

COMMERCIAL BLOOD DONATION IN NIGERIA: THE IMPLICATIONS FOR OPTIMUM HEALTH SERVICES*

Abstract

Blood donation is a sensitive issue that provokes diverse emotions globally. Blood touches on human life: the abundance or lack of same can give or take life. Globally, efforts have been made to regulate blood donation and blood transfusion ethically and legally. The WHO, ahead of other international organizations took steps through resolutions aimed at regulating blood donation and blood transfusion to preserve the sanctity of human blood. The present research is an attempt to analyze the commercialization of blood donation – its legality or otherwise. What legal frameworks exist for the regulation of blood donation and blood transfusion in Nigeria thereto international instruments? What dangers does commercialization of blood donation pose for the society? The work found that incentives for donors in certain jurisdictions increased blood donations. It is recommended that NBSC should be proactive in its operations to strictly regulate blood donation, collection and circulation throughout Nigeria.

Key words: blood, blood donation, non-remunerated blood donation, commercial blood donation, health.

1.0. Introduction

Blood donation is the act of giving one's blood so it can be transfused into another for therapy.¹ Blood donation is the major source of blood for blood transfusion and other uses of blood and blood product.² Most often, blood donation is sourced from voluntary blood donation, incentive driven blood donation and family replacements.³ Over the years, international organizations have strongly advocated for the abolition of remunerated blood donation on the basis of the quality and safety of the blood to be collected. The World Health Organization⁴ and International Red Cross⁵ have been at the forefront of the campaign against the payment of blood donors. Due to shortages in blood supply, some countries maintain their stand that donors should be paid. The present paper is an attempt to appraise the two major schools of thought on payment for blood donation. In the course of the research, the legal frameworks for blood donation globally and in Nigeria are examined. Also, the arguments for and against payment for blood donation are analyzed. It is recommended *inter alia* that the National Blood Service Commission/Agency needs to spread its tentacles across the 36 States of the country instead of limiting their activities within the

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¹ A G Salaudeen, E Odeh, 'Knowledge and behaviour towards voluntary blood transfusion among students of a tertiary institution in Nigeria.' (2011) Nigerian Journal of Clinical Practice 303-307.

² World Health Organization, 'Towards 100% Voluntary Blood Donation: A Global Framework for Action.' <https://www.ncbi.nlm.nih.gov/books/NBK305666/> retrieved on March 28, 2025.

³ N I Ugwu, W J O Oti, C N Ugwu, C J Uneke, 'Voluntary Non-Remunerated Blood Donation Awareness, Perception, and Attitude among Potential Blood Donors in Abakaliki, Nigeria.' (2019) Voluntary Non-Remunerated Blood Donation Awareness, Perception, and Attitude among Potential Blood Donors in Abakaliki, Nigeria, DOI: 10.4103/njcp.njcp_159_19 retrieved on March 28, 2025.

⁴ World Health Organization, 'Voluntary Non-Remunerated Blood Donation.' <https://www.who.int/teams/health-product-policy-and-standards/standards-and-specifications/blood-and-products-of-human-origin/quality-and-safety/voluntary-donation> retrieved on March 28, 2025.

⁵ IFRC, 'Blood Donation.' <https://www.ifrc.org/our-work/health-and-care/community-health/blood-donation> retrieved on March 28, 2025.

Federal Capital Territory Abuja. This will help regulate the proper screening and circulation of blood throughout the country without compromising quality and safety.

2.0. International Regulation of Blood Donation

The first international attempt at legally regulating blood donation is seen in the World Health Organization's Resolution No. WHA28.72 on the Utilization and Supply of Human Blood and Blood Products.⁶ The resolution was made at the 28th Assembly of the World Health Assembly on the 29th of May, 1975. Member States were urged to –

1. to promote the development of national blood services based on voluntary non-remunerated donations,
2. to enact effective legislation governing the operation of blood services and to take other actions necessary to protect and promote the health of blood donors and of recipients of blood and blood products;

In May 2005, WHO, through the World Health Assembly adopted resolution WHA58.13 on Blood safety – a proposal to establish World Blood Donor day.⁷ In resolution, WHO urged Member States to –

