achievement of goal 6 because of bad governance on the part of Abia State government leaders who did not adopt appropriate development approaches or models to realise goal 6. (Eneanya, 2010).

Many of the MDG 6 related projects like distribution of insecticide treated bed nets were politicised in terms of location and usage. This did not guarantee accessibility to the supposed beneficiaries. There was no coherent policy, process or institutional framework that coordinated all related activities of goal 6 project implementation in Abia State (Kayode, 2012). Too much emphasis was placed on public expenditure on the so-called goal 6-related activities, which actually led to a large gap between the large public expenditure and real achievements. In Abia State budget, there was poor provision for critical areas such as health. At extreme situations, budgetary provisions did not approximate what was implemented on goal 6 projects (Lawal, 2012). The present state of infrastructural decay in both rural and urban areas in Abia State was a serious threat for the realisation of goal 6 (Ogunniyi, 2015).This calls for reconsideration of critical issues on infrastructural renaissance within the state. The manpower and material resources in Abia State are strong enough to make her one of the best State in Nigeria (Abubakar, 2013). But much of these potentials remained untapped. Within the years under review, there was politicisation of recruitment in Abia State. That is, recruitment based on political patronage or determined by the political class. There was the use of other criteria other than merit, qualification and technical know-how in the recruitment process. This politicisation of recruitment was the unconventional practice of employing political interest by those in the public offices to fill existing and non-existing vacancies in the health sector in Abia State without following due process. This process of recruitment and that was based on other mundane factors other than merit and competence criteria contributed in making full attainment of the MDG 6 by 2015 difficult. Abia State and its 17 Local governments including the private sector did not fully harness the available resources to combat goal 6. Lack of accountability and corruption and/or embezzlement (or mismanagement) of funds had been identified as the greatest (combined) threat to MDG 6 in Abia State, because funds meant for the goal 6 projects did not reach destinations, but ended up in private pockets. No meaningful progress can be attained in any development programme under situation of zero-tolerance for corruption and lack of accountability (Ahmed, 2013). Corruption was the bane of abandonment of most MDG 6 projects such as hospitals and maternity centres and its equipments by contractors and implementing agencies and ministry of such projects.

1.2 Research questions

- What is the relationship between recruitment and goal 6?
- How did poor implementation of recruitment policy affect the realisation of goal 6 in Abia State before the end of 2015?
- Did MDG 6 make a significant progress in Nigeria particularly in Abia State with human resource management before the end of 2015?

1.3 Objective of the study

he broad objective of this study is to examine the roles of human resource policy on recruitment in combating HIV/AIDS, malaria and other diseases in Abia state (2000 – 2015). The specific objectives are as follows:

- To ascertain the relationship between recruitment and goal 6.
- To investigate how poor implementation of recruitment policy affected the realisation of MDG 6 in Abia state before the end of 2015.
- To examine whether MDG 6 made a significant progress in Nigeria with human resource management before the end of 2015.

2. LITERATURE REVIEW

2.1 Human resource management

Human resource management (HRM) has to do with actions patterned to stimulate and manage an organisational workforce (Byers and Leslie, 2004). They further asserted that the success or failure of organisation rest upon the shoulders of the manpower. Therefore, an organisation should as a matter of fact hire, retain and maintain the right caliber of workers who will be determined to give their best in other to actualise the organisational aims and aspirations. According to Byers and Leslie (2004), the concept is a modern term for what has traditionally been referred to as personnel administration or personnel management. Sharma and Sadana (2007) also believed it is a recent terminology used for personnel administration which started to gain ground from the mid 1970s and had since then continued to gain strength after strength.

Armstrong (1992) posits that human resource management is a problem bedeviling the modern organisations today. Human resources management is a complex concept hence, managing people is a major task for any organisation to survive and achieve its set out objectives. Human resource management is the process of obtaining and maintaining a satisfactory and satisfied work force. The human resources function deals with the human element and organisation in a work place. According to Frank (I974), human resource management is a series of activities in which the job, individual and organisations interact as each develops and changes. Frank observed that there are two main activities within the area of human resource. The first area has to do with recruitment, selection, placement, compensation and appraisal of human resource. This group of functions is usually known as personnel or human resource utilisation. The second category consists of people who are working with the existing manpower to ensure their improvement. The activities are planned to enable current employees to adopt new responsibilities. These activities are concerned with personnel development. Human resource management involves obtaining and maintaining the best employees so that they can stay and give their best to the organisation (Cuming, 1968). In other words, it is not only sufficient to obtain the best manpower through the recruitment process to meet the target of the organisation, but to create a conducive working atmosphere so that employees can cope and be happy with their jobs. Mathis and Jackson (1997) see human resource (HR) management as the design of well-structured and planned systems in an organisation to ensure the effective and efficient use of the talents of human beings to accomplish organisational goals. Similarly, Griffin (1997) sees HR management as the set of organisational activities aimed to attract, develop, and maintain an effective manpower.

2.2 The Functional Areas of Human Resource Management

Recruiting and Staffing – The Human Resource expert is duty bound to recruit managers within an organisation and to come up with modalities to employ different kinds of workers. This consists of scouting for employees, inserting job openings, cross-checking or screening of curriculum vitae and applications. More so, he conducts interviews, ranks applicants according to their performance and recommends remuneration package, giving of appointment letters to successful candidates and organising orientation programmes and ensuring that the newly employed staff are enrolled in the reward structure of the organisation (McConnell, 2005).

Benefits – The staff welfare packages in the form of benefits offered by the employer to the employees comprises of health insurance, retirement benefits, vacation , sick leave, family leave and among others. The aforementioned benefits is necessary for the growth of the organisation because it will be of immense assistance for the employer to obtain quality staff (Aquinas, 2009). This means that employees should be aware of the diverse compensation packages, the insurance firm with the best and right benefits and with the appropriate condition and more importantly guaranteeing that the plans are in synchronisation with the laws of the Federal government. Meetings are held as and when due with employees with respect to their compensation packages, such meetings enables the employer to educate their employees on the dimension they are going the subsequent year

Compensation – This helps hiring managers to write and update the job descriptions and to maintain them yearly; reviewing salary so as to ensure that what the organisation is paying its employees are what is obtainable at the market. This also involves maintaining internal hierarchy with regards to the payment system and developing, maintaining a salary administration plan for the organisation and giving recommendations with regards to salaries and bonuses, etc.; writing and recommending variable pay plans; making sure that the organisation complies with the various wage and hour laws, implementing and maintaining a creative performance evaluation system for all employees (Aquinas, 2009).

2.3 Employee and labour relations

Employees must conform with regulations whether they belong to the labour union or not. Every employee should be conversant with the process of collective bargaining and while non-union employers may have contracts for employees who are considered sub-contractors. In any case,

it falls within the scope of human resources to sketch up a contract, agree with the modes of operation, have the adequate information of what the organisation can give or provide in view of the remuneration and be acquainted with what the staff are looking for with respect to their compensation. Manpower experts must also be very knowledgeable with the process of bargaining and should be a neutral person, and harnessing the desire every person involved (McConnell, 2005).

Organisational Design – Strategically assisting the management team with furthering the mission, vision and business goals of the organisation through a solid organisational structure is paramount. The HR professional will maintain all organisational charts; make recommendations as to changes within the structure that would benefit the organisation; understand how to manage the organisational charts; tracks turnover rates and reasons; develops career ladders within job classifications; is involved with succession planning, and promotes active employee engagement activities throughout the organisation (Sharma, 2009)

Training and Development – Recommends and may create and conduct training and development programmes for the entire organisation to include: anti-harassment and discrimination avoidance, diversity, customer service skills, business communication skills, etc. Works with managers to create and implement on-the-job training opportunities for all employees (Anderson, 2014). Tracks all training programmes and employee participation and follows up with managers and employees to measure utilisation of skills learned as well as evaluating additional training resources or needs.

2.4 Human resources compliance

The laws of the federal and state governments stipulates the hours an employee can spend in the office per day, what can lead to an employees' disengagement, protection against discrimination, and the duration of an employee' leave. Therefore, it is pertinent to note that an employer must always work in one accord with the law. For instance involves an employer should state in clear terms the compensation due to the employee in case the employee sustains an injury in the course of discharging his duties (Anderson, 2014).

2.5 Human resources policy on recruitment

Simply put, policy on recruitment is declaration on how to employ. It spells out the organisation's best option in the practice of employment and enhances regular employment procedure. Thus, HRM policies explains the disposition and what the organisation expects more importantly the treatments given to people and the decisions of individuals which will lead to equality of treatment among people which will ultimately be used as point reference for the overall organisational development (Anderson, 2014)

2.6 Millennium Development Goals (MDGs)

The Millennium Development Goals (MDGs) are eight international development goals that were set up sequel to the millennium gathering of the United Nations Organisation in the year 2000, consequent upon the adoption of the UN statement. Every member state of UN (189 countries as at then) and 193 at the moment), and no fewer than 23 international organisations, made concerted efforts geared towards the realisation of the under-listed Millennium Development Goals by 2015:

- To eradicate extreme poverty and hunger,
- To achieve universal primary education,
- To promote gender equality and empower women,
- To reduce child mortality,
- To improve maternal health,
- To combat HIV/AIDS, malaria, and other diseases,
- To ensure environmental sustainability, and
- To develop a global partnership for development.

Each goal has a definite target, and date for its realisation. To quicken progress, the G8 finance ministers harmonised to give sufficient money to the World Bank in June 2005, the International Monetary Fund (IMF) and the African Development Bank (ADB) to offset $40 to $55 billion debt which members of the Heavily Indebted Poor Countries (HIPC) owed so that they can redirect resources to programmes to enhance health and education and for the reduction of poverty. (www.unitednationsmillenniumgoals, 2013).

2.7 Millennium Development Goal 6: Combat HIV/AIDS, malaria, and other diseases

- *Target 6A: Have halted by 2015 and begun to reverse the spread of HIV/AIDS*
  - Number of people infected with HIV/AIDS between the ages of 15–24
  - Condom use at last high-risk sex
  - Number of persons between the ages of 15–24 with broad knowledge of HIV/AIDS
- *Target 6B: Achieve universal access to treatment of HIV/AIDS for all those who need it by the year 2010*
  - Population of people with high level of HIV infection with access to antiretroviral drugs
- *Target 6C: Have halted by 2015 and begun to reverse the incidence of* malaria *and other major diseases*
  - Total number of deaths that has to do with malaria
  - Number of children below 5 years sleeping under treated bed-nets
  - Number of children below the age of 5 with fever who are treated with appropriate anti-malarial drugs
  - Incidence, prevalence and death rates in relation with tuberculosis
  - Number of tuberculosis cases detected and cured under DOTS (Directly Observed Treatment Short Course) (www.millenniumdevelopmentgoals,2000).

MDG 6 aims to combat HIV/AIDS, malaria and other diseases. HIV, malaria and other diseases have a direct and indirect impact on rural development, agricultural productivity and food and nutrition security. At the same time, food and nutrition insecurity and malnutrition can increase vulnerability to disease. Food and Agricultural Organisation (FAO) supports policy makers and programme planners to incorporate HIV, malaria and other disease considerations into food, nutrition and agriculture policies and programmes (Sharma and Sadana 2007).

2.8 The nexus between human resource management and MDG 6

The nexus between human resource management and millennium development goals is well pronounced on the use of human resources in achieving MDGs. Human resource management has a strategic role to play in the workforce necessary in combating HIV/AIDS, malaria and other diseases (Okotoni, 2004). To achieve MDG 6, there must be proper recruitment, selection, placement, compensation and periodic appraisal of health workers in Abia state (Abga. 2004).

2.9 Theoretical Framework

The human relations approach - This approach according to Elton Mayo sharply debunked the grandiose claims of the scientific management, which saw man as an economic animal who would respond to financial and material incentives. The human relations approach clearly departed from this idea and ushered in the new preoccupation with worker motivation, participation, satisfaction, and the like. Its primary aim was the determination of the factors that significantly influence the efficiency and productivity of workers. The human relations approach did not reject totally the importance of financial incentives on output but argued that this is not their (workers) first concern. Sometimes they are more interested in the way their superiors treat them, good working environment, they like to be praised, know what is expected of them, where they stand in relation to their boss' expectations; they like to feel independent, express their feelings, listened to, consulted and given a sense of belonging. All these constitute socio-psychological factors, which automatically will influence productivity.

2.10 Hypotheses

- The relationship between recruitment and goal 6 is the workforce used in the development programme.
- Poor implementation of recruitment policy affected the realisation of MDG 6 in Abia state before the end of 2015.
- MDG 6 did not make a significant progress in Abia State with human resource management before the end of 2015.

3. RESEARCH METHODOLOGY

For the purpose of generating data for this study, the researcher made use of documentary sources which is also known as "Secondary Sources" from text books, journals, government documents or from related literature on human resources management and millennium development goal 6 in Abia State. By documentary sources, we mean any written material (whether hand-written, typed or printed) that is already in

existence. The study adopted qualitative descriptive analysis which is an aspect of content analysis in analysing the data collected.

4. DISCUSSION

Hypothesis one - The relationship between recruitment and goal 6 is the workforce used in the development programme.

On the areas of nexus is the workforce involved in the slight progress made in achieving MDG 6. A critical look at the targets of MDG 6 showed that the progress made involved recruitment, selection, placement, compensation and periodic appraisal of health workers (Abga. 2004). To achieve the MDG 6 target, government invested on the welfare of health personnel to ensure efficient delivery (Sungberg, 2006). The proper recruitment of medical and paramedics at all levels involved ideally proper man power and planning based on the objectives of the State's Ministry of Health. As Onah (2003) observed, presently, the labour market is now more favourable to employers. At the moment, a critical decision is not just attracting employees but the best way to select them. Onah's observation agrees with the widely held view that Nigeria is blessed with abundant natural and human resources. In other words, selection has become a problematic process because, the labour market is jam-packed with candidates seeking or competing for scanty vacancies. The infrastructure in terms of building and equipments in hospitals and health centres in Abia state remain dilapidated and old. When the health sector of the State is relegated to the background or its objectives compromised, a lot of things are bound to be affected.

The MDG of combating HIV/AIDS, malaria and other disease have human resources implication. It is generally said, a healthy country makes a healthy work force, and a healthy work force contributes significantly to the achievement of organisational goal. Implicationally, a healthy work force will facilitate the achievement of MDG 6 (Clement, 2007). The link between human resource management and MDGs is much pronounced in health. Shortcoming in health personnel makes health system to suffer resulting in preventable diseases. When human resources for health are in crisis, health system suffers as the case in Nigeria and most especially, Abia State (UNDP, 2015). Fundamentals in the realisation of MDG 6 are a motivated and committed work force with transformed work attitude (Okafor, 2005). Absenteeism, ineptitude to work, laxity, apathy, tardiness, embezzlement, indiscipline, waste, sluggishness, etc, are commonly observed in the public health system. This has been attributed to various poor reward system, dishonest personnel appraisal, lack of feeling of challenges by young health officers who are not used to work pressure, manipulation of the principle of meritocracy in recruitment and promotion, weak and ineffective on-the-job training programme and others (Omyala, 2007). Resolving these problems would have helped to bring about a motivated and committed work force pertinent in achieving MDG 6. The above discussion supports our hypothesis that the relationship between recruitment and goal 6 is the workforce used in the development programme.

Hypothesis two - Poor implementation of recruitment policies affected the realisation of MDG 6 in Abia state.

In Abia State, human resource management policy on recruitment in government establishment and parastatals was not based on merit. More importantly, management policies were quickly made by every successive government, often without any thought of continuity of previous ones. This leads to non-execution or neglect of many laudable policies that could have ensured the realisation of MDG 6. Since 2000, many policies have been made with some of them passing through the Abia State House of Assembly, thereby giving them the much needed legal backing. It takes little or nothing for policies to be made in Abia State, but to implement policies is a whole different issue undermined by some factors that are man-made and perpetuated by god-fatherism. These factors which includes corruption, bad leadership, 'Mamacracy' witnessed during Orji Uzor Kalu's regime, 'Familicracy' witnessed during T.A Orji's government, and well-pronounced god-fatherism obviously seen in the government of Okezie Ikpeazu etc. All these frustrated policy implementations in Abia State and consequently made it difficult to achieve goal 6. Abia State is the only state in Nigeria that has witnessed a persistent rise in HIV prevalence among African National Congress attendees since 2000, increasing from 3.0% in 2000 to 7.3% in 2010. The state general population prevalence increased from 1.6% in 2007 to 3.2% in 2012, compared to a declining national prevalence from 3.6% to 3.4% in 2007 and 2010, respectively. There is significant urban-rural disparity in HIV prevalence in the state, with a higher prevalence reported in rural areas (7.7%) than in urban areas (2.7%) in 2005. However, in 2010, a lower prevalence was observed in rural areas (3.0%) than in urban areas (9.0%). HIV prevalence among national survey revealed low knowledge of HIV prevention methods (41%) and low level of comprehensive knowledge of HIV/AIDS (12%) in Abia state, as well as multiple concurrent sexual partners, low condom use (89%), high prevalence of sexually transmitted infections (15%), and poor care-seeking behaviour. Also, use of traditional medicine and charms, alcohol and drug use, participation in religious activities, and careful selection of clients were identified as measures adopted by sex workers to protect themselves. Until 2005, there was no coordinated HIV response in the state, as response to HIV was an individual's responsibility. The state's HIV response commenced in 2005 upon recognition of HIV as a threat to development, hence its inclusion in the state development strategy.

Table 1. Summary of MDG 6 Progress in Abia state

Indicator	Remarks
HIV prevalence among pregnant young women aged 15 – 24	Weak
Young people between 15–24 years that use condom during sexual intercourse and without a regular sexual partner.	Weak
Number of people within 15–24 years of age with broad knowledge of HIV and AIDS	Weak
Incidence of Tuberculosis per 100,000 population	No progress
Proportion of the population with advanced HIV infection with access to antiretroviral drugs	Weak
Proportion of under-five children sleeping under insecticide-treated bed nets	No progress

Source: Abia State MDG 6 End Point Report (2015).

There are an estimated 139,517 people living with HIV in Abia State between 2000 - 2015 which makes it one of the states with the highest burden of people living with HIV in Nigeria. This had implications for mother-to-child transmission of HIV (MTCT). Although implementation of HIV interventions in the state was based on globally accepted standards, the response did not keep pace with the epidemic. A review of the first strategic plan in 2010 revealed that the state failed to attain its objective of reducing the prevalence from 3.7% in 2005 by 40% in 2010; rather, it rose to 7.3%. Reasons for this was poor policy implementation. When human resource management policies are relegated to the background and/or when policies relating to the pandemic diseases such as malaria, HIV/AIDS, tuberculosis etc are neglected, subverted and not properly implemented due to lack/shortage of manpower, poor reward structure etc, the result is that in practical terms, these problems remain and get worse as days go by. These problems are the issues that goals and targets of the Millennium Declaration were meant to confront. The above assertion supports our second hypothesis that poor implementation of recruitment policies affected the realisation of MDG 6 in Abia State.

Hypothesis three - MDG 6 did not make significant progress in Abia State with human resource management before the end of 2015.

The prevalence of HIV among pregnant young women aged 15–24 years steadily declined from 5.4% in 2000 to 4.1% in 2010 (end-point status). The decline resulted from the implementation of tested high impact interventions implying the need for consistent implementation of such high impact interventions in the sector. With respect to the incidence of tuberculosis per 100,000 people, the efforts did not produce appreciable results (MDG monitor, 2012). In the past 7 years, the value for this indicator fluctuated between 343.00 in 2005 and 339.00 in 2015. The end-point status of the incidence of tuberculosis in Abia State was 338 as at 2015 (MDG End Point Report (2015). This calls for renewed efforts, more resources and interventions in order to drastically reduce the prevalence of tuberculosis. Some of the progress made include: The decline in the rate of Polio in Abia State (July 24, 2014 - July 24, 2015) necessitated Abia State to join her counterparts in the country in celebrating Polio reduction but not total eradication. However, there was effective battle against the outburst of the deadly Ebola virus (MDG monitor, 2015). It is worthy to note that the aforementioned slight progress was due to employment of more health workers and upward adjustment in the reward structure to encourage personnel in the health sector at that time.

More so, despite the efforts/involvement of health, inadequate and unreliable data was also a challenge. Abia State did not have sufficient data or apparatus to gather and subject information analysis. Due to insufficient information, actions and plan to meet up with the mandate of MDG became cumbersome. Shortage of data was not a new phenomenon and its

impact was the vanishing of systematic method of data collection and analysis for national planning and development across the thirty (36) states. The aforementioned problem delayed activities that could lead to planning and tracking of the progress towards the MDG 6 targets because the available was not reliable or consistent. Consequently, this challenge was ascribed to the fact that the ability of institutions to collect data was very weak. For instance, assessment of progress towards realising MDG 6 since 2006 and the assessment of the Conditional Grants Scheme (CGS) regularly showed shortage of data (Phillips 2010). Therefore, this explains the cogent need for quality information in the planning of programmes and projects, and for more importantly for monitoring. Moreover, Abia state had problems in ascertaining where to designate projects due to the fact that they have inappropriate data. These challenges were due to lack of capacity to conduct relevant surveys and studies (AZZubair, 2012). Overall Conclusion on Goal 6: Appreciable progress in combating HIV and AIDS, but weak progress in other diseases. Goal not met (MDG End Point Report (2015). The discussion above supports our third hypothesis that MDG 6 did not make a significant progress in Abia State through human resource management before the end of 2015.

5. FINDINGS

The study found out that:

- Abia State government failed to pay attention in getting information that are dependable and which reflected the conditions on ground geared towards realising MDG 6. It was hard to determine the amount of work to be done which can facilitate the realisation of goal 6 and also in estimating and predicting the future.
- No visible collaboration between the private sector, civil society and even the donor community that could have promoted better harmonisation and implementation of policies. There was little participation and involvement of the relevant stakeholders in Abia State that would have promoted collective ownership of the development plan as against previous practices and strategies dominated largely by the state.
- Activities of the various anti-corruption agencies such as Independent Corrupt Practices and other Related Offences Commission (ICPC), the Economic and Financial Crimes Commission (EFCC), the Code of Conduct Bureau and Due Process Office were not well felt so as curb the menace of corruption among Abia State government functionaries which would have facilitated the implementation of development polices. Corruption is a serious obstacle to the economic development of Abia State, and thus militates against her efforts to face the challenges of HIV/AIDS and other diseases.
- Abia State had a number of policies that are meaningful, laudable and capable of bringing about sustainable development to the country. Between 2000 - 2015 many policies were made with some of them passing through Abia State House of Assembly, thereby giving them the much needed legal backing. Also, policy formulation and the establishment of agencies and parastatals for their implementation have been on the increase over the years. Yet, to implement policies was a whole different issue undermined by some factors that are man-made and perpetuated by some State actors. These factors which includes corruption, bad leadership, god-fatherism, etc, frustrated policy implementation in Abia State and consequently made it difficult for her to attain huge developmental strides including achieving the MDG 6..
- Up till now, Abia State is still one of the States in the Nigeria that has not been able to completely destroy poliomyelitis (polio), particularly due to the people's misunderstanding that the vaccine meant to provide immunity against the disease is a strategy to hurt their children.

6. RECOMMENDATIONS

In the light of the foregoing, the following recommendations are suggested:

- There should be collaboration between the private sector, civil society and the donor community in Abia State that would promote better harmonisation and implementation of policies. Significantly, there ought to be full participation and involvement of the relevant stakeholders in Abia State which will promote collective ownership of the development plan as against previous practices and strategies dominated largely by the state.
- The activities of the various anti-corruption agencies such as Independent Corrupt Practices and other Related Offences Commission (ICPC), the Economic and Financial Crimes Commission (EFCC), the Code of Conduct Bureau and Due Process Office should be strengthened without bias in order to tackle and address effectively the culture of corruption in Abia State. The government of Abia State should be committed to fighting corruption headlong.
- MDG 6 is no doubt a concrete and laudable goal that a state in the quest for sustainable development should have embraced for its actualisation. This is why effective policy implementation should be emphasised at all times to ensure the realisation of developmental targets.
- Abia State ought to have concentrated in gathering information which is dependable and which is a reflection of the actual conditions of things geared towards realising MDG 6. This would have helped to minimise the efforts be dissipated towards the realisation of goal 6. Human ability ought to have been enhanced, made stronger and updated to facilitate the achievement of the MDG 6 before the end of 2015.
- The need for awareness on polio should have been strengthened to debunk the wrong idea by Abians that the vaccine meant to provide immunity against the disease is a strategy to hurt their children.

7. CONCLUSION

The end of MDG 6 demonstrated that Abia State has a long way to go in seeking development. The era which ended with challenges in varying states with Abia state as no exception, has steered the establishment of a post development agenda known as the Sustainable Development Goals (SDG). The SDGs which reflects a broader and better coverage of the totality of the social, economic, and institutional system if adopted and pursued with greater commitment and meticulousness will improve the wellbeing and lives of a country's citizenry. Hence, as Abia State is on board in the post development agenda, the lessons from the MDG 6 will help in navigating challenges that might be faced in the new Sustainable Development Goals and in formulating holistic policies needed to combat HIV/AIDS, malaria and other diseases in Abia State.

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