

IMPLICATIONS OF POLITICAL UPHEAVAL ON QUALITY HEALTH SERVICE DELIVERY IN BAYELSA STATE

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Abstract

This paper seeks to explain the relationship between politically motivated crises and its impacts on the health care system in Bayelsa State. It adopts a multidimensional approach in examining political upheaval in order to eschew the restrictive application of the concept with the concomitant ideological underpinning that views conflict as any undesirable phenomenon that should be abhorred. It is the unequivocal contention of this paper that conflict, is even desirable as it is capable of upturning tilting structures in society. Indeed, some types of upheavals encourage new solutions to problems, stimulate creativity, motivate change, promote organizational stability, help individuals and groups establish identities and serve as safety valve to indicate problems. The paper therefore, adopts political economy as the theoretical framework of analysis, essentially, to explain the inherent contradictions that ignite changes in society. From our painstaking investigations, with observation as its methodology, the paper invalidates the hypothesis that the deplorable health situation in Bayelsa State is a function of politically motivated crises. It argues that quality health service delivery remains an illusion even without political crises. It therefore, looks at political upheaval in its connotative sense as a conscious human effort to restructure the entire sector. Finally, the paper proffer solutions towards improving quality health service delivery in Bayelsa State.

INTRODUCTION

The two variables under discussion are fundamental issues that hinge on our everyday life. It takes painstaking research for us to exhume and unravel the relationship between the two variables viz: political upheaval and quality health service delivery in Bayelsa State. However, it is worrisome and drab to discuss an issue that is considered obsolete and non-fashionable in modern times, especially in a democratic setting like ours as it is capable of creating an erroneous impression about the researchers as people that encourages conflict. Viewing from the layman's perspective, political upheavals are undesirable phenomena in society and so totally detested.

From a sociological perspective, conflict is regarded not only as an inherent aspect of society but also a necessity that requires encouragement (Oyibo, 1995:144). Drawing practical illustrations from the recent political uprising in the Middle-East and parts of North Africa which resulted in the ousting of Hosni Mubarak of Egypt, Ben Ali of Tunisia and the attempt to unseat the demigod in Libya underscores and demonstrates the functional importance of conflict in society. The conceptual frame-work below will illuminate the ambiguities.

Furthermore, if the claim by the Nigerian Medical Association in conjunction with Mortein in a television advertisement is anything to go by, then there is urgent need for a State of emergency in the health sector in Nigeria. The association claims that about 110 million people are affected with Malaria in Nigeria yearly and about three hundred thousand people die out of those affected. This is a very sorry and pathetic situation that calls for serious attention.

In the light of the above, this paper seeks to unravel the relationship between making radical changes in health policies and to ensure improvement in the health sector. It will also help to reshape public

policy objectives in the health sector and promote best practices in Bayelsa State. Finally, the paper attempts to proffer solutions to the research puzzle: **Does any significant relationship exist between political upheaval and quality health service delivery in Bayelsa State?**

THEORETICAL/CONCEPTUAL FRAME-WORK

Theories are fundamental to giving a detailed explanation of variables because they help to unravel the relationship between variables in a study. A Plethora of theories exists in the social sciences that examine society at large. The researchers enjoy considerable degree of liberty in the determination of the choice of a theory. The variables under investigation play pivotal influence in the choice of a theory. In this particular instance, the variables under investigation hinge on contradictions that generate changes in our society. Viewing from this perspective, the choice of political economy as the theoretical framework of analysis becomes suitable and most appropriate.

From the standpoint of a theory, useful in the analysis of reality, essentially, to reduce biases, political economy examines the reciprocal relationship between political and economic forces (Igwe, 2007:333). As a unit of analysis, political economy derives, in part, its foundation from Marxism. One underlying assumption of Marxism is the conviction that reality is an embodiment of contradiction and change is a product of this interaction. In his dialectical examination of society, Karl Marx in Sabine (1973) argued that by the inherent contradictions in capitalism, revolution is inevitable in society. This is so because society is sharply divided into two dominant antagonistic classes, viz: the bourgeois and the proletariats. In the manifesto of the Communist Party, Karl Marx argued that apart from the primitive society, all other epochs have had two contending classes with varying interest and the change from one stage to another depended on this level of contradiction. Men consciously and/or unconsciously entered into relations of production with one class controlling the means of production and the forces of labour, the producers of surplus value, are completely alienated of their right. This mode of production determines all other structures.

From the decline of the Eastern bloc, Marxism is no longer fashionable and so considered obsolete, but has still maintained an increasing utility in the analysis of social phenomena. The choice of political economy as the theoretical framework of analysis, deriving its foundation from Marxism is also suitable in the context of the increasing utility. The variables under investigation deal on violent change and improvement in the health system in Bayelsa State. This expected violent change in the political sector corresponds with the underlying assumption of Marxism that a phenomenon is an embodiment of contradiction, capable of causing an improvement in the health sector of Bayelsa State. The unresolved ambiguities will be illuminated by the conceptualization of political upheaval below.

POLITICAL UPHEAVAL

While looking at the imminent political upheaval, the Late Murray Rothbard, a famous Austrian economist and libertarian, published a collection of essays under the title "making economic senses." One subsection was entitled "**politics as economic violence.**" Rothbard's reasoning was predicated on the ground that politics precludes freedom running its natural course. Expression of such a liberal sentiment is invidious and most intolerable as it expunges politics from economics. Any attempt to extricate politics from economics undermines the coherent functioning of the different structures, each reinforcing one another to produce an effective integrity. This paper totally repudiates the sentiment expressed above in the application of the compound concept, political upheaval.

The new instability in international finance reinforced perception that the global economy was about to enter into an era of significant upheaval (Ravenhill, 2004:16). This view expresses fears of a deep depression in the economic sphere judging from the astronomical increase in the prices of goods at the global arena. It shares a great deal of connotation with the sense upheaval is used in this paper. Implied in the above expression of fears is the identification of a problem with the natural proclivities for a solution. What makes it different from the context used in this paper is the lack of a conscious effort to forestall its occurrence.

From the foregoing analysis, it shows that political upheaval is used in the context of a conscious human effort, always within the purview of the law, to identify the inadequacies and pitfalls of a part in a system, its adverse consequences on other parts, essentially to fashion out acceptable designs with a view to bringing about an improvement in the system. As part of its empirical indicators, it involves coming up with lofty policy options, influencing such policies through trade union activities, creating awareness on the dangers inherent in certain patterns of behaviour, prudence in harnessing available resources and to eschew, in the extreme, the issue of corruption as all efforts could be brought to naught if this scourge is not controlled. Hertzberg (2004) wrote: "the polish revolution has done all this, and more, without the slightest

hint of violence, and without the loss of a single life.” Political upheaval is used in this context viewed as a revolution, at bringing about radical changes in a system.

BAYELSA STATE HEALTH SYSTEM: A BRIEF EVALUATION

A cursory look at the health system in Bayelsa State, embodying health facilities, manpower distribution, recurrent and capital expenditure as provided in the annual budget, the various health schemes (past and present), health policies, etc, shows a massive decline in the quality and so falls short of international standards, especially when viewed against the backdrop of the set of criteria for the attainment of the Millennium Development Goals adopted by 189 countries in September, 2000, aimed at bringing significant improvement in the living conditions of the third world people in the year 2015. With only two major hospitals in the state, namely, the Federal Medical Centre and the Niger Delta University (NDU) Teaching hospital – with the former being a creation and so managed by the Federal Government and the latter, obviously, a product of a fire-brigade-approach aimed at expeditiously meeting the requirements for the accreditation of the medical department of Niger Delta University portrays a little or no significant improvement in the health conditions of the people. The conspicuous inadequacy in health facilities may have accounted for the influx of alternative practitioners and miracle centres in the state.

Onokerhoraye (1999) observed that the main health care facilities in Bayelsa State are not only poor compared with other parts of Nigeria but there is also inequity in their distribution within the state. There were 39 medical practitioners in the State in 1998 which gives a ratio of one medical practitioner per 53, 977 persons. This ratio is by far higher than the national average of one medical practitioner per 12, 492 for the same period. This is a reflection of the degree of neglect in the region compared with other parts of the country. Further examination of the distribution of medical practitioners in Bayelsa State indicates that they are disproportionately concentrated in four local government areas.

The availability of other sub-standard hospitals in the state, some privately owned and others created by the state in the form of health centres, presents an alarming inadequacy vis-à-vis the health needs of the people. The various health schemes in the state are also grossly inadequate. The extinct DSP Health scheme was criticized for its lopsidedness as it caters for the few privileged civil servants at the expense of the majority and by this inherent shortcoming went into extinction.

In terms of budgetary provision in the 2011 financial year, it is observed that a significant improvement has been recorded. With N6.4b (9%) capital budget for the health sector – encompassing the Ministry of Health, Hospitals Management Board, School of Nursing, College of Health Technology, the Niger Delta University Teaching Hospital, Local Health Scheme, Bayelsa Ambulance Service, Health Service Scheme and Health Systems Fund Project (Ministry of Finance and Budget, Bayelsa State, 2011). What constitutes a real problem is the commitment on the part of Government to tenaciously implement its provisions.

Implications on quality health service delivery in Bayelsa State

In looking at political upheaval in its denotative sense, far-reaching implications present themselves on the health system in Bayelsa State. One underlying assumption of these implications is the conviction that there would have been quality health service delivery in Bayelsa State if not for political crisis. This assumption is a far cry from what obtains in actual life situation. In any case, for the purpose of identifying some of the factors that hinder such goal, the implications are discussed below.

Going down memory lane, Iyayi, argues, “from the political crisis in the Western Region of Nigeria from 1963 – 1966 through the full blown civil war of 1967-1970, the series of military coups, the massive social unrests in the early 1990s, the inter-communal skirmishes in different parts of the country, the continuing ecological and bush wars in the Niger Delta to the tensions over the Third Term Agenda of the Presidency, (and the monumental crisis that has trailed the 2007 general elections), Nigeria has stumbled from one political and social crisis to another.” The problem of unbridled agitation and violent armed conflicts in Nigeria’s Niger Delta which occupies much of the South-South geo-political region of the country has resulted in the “dislocation of social life” (Iyayi, 2007) and therefore undermined in a very real sense the ability of primary health care institutions to function in this part of the country.

Ikuli (2006) argues that the successful return of Nigeria to a democratic dispensation on 29 May 1999 marked a major turning point in the subsequent brazenness of youth militancy in the Niger Delta. In addition, politicians, especially of the ruling People’s Democratic Party (PDP) in the three core Niger Delta States (Bayelsa, Delta and Rivers) fanned the flames of youth militancy by the recruitment and supply of fire arms to militants, gangs and cults in the disguise of unconventional political security for the purpose of

rigging of elections, intimidation, harassment and outright assassination of political opponents. For a long time, the militants have dared the Nigerian state through ceaseless attacks on persons, facilities and institutions. Capturing the above, Onokerhoraye (1999) thus laments that Nigeria's political situation puts great strain on the public sector's capacity for policy making and management at all levels. The failed Nigerian political transition is a case in point because it has certainly been more consequential for popular welfare and public good provision.

There are also political conflicts between the state government and federal government over percentages of derivation from oil money that goes to the state governments. Recently, youths in the region became actively involved in militancy with rising incidences of abduction and/or kidnapping of oil workers and expatriates in the region in demand for ransoms. The implications for HIV/AIDS interventions in the region are that these conflicts and militant activities, especially when violence is involved, have attracted military response from the Federal Government, with the corresponding influx of military presence in the region for peace keeping activities and for protection of oil facilities, life and property of community members. However, these conflicts have also resulted in increased incidences of internally displaced populations, rape, sexual violence and sexual exploitation by armed soldiers leading to increased incidences of HIV infection and unwanted pregnancies within the affected communities.

Eboreime (2006) asserted that in many cases, social and economic infrastructures are destroyed such as education, health and housing facilities as well as bridges, industries and other economic infrastructures as a result of conflict and this affect programme delivery. In Oluku community in Benin, Edo State, for example, communal conflicts halted the programme for almost one year before CSO partner resumed work in the community. At Bori Camp Barracks in Port Harcourt, a car bomb blast by militant groups in the Niger Delta in conflict with Federal Government over the arrest and detention of a notable leader of a militia group in the region led to the expulsion of all civilian populations within the barracks for security reason, leading to the loss of all female sex worker groups, most out of school peer educators and influencers at the site. Sometimes, conflicts and violence erupted in communities when project staff were visiting, leading to high insecurity of project vehicles and staff (Action Aid Nigeria).

Duru (2010) noted that statistics released by a non-governmental organization, the Niger Delta Development Monitoring and Corporate Watch (NIDDEMCO) shows that between 1999 and June 2007, a total of 308 hostage incidents occurred in the region. A breakdown of this record shows that Bayelsa State was on the lead with 131 incidents; Rivers State had 113; Delta State 45, while Akwa Ibom had the least record of 15. Unfortunately, the situation appears to be deteriorating by the day as the spate of hostage-taking and kidnapping incidents are on the increase (see Sunday vanguard, February 10, 2008: 9; Saturday Sun, March 29, 2008: 10 and Vanguard, April 6, 2008).

Another version to issues of political instability is the frequent state of appointment and dissolution of political office holders, especially in the current democratic dispensation when political actors are hired and fired without justification.

In a comprehensive review of the health system in Nigeria, the Federal Ministry of Health (2004:10-12) arrived at the damning conclusion that 'the management of the public health system is characterized by 'a culture of corruption and self-interest.' A culture of corruption and self-interest would mean as the FMOH document admits "accountability, responsibility and transparency problems."

However, the foregoing implications of political upheaval do not in any way portray a vivid account of what actually transpires in the health sector. It is in realization of this objective truth that informs the need to look at the political upheaval from the connotative sense. These issues are discussed below:

- **Radical changes in health policies**

Concerns over the desperate situation in which the poor masses in the state have been contending with unprecedented poverty, deprivation, environmental degradation, hunger and disease with no ready access to affordable health care, it is not only imperative but also expedient for all stakeholders to come up with radical steps with a view to effecting fundamental changes in our health policies. The radical changes are expected to be all-encompassing and multi-dimensional. It is expected to ensure establishment of more institutions to promote aggressive manpower development which is a pre-requisite for quality health service delivery in Bayelsa State.

Such radical changes in our health policies are expected to also restructure our tilting environmental laws. Following the unregulated activities of multi-national companies, it has been identified that our health woes, in part, are a function of these activities. The issue of gas flaring is of paramount concern; oil spills are not only hazardous to human life but also affect the totality of our ecosystem. Making fundamental changes in the obnoxious environmental laws will certainly mitigate hunger, disease and deprivation.

Radical changes are expected to manifest in the relationship between government, management and staff of the various ministries and agencies, essentially to promote high productivity through motivation and discipline; creating more insurance-related health schemes; establishment of an agency for the regulation of

alternative practices; and standard periodic evaluation/assessment methods in order to make an extensive appraisal of the various schemes and programmes of the state. By so doing, the issue of dearth of manpower in the health sector which has remained a cardinal impediment to quality health service delivery will be adequately addressed. With this multi-dimensional approach in restructuring our health policies, phenomenal increase would be recorded in our health care system.

- **Labour union activities**

There is no coincidence in change but a product of careful planning, commitment and, above all, sacrifice-making. This assertion brings to fore the need and importance of deliberate human effort in bringing about fundamental changes in all strata of our society. It is those that are benefiting from a particular system that will advocate for the maintenance of the existing status quo. The hapless masses that are disillusioned with the existing order will always agitate for a change in order to achieve an improvement in the general living conditions. This objective requires a painstaking effort and sacrifice-making as it will be greeted with the stiffest opposition. In the context of this paper, labour unions, particularly those within the health sector are identified as veritable instruments that can play pivotal role in positively influencing health-related policies. It abhors stooges and government sponsored labour leaders who are ready to compromise standards with little pressure from government. It requires leaders with the highest degree of preparedness to make radical changes through sacrifice making. It is on record that the payment of the two thousand, five hundred naira medical allowance never came on a platter of gold. It implies that labour leaders in the state employed all available options, usually within the limit of the law, to ensure the implementation of the aforesaid policy.

From this perspective, the efficacy of labour leaders, their purposefulness and doggedness, visionary ingenuity and adroitness, in advancing the course of workers, negotiating better conditions for their members, to a considerable degree, stimulates high productivity in particular and upturns elitist decisions in general. Such elitist decisions are anathematic and self-seeking, always at the detriment of the masses and so requires total obliteration if we need genuine change that reflects the whims and caprices of the people.

- **International dimension: Breaking deadly alliances**

Over the last two decades, public health commentators, some non-governmental organizations and development advocates have come to believe that there are certain deadly alliances that are detrimental to the promotion of health in developing countries. Writing in PLOS medicine Gandy believes that deadly alliances exist between death, disease and the global politics of public health (Idris, 2007: 249). These alliances arose, according to several groups, from the politically motivated policies in public health and the effect of such alliances has been to increase the burden of disease as well as death rates in sub-Saharan Africa. These deadly alliances must be broken before significant progress can be made in reversing the appalling decay in health care services. At the same time, serious attempts must be made to bridge the gap between the rich and the poor.

The developed nations dominate all the agencies charged with the responsibility for the global health of mankind: the World Health Organization, UNICEF, UNDP, and the World Bank. As for remedial initiatives by non-governmental agencies and Foundations that promote the attainment of Millennium Development Goals (MDGs) such as the Global Fund to fight AIDS, tuberculosis and malaria, the Global Alliance for vaccines and immunization (GAVI) and others, in practice these are also influenced by the powerful nations led by the United States of America. Even the world's biggest grant awarding charity, the Bill Gates Foundation that has raised the profile of global health, has some critics who claim its huge financial resources are not optimally used appropriately, damaging health systems in developing countries and distorting aid priorities (Idris, 2007).

Suspicion that the US determines who is appointed Director General of the WHO and what the agency does is not altogether misplaced. The allegation that the centre for disease control and prevention (CDC), fully a US outfit in every respect, directs the WHO may be exaggerated, but true to a degree. Whatever the case may be, the WHO seems to have become less authoritative, effective and independent than it was at the inception.

Such dangerous alliances have adversely affected the public health system in Bayelsa State. At a glance, the entire state shows the absence of major medical facilities contributed by some of these global health organizations.

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Conscientization of the minds of Bayelsans

The influx of alternative practitioners and the proliferation of religious centres in the state, considered as better options for the treatment of diseases as opposed to orthodox medical practices is an empirical indication of the alarming degree of ignorance. More often than not, ignorance constitutes a major challenge in the realization of quality health service delivery in Africa. For instance, the choice of an alternative practitioner may be borne out of economic reasons, but what constitutes a menace is the fact of ignorance about the adverse consequences or the side effects of such trial-and-error measures. It is pathetic to note that in contemporary times, a good number of people still live on a priori and in most cases, resign to fate. However, this does not, in any way, undermine the efficacy of such unrefined measures. It implies the need to carry out a massive enlightenment campaign on the application of such unorthodox approaches to our health system with a view to thoroughly regulating the practice of alternative medicine. Such enlightenment campaigns must be directed at changing the orientation of the people in all ramifications. It involves effecting changes in the perception of some beliefs that fall short of international best practices such as road-freighters, which in actual sense, is a product of lack of care from conception. Infant mortality has remained a major challenge in the practice of orthodox medicine. Fortunately, a vast majority of parents are gradually moving away from such beliefs following immunization programmes and attendant awareness campaigns. We need to intensify the campaign.

Certain baseless claims made by some people depict the level of ignorance in our society. For instance, "my pastor said I will not go through Caesarian Section (CS) is also a dangerous trend." Obviously, it falls short of international best practices. In extreme cases, CS remains the last option to survive women passing on in travail. This level of consciousness requires painstaking conscientization of the mind of spouses. Words are grossly inadequate to describe the level such unrefined practices compound problems associated with the practice of medicine. Malaria patients are sometimes subjected to serious fasting by religious homes. Without being tested, they lay claim to the treatment of HIV/AIDS, only to resurface in an alarming proportion that culminates in exacerbating the problem.

From our painstaking investigations, it has been discovered that a tripartite reciprocal relationship exists in confronting the health care systems in Africa. In most cases, the reciprocal relationship presents itself in a vicious circle such that ascertaining the origin constitutes a problem. These issues include ignorance, disease and hunger.

CONCLUSION

This paper seeks to establish the relationship between political upheavals and improvement in the health conditions of Bayelsans. It actually identified the various short-comings and inadequacies inherent in the Bayelsa State health system that requires swift changes in policy options. Such inadequacies manifest in the form of dearth of manpower, lack of commitment on the part of practitioners, widespread corruption, absence of effective health schemes, unregulated activities of alternative medicine practitioners, inadequate institutions for the training of manpower, etc.

It is the unequivocal contention of this paper that the only panacea to these problems is a well coordinated political upheaval, often within the limit of the law. For the purpose of this paper, political upheaval connotes a conscious attempt to restructure the existing status quo as it relates to the health sector. It involves deliberate determination of sound policy measures to cover a wide range of issues. Such measures are targeted at establishing more institutions in the state, health schemes, increase productivity through motivation and discipline, eschew corruption and the effective regulation of alternative medicine practitioners. By so doing, quality health service delivery becomes realizable in Bayelsa State.

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