1. promote and support the annual celebration of World Blood Donor Day;
2. establish or strengthen systems for the recruitment and retention of voluntary, non-remunerated blood donors and the implementation of stringent criteria for donor selection;
3. introduce legislation, where needed, to eliminate paid blood donation except in limited circumstances of medical necessity and, in such cases, to require informed assent of the transfusion recipient;
4. provide adequate financing for high-quality blood donation services and for extension of such services to meet the needs of the patients;
5. promote multi-sectoral collaboration between government ministries, blood transfusion services, professional bodies, nongovernmental organizations, civil society and the media in the promotion of voluntary, non-remunerated blood donation;
6. ensure the proper use of blood transfusion in clinical practice so as to avoid abuse of blood transfusion, which may result in a shortage of blood and hence stimulate the need for paid blood donation;
7. support the full implementation of well-organized, nationally coordinated and sustainable blood programmes with appropriate regulatory systems through, in particular:
 - a. government commitment and support for a national blood programme with quality management systems, by means of a legal framework, a national blood-safety policy and plan, and adequate resources
 - b. organization, management and infrastructure to permit a sustainable blood transfusion service
 - c. equitable access to blood and blood products
 - d. voluntary, non-remunerated blood donors from low-risk populations
 - e. appropriate testing and processing of all donated blood and blood products
 - f. appropriate clinical use of blood and blood products;

⁶ International Society for Blood Transfusion, 'ISBT Code of Ethics.' <https://www.isbtweb.org/resources/isbt-code-of-ethics.html> retrieved on March 28, 2025.

⁷ World Health Organization, 'Blood safety: proposal to establish World Blood Donor Day (WHA58.13)' <https://www.who.int/publications/i/item/WHA58.13> retrieved on March 28, 2025.

8. establish a quality process for policy- and decision-making for blood safety and availability based on ethical considerations, transparency, assessment of national needs, scientific evidence, and risk/benefit analysis;
9. share information nationally and internationally in order to make clear the scientific, economic and social basis of national policy decisions related to blood safety and availability;
10. strengthen partnerships at all levels in order to accomplish these recommended actions.

Subsequently, at the 63rd World Health Assembly held on the 21st of May, 2010, the World Health Organization adopted resolution WHA63.12 on Availability, Safety and Quality of Blood Products.⁸ In the said resolution, WHO urged Member States to –

1. take all the necessary steps to establish, implement and support nationally-coordinated, efficiently-managed and sustainable blood and plasma programmes according to the availability of resources, with the aim of achieving self-sufficiency, unless special circumstances preclude it;
2. take all the necessary steps to update their national regulations on donor assessment and deferral, the collection, testing, processing, storage, transportation and use of blood products, and operation of regulatory authorities in order to ensure that regulatory control in the area of quality and safety of blood products across the entire transfusion chain meets internationally recognized standards;
3. establish quality systems, for the processing of whole blood and blood components, good manufacturing practices for the production of plasma-derived medicinal products and appropriate regulatory control, including the use of diagnostic devices to prevent transfusion transmissible diseases with highest sensitivity and specificity;
4. build human resource capacity through the provision of initial and continuing training of staff to ensure quality of blood services and blood products;
5. enhance the quality of evaluation and regulatory actions in the area of blood products and associated medical devices, including in vitro diagnostic devices;
6. establish or strengthen systems for the safe and rational use of blood products and to provide training for all staff involved in clinical transfusion, to implement potential solutions in order to minimize transfusion errors and promote patient safety, to promote the availability of transfusion alternatives including, where appropriate, autologous transfusion and patient blood management;
7. to ensure the reliability of mechanisms for reporting serious or unexpected adverse reactions to blood and plasma donation and to the receipt of blood components and plasma derived medicinal products, including transmissions of pathogens.

Based on the foregoing, it is obvious that WHO which is the largest international health institution, is strongly in support of voluntary and non-remunerated blood donation. This, by necessary implication establishes that the WHO is against commercial blood donation.

In commemoration of World Blood Donor day in 2018, WHO gave certain guidelines on eligibility for blood donation.⁹ The said guidelines include the following –

⁸ World Health Organization, ‘Availability, Safety and Quality of Blood Products.’ https://apps.who.int/gb/ebwha/pdf_files/wha63/a63_r12-en.pdf retrieved on March 28, 2025.

⁹ World Health Organization, ‘World Blood Donor Day.’ <https://www.who.int/campaigns/world-blood-donor-day/2018/who-can-give-blood#:~:text=Below%20are%20some%20basic%20eligibility,that%20appropriate%20consent%20is%20obtained> retrieved on March 21, 2025.

1. Age – between 16 – 65 years.
2. Weight – at least 50kg.
3. Health –
 - a. Donors must be in good health at the time of donation.
 - b. Persons having cold, flu, sore throat, cold sore, stomach bug or any other infection are prohibited from donating.
 - c. Any person that recently had a tattoo or body piercing cannot donate for 6 months from the date of the procedure.
 - d. Any person who visited the dentist for a minor procedure must wait for 24 hours before donating; for a major procedure, the person must wait for up to a month.
 - e. Any person that does not meet the minimum haemoglobin level for blood donation must not donate blood.
4. Travel to areas where mosquito-borne infections are endemic, e.g. malaria, dengue and Zika virus infections, may result in a temporary deferral.
5. Persons engaged in “at risk” sexual activity in the past 12 months must not donate blood.
6. Individuals with behaviours below will be deferred permanently:
 - a. Persons that have ever had positive test for HIV (AIDS virus)
 - b. Persons that have ever injected recreational drugs.

The above eligibility criteria is not exhaustive and also not binding on member states as even WHO recognized the fact that nations have modified criteria different from WHO’s criteria.¹⁰

3.0. Regulation of Blood Donation in Nigeria

In Nigeria, there is no statistical data reflecting the exact quantity of blood donated annually or the number of units of blood and blood products needed in Nigeria. Presently in Nigeria, there are two major laws that have provisions on blood donation – the National Blood Service Commission Act of 2021 and the National Health Act of 2014.

3.1. The National Health Act, 2014

Part 6 of the National Health Act¹¹ generally provides for control of use of blood, blood products, tissue and gametes in human beings. Section 42 empowers the Minister of Health to establish National Blood Transfusion Service at the federal level¹² and also make regulations in that regard.¹³ States in Nigeria are permitted to also set up Blood Transfusion Service as they find it appropriate within their jurisdiction.¹⁴ Interestingly, the NHA provides that blood donation must be done with the informed consent of the donor.¹⁵ Non-compliance with this provision attracts a fine of #100,000 or imprisonment for a term not exceeding one year or both.¹⁶

In another breath, the NHA provides that consent can be waived for medical investigations and treatment in emergency cases.¹⁷ This latter provision on the possibility of waiver of

¹⁰*Ibid.*

¹¹ Hereinafter referred to as the NHA.

¹² NHA, section 47 (1).

¹³*Ibid.*, section 47 (2).

¹⁴*Ibid.*, section 47 (3).

¹⁵*Ibid.*, section 48 (1) (a).

¹⁶ NHA, section 47 (3) (b).

¹⁷*Ibid.*, section 48 (1) (b).

consent for medical investigation and treatment in emergency cases has been criticized as creating a gap. This is so as the NHA did not state with clarity the kind of medical investigation over which informed consent can be waived. What could be classified as a medical emergency to dispense with the informed consent of a blood donor is not stated. It need be stated that the investigation that may require bleeding a person to the level approximate or equivalent of what we may call donation will in fact be outrageous, if the person is not informed.

Under the NHA, only a registered medical practitioner or dentist or a person acting under the supervision or on the instructions of a medical practitioner or dentist, may administer blood or a blood product to, or prescribe blood or a blood product for, a living person.¹⁸

Section 53 (1) (a) of the NHA prohibits a blood donor from receiving any form of financial or other reward for such donation, except for the reimbursement of reasonable costs incurred by him or her to provide such donation. Similarly, the sale of blood and blood products is prohibited except for reasonable payments made in appropriate health establishment for the procurement of tissues, blood or blood products.¹⁹ Contravention of section 53 (1) (a) and (b) is an offence and conviction attracts a fine of #100,000 or imprisonment for a period not exceeding one year or both imprisonment and fine.²⁰

3.2. The National Blood Service Commission Act, 2021

The National Blood Service Commission Act²¹ established the National Blood Service Commission²² originally established as the National Blood Transfusion Service under the National Health Act.²³ By the provisions of section 1 of the NBSC Act, the National Blood Service Commission²⁴ is established as a corporate body with juristic personality. The NBSC is tasked with several functions that include the following:²⁵

1. Establishment, coordination, regulation and control of blood transfusion services throughout Nigeria.
2. Producing and ensuring compliance with the National Blood Transfusion Guidelines and Standards.
3. Encouraging research in all aspects of blood transfusion.
4. Promotion of the rational use of blood, blood products and alternatives to blood where appropriate.
5. Production of blood plasma and other blood products in collaboration with relevant agencies for national use and exports.
6. Promotion of health education on the rational use of blood and promotion of voluntary donation of blood.
7. Establishing a register for voluntary blood donors and rare blood group donors.
8. Encouraging State governments to establish State Blood Service Commissions.

¹⁸ NHA, section 52 (2).

¹⁹ NHA, section 53 (1) (b).

²⁰ NHA, section 53 (2).

²¹ Hereinafter referred to as the NBSC Act.

²² NBSC Act, section 1.

²³ NHA, section 47.

²⁴ Hereinafter referred to as NBSC.

²⁵ N B S C Act, section 6.

Presently, the NBSC has 17 blood collection, testing and distribution centres in the six geo-political zones of the country including the Federal Capital Territory and an Armed Forces Blood Service in the Military Hospital, Port Harcourt.

It is interesting to note that with respect to blood donation, the NBSC is tasked with promoting health education on voluntary blood donation and also establishing a register for voluntary blood donors and also rare blood group donors. So far, the best the NBSC has done is changing its name to National Blood Service Agency and making calls for blood donation at designated blood donation centres.²⁶ So far, the present researcher is yet to see collaborations between the National Blood Service Agency and State governments across Nigeria in fulfillment of one of its statutory functions which include seeing to the replication of the NBSC in the 36 States of the Federation. Again, the activities of the NBSC appear to revolve around Abuja as can be seen in the NBSC website. The impact and presence of the NBSC is yet to be felt physically in the 36 States of the Federation apart from its online presence in various social media platforms. Like twitter now known as 'X'²⁷ and also Facebook²⁸.

4.0. Regulatory Framework for Blood Donation in Ghana

In Ghana, blood donation is regulated through the Public Health Act, 2012 and the National Blood Service Act, 2020. Administratively, there are two major government institutions tasked with blood collection and distribution and regulating the operations and products of blood centres and blood banks throughout Ghana.

4.1. Public Health Act, 2012

The Ghana Public Health Act²⁹ was enacted in 2012 generally to revise and consolidate the law relating to public health to prevent disease, promote, safeguard, maintain and protect the health of humans and animals and to provide for related matters.³⁰ Section 80 of the Ghana PH Act established the Food and Drug Authority giving it a corporate personality. Pursuant to the Ghana PH Act, the Ministry of Health published a National Blood Policy in 2020 themed "Safe and Adequate Blood for All."³¹ The overall policy objective is to ensure access to safe and adequate blood and blood components and related blood services towards the attainment of universal health coverage in Ghana. The National Blood Policy made the Food and Drugs Authority (FDA) the national body responsible for the regulation of operations and products of Blood Centres and Hospital Blood Banks.³²

4.2. National Blood Service Act, 2020

The National Blood Service Act³³ in 2020 established³⁴ the National Blood Service in Ghana with the object³⁵ of providing safe and adequate blood and blood products to patients who

²⁶ NBSA, 'Public Notice: Change of Name from National Blood Service Commission (NBSC) To National Blood Service Agency (NBSA).' https://x.com/nbsc_abj retrieved on March 26, 2025.

²⁷ X, 'National Blood Service Agency – Abuja.' https://twitter.com/NBSC_Abj/status/1818716589795295254 retrieved on March 28, 2025.

²⁸ Facebook, 'Profile for National Blood Service Agency.' <https://www.facebook.com/people/National-Blood-Service-Commission-NBSC/100057523536908/> retrieved on March 28, 2025.

²⁹ Hereinafter referred to as the Ghana PH Act.

³⁰ See the long title of the Act.

³¹ National Blood Service, 'National Blood Policy: Safe and Adequate Blood for All.' [https://nbs.gov.gh/wp-files/NATIONAL%20BLOOD%20POLICY%20\(Second%20Edition\).pdf](https://nbs.gov.gh/wp-files/NATIONAL%20BLOOD%20POLICY%20(Second%20Edition).pdf) retrieved on April 9, 2025.

³² *Ibid.*

³³ Hereinafter referred to as the Ghana NBS Act.

³⁴ Ghana NBS Act, section 1.

require blood transfusion therapy in public and private healthcare institutions. The Ghanaian National Blood Service³⁶ is tasked with several functions which include:

1. collecting blood and blood products from voluntary unpaid donors who are from the low risk population groups;
2. ensuring that all blood and blood products which are donated are appropriately tested, processed, stored and distributed before transfusion;
3. ensuring the safe transportation of blood and blood products;
4. promoting the safe and appropriate clinical use of blood and blood products and transfusion practices;
5. promoting and protect the health and confidentiality of blood donors and recipients of blood and blood products;
6. ensuring, as far as practicable, access to the safe and adequate supply of blood and blood products for transfusion to approved health care institutions in the country;
7. adopt internationally accepted norms, standards and quality management systems to cover all areas of work of the Service;
8. educate the public on blood donation;
9. ensure that blood and blood products are available and accessible to a member of the public who needs them and in particular the vulnerable groups, without discrimination;
10. inspect and accredit hospital blood banks and blood banks before the hospital blood banks and blood banks can be supplied with blood and blood products by the Service;

Interestingly, the Ghana NBS Act defined a blood donor as a person who voluntarily donates or gives blood for transfusion to a patient as part of a medical treatment.³⁷ The Ghana NBS Act still went further to define a voluntary unpaid blood donor as a donor who gives blood plasma or other blood components freely and voluntarily, without receiving payment in cash or in kind.³⁸ Both definitions could have been included in the interpretation section of the Ghana NBS Act to emphasize the fact that the legal position on blood donation in Ghana is voluntary and non-remunerated. Some of the challenges the Ghana NBS has faced over the years in carrying out its functions include inadequate number of voluntary unpaid blood donors, ineffective coordination of blood services nationwide; and inadequate vehicles, essential equipment and logistics at the zonal blood centres.³⁹

A careful perusal of the Ghana PH Act, the Ghana NBS Act and the Ghana National Blood Policy reveal that payment of blood donors in Ghana is not illegal or criminal as there are no statutory provisions to that effect. Rather, voluntary non-remunerated donation of blood is strongly encouraged and emphasized. It is humbly suggested that Ghana as a nation should take a further step to legislate on its position on supporting voluntary non-remunerated blood donation to protect the poor who may endanger their health and life also by indulging in blood donation for financial incentive.

³⁵*Ibid*, section 3 (a) and (b).

³⁶ Hereinafter referred to as Ghana NBS.

³⁷ Ghana NBS Act, section 35.

³⁸*Ibid*.

³⁹National Blood Service Ghana, 'National Blood Service holds Annual Performance Review for 2021.' <https://nbs.gov.gh/national-blood-service-holds-annual-performance-review-for-2021/> retrieved on April 7, 2025.

5.0. Legal Framework for Blood Donation in Canada

Canada is one of the countries around the world that strictly regulate voluntary non-remunerated blood donation. In Canada, blood supply is managed by two not-for-profit organizations: Héma-Québec and Canadian Blood Services.⁴⁰ There are several laws and regulations in Canada that regulate blood donation and they include the National Blood Donor Week Act, 2008 and the Voluntary Blood Donation Acts of several provinces in Canada.

5.1. National Blood Donor Week Act, 2008

The National Blood Donor Week Act⁴¹ was enacted to create a week for the commemoration of voluntary non-remunerated blood donation throughout Canada between the 8th and 14th of June annually.⁴² This was meant to coincide with WHO world blood donor day celebrated on the 14th of June annually. Additionally, the NBDW Act was made to also recognize and celebrate the altruistic contributions of blood donors and also increase awareness on the necessity for blood and plasma donations throughout Canada.⁴³ The preamble of the NBDW Act clearly notes that blood donors are volunteers who are not remunerated, and therefore the act of donating blood and blood products is a genuine act of altruism. Without mincing words, non-remunerated donation of blood and blood products are encouraged under the NBDW Act. This is quite commendable. It has been observed that since the enactment of the NBDW Act and the awareness that has been created through it, thousands of people have indicated interest in voluntary non-remunerated blood donation throughout Canada.⁴⁴ This in turn has boosted blood supplies for blood and blood products for those in need of them.

5.2. Voluntary Blood Donation Act, 2018

Presently in Canada, there is no law of National application that outlaws remuneration for blood and blood products. All the same, various provinces in Canada have gone ahead to enact laws prohibiting the remuneration of blood donors. Such provinces include Ontario,⁴⁵ British Columbia,⁴⁶ Alberta⁴⁷ and Quebec.⁴⁸ The current law applicable in British Columbia is considered hereunder.

⁴⁰See the preamble to the National Blood Donor Week Act.

⁴¹ Hereinafter referred to as the NBDW Act.

⁴²V Leung, 'Appreciation to blood donors during National Blood Donor Week.' <https://www.burnabynow.com/local-news/appreciation-to-blood-donors-during-national-blood-donor-week-3123528> retrieved on May 6, 2025.

⁴³Canadian Blood Services, 'Backgrounder: National Organ and Tissue Donation Awareness Week.' <https://www.blood.ca/en/about-us/media/organ-and-tissue-donation/backgrounder-national-organ-and-tissue-donation-awareness-week#:~:text=Bill%20C%2D202%2C%20enacting%20National,year%20waiting%20for%20a%20transplant> retrieved on May 6, 2025.

⁴⁴Canadian Blood Services, 'Honouring Donors during National Blood Donor Week with Gratitude from the Patients they've Saved.' <https://www.blood.ca/en/about-us/media/newsroom/honouring-donors-during-national-blood-donor-week-gratitude-patients-theyve> retrieved on May 6, 2025.

⁴⁵The Voluntary Blood Donation Act of Ontario was enacted in 2014. Ontario.Ca, 'Voluntary Blood Donation Act.' <https://www.ontario.ca/laws/statute/14v14> retrieved on May 6, 2024.

⁴⁶It was enacted in British Columbia in 2018. BC Laws, 'Voluntary Blood Donation Act, 2018.' <https://www.bclaws.gov.bc.ca/civix/document/id/complete/statreg/18030#:~:text=Voluntary%20Blood%20Donations%20Act,25> retrieved on May 6, 2025.

⁴⁷It was enacted in 2017 in Alberta but repealed in 2020. Canlii, 'Voluntary Blood Donations Repeal Act.' <https://www.canlii.org/en/ab/laws/astat/sa-2020-c-41/latest/sa-2020-c-41.html#:~:text=Share%20this%20legislation-,Bill%20204,set%20out%20in%20the%20regulation.> Retrieved on May 6, 2025.

⁴⁸A Cattapan, 'The Legality of Paying for Plasma (and the Limits of the Law).' [https://www.schoolofpublicpolicy.sk.ca/csip/publications/making-waves/the-legality-of-paying-for-plasma.php#:~:text=The%20company%20started%20by%20trying%20to%20set,receiving%20payment\)%20for](https://www.schoolofpublicpolicy.sk.ca/csip/publications/making-waves/the-legality-of-paying-for-plasma.php#:~:text=The%20company%20started%20by%20trying%20to%20set,receiving%20payment)%20for)

The Voluntary Blood Donation Act⁴⁹ was made in 2018 to ban payment for blood and plasma donations in British Columbia.⁵⁰ Specifically, section 2 (1) and (2) of the VBD Act prohibits direct or indirect remuneration for blood donation in British Columbia as follows:

- (1) a person must not do any of the following, directly or indirectly, in return for the collection of blood by a blood collection facility:
 - (a) pay or provide an inducement to any person;
 - (b) offer to pay or provide an inducement to any person;
 - (c) advertise, through any media, that an inducement will or may be paid or provided to any person.
- (2) For the purposes of this section, "inducement" includes the following:
 - (a) remuneration, compensation or consideration;
 - (b) reimbursement for time, travel, commitment or expenditures;
 - (c) a gift, reward, premium or other benefit of any kind.

Interestingly, the VBD Act provides penalties for non-compliance with the above provisions upon conviction attracts the following penalties.⁵¹

- (2) An individual who commits an offence under this Act is liable to the following:
 - (a) on a first conviction, a fine of not more than \$10 000 for each day or part of a day on which the offence occurs or continues;
 - (b) on each subsequent conviction, a fine of not more than \$50 000 for each day or part of a day on which the offence occurs or continues.
- (3) A corporation that commits an offence under this Act is liable to the following:
 - (a) on a first conviction, a fine of not more than \$100 000 for each day or part of a day on which the offence occurs or continues;
 - (b) on each subsequent conviction, a fine of not more than \$500 000 for each day or part of a day on which the offence occurs or continues.

A careful look at the VBD Act above reveals that provisions are made for inspectors and analysts to enforce the provisions of the law.⁵² As impressive as the British Columbian VBD Act is, it is not known if it is fully enforced and if there are persons that have been prosecuted under its provisions for non-compliance.

6.0. Voluntary Blood Donation *Vis-a-Vis* Commercial Blood Donation

Globally, there are two major contrasting views on monetizing blood donation.⁵³ The foremost international organization on healthcare, the World Health Organization has made its position clear on blood donation as seen in its resolutions on blood donation discussed earlier.

%20blood%20donations%2C%20including%20plasma.&text=British%20Columbia%20and%20Alberta%20passed%20similar%20laws,already%20had%20law%20that%20did%20the%20same. Retrieved on May 6, 2025.

⁴⁹ Hereinafter referred to as the VBD Act.

⁵⁰ Health Coalition, 'Unpaid Plasma and Blood Donations.' <https://www.healthcoalition.ca/project/unpaid-plasma-and-blood-donations/> retrieved on May 6, 2025.

⁵¹ VBD Act, section 25 (2) and (3).

⁵² See VBD Act, sections 6, 11 and 24.

⁵³ S Bruers, 'Blood Donation and Monetary Incentives: A Meta-Analysis of Cost-Effectiveness.' <https://www.sciencedirect.com/science/article/abs/pii/S0887796321000559> retrieved on March 28, 2025.

Research reveals that about 25 countries globally give blood donors various kinds of incentives as compensation that range from gifts and benefits to monetary payments.⁵⁴ In Germany, China, US, and Russia, payment for plasma, a blood product is legal and not prohibited.⁵⁵

The first and more popular view on the commercialization of blood donation is that it should be non-remunerated. The basis for this position is predicated on ethical and other considerations that include the following:

1. Patient safety. Research reveals that blood and plasma-derived products collected from paid donors had an increased risk of transmitting infectious diseases.⁵⁶
2. Continuity in supply and self-sufficiency in systems. It has been observed that there is the evident risk that the existence of organizations that collect blood from paid donors alongside health services collecting from voluntary non-remunerated donors will lead to competition with health services.⁵⁷
3. Donor safety. There is the possibility that donors who are paid to give blood may be tempted to do so too frequently, thereby placing their own health at risk.⁵⁸

In addition to the rationale above, some perspectives of bioethics on blood donation are contained below:-⁵⁹

1. The human body and its parts should never, in any circumstances, give rise to profit. Hence, the donation of blood (cells, tissues or organs) should be voluntary and not linked to any form of payment.
2. Non-remuneration should accommodate offering legitimate “reimbursements” to donors, provided that a clear line can be drawn between legitimate forms of reimbursement (for expenses incurred or for time off work) and other forms of benefits (not only financial) associated with a donation. Hence, reimbursements should be lucidly restricted to actual costs incurred or loss of earnings connected to such blood donation.
3. The compensation for any harm linked closely to the blood donation should be accommodated as legitimate reimbursements.
4. Inconveniences associated with any blood donation should not be included in legitimate reimbursements. This is so because it is anticipated that ‘inconvenience’ could be capitalized on in recruiting “voluntary” donors when there is shortfall in supply. This in turn could be used to exploit vulnerable persons.
5. No form of ‘reward’ should be used to hide forms of payment. Hence, such rewards should not have any monetary value and should also not be such that can be transferred to third parties.

It has been argued that turning blood into a commodity would open the door to commercial pressures as donors would have a high tendency of being dishonest about their risk factors;

⁵⁴M Werft, ‘Everything you need to know about donating blood..’<https://www.globalcitizen.org/en/content/world-blood-donor-day-who-facts/> retrieved on May 6, 2025.

⁵⁵*Ibid.*

⁵⁶J P Allain, S L Stramer, ABF Carneiro-Proietti, *et al*, ‘Transfusion-Transmitted Infectious Diseases. (2009) Biologicals, 1.

⁵⁷European Blood Alliance.’ ‘Why Voluntary Non-Remunerated Blood Donations are now more Important than Ever?’ https://www.europeanbloodalliance.eu/wp-content/uploads/2013/04/eba_online.pdf retrieved on March 26, 2025.

⁵⁸R Laub S Baurin, D. Timmerman, *et al*, ‘Specific protein Content of Pools of Plasma for Fractionation from Different Sources: Impact of Frequency of Donations’. (2010) Vox Sanginis. 2010;99:220–31

⁵⁹C Petrini, ‘Non-Remunerated Donation: a Tautology?’ <https://pmc.ncbi.nlm.nih.gov/articles/PMC5770308/#sec3> retrieved on March 26, 2025.

whilst companies/businesses that could collect the blood to sell might turn a blind eye to blood safety/quality and cut corners for profits.⁶⁰

The arguments against remuneration for blood donation dwell on the above bases supporting non-remuneration for blood donation. The World Health Organization, the foremost global healthcare organization, strongly advocates non-remuneration for blood donation and has urged its member states to take this stand. This is seen in all of WHO's resolutions pertaining to blood donation discussed earlier.

The second major school of thought on blood donation asserts that donors should be compensated for donating their blood. In other words, blood donation should be commercialized. The major argument for this school of thought is that it helps to boost the limited supply of blood from voluntary donors. It has been argued that it is mostly developing countries that face serious blood shortages.⁶¹ Based on this, people die due to lack of blood supplies as there is not enough blood for surgeries, transfusions, cancer patients and patients with blood diseases. Hence, relying on voluntary donation by family, friends and altruistic individuals in advance of a procedure for a needy recipient is inefficient and ineffective a lot of times. Anonymous donation in an unrestricted way has been suggested.⁶²

Lacetera, Macis and Slonim,⁶³ economists, argued that the presumption that the people likely to turn up for paid donation are people with the likelihood of blood borne infected disease is unfounded. The basis for their position include the following –

1. Donated blood can be screened to make sure it's safe to use for transfusions.
2. By offering incentives to those who show up for a blood drive rather than those who actually donate, there's little incentive for would-be donors to lie about their health history.
3. A field trial in Argentina that offered supermarket vouchers worth roughly \$11.50 or \$19.20 (in U.S. dollars) boosted blood supply without having any effect on safety.
4. As the Argentina trial showed, financial incentives worked.

While Lacetera, Macis and Slonim strongly advocate that rewards can successfully address temporary shortages, they further asserted that the time has come to reexamine policy guidelines for increasing and smoothing blood supply, including whether incentives can play a role.

In about 25 countries globally, offering incentives for blood donation is legal and encourages to increase blood supplies.⁶⁴ Such countries include China, Germany Russia and some States in the USA.⁶⁵ It has sadly been noted that it is only few countries that legalized payments for blood donation that actually maintain the high standards of screening needed for patient safety.⁶⁶

⁶⁰ The Guardian, 'Blood Money: is it wrong to Pay Donors?' <https://www.theguardian.com/lifeandstyle/2015/jan/25/wrong-to-pay-blood-donors-safety-compromised> retrieved on March 26, 2025.

⁶¹ G Rienzi, 'Money is an Incentive for Blood Donations, Study Suggests.' <https://hub.jhu.edu/magazine/2013/fall/paying-for-blood-donations/> retrieved on March 26, 2025.

⁶² *Ibid.*

⁶³ N Lacetera, M Macis, and R Slonim, 'Economic Rewards to Motivate Blood Donations.' <https://www.science.org/doi/abs/10.1126/science.1232280> retrieved on March 27, 2025.

⁶⁴ C Graf, *et al*, 'Blood Donor Incentives across 63 Countries: The BEST Collaborative Study.' (2024) *Transfusion Medicine Reviews*. <https://doi.org/10.1016/j.tmr.2023.150809> retrieved on March 28, 2025.

⁶⁵ *Ibid.*

⁶⁶ *Ibid.*

Placed on a scale of rational comparison is the necessity to increase blood supply on the one hand and on the other hand blood safety with the health of the donor. It is the researcher's opinion that the quality of blood being donated matters a lot. It is very risky to collect blood from a paid donor if the safety of such blood is likely to be compromised. Medical personnel from experience may have taken the position that remunerated blood donation have the high tendency of contamination. Again, blood is life such that after donors are drained, they are advised to rest for up to an hour before leaving the place where they donated blood. It would be detrimental to a donor to receive incentive for donation only for the blood to be found unsafe after screening. It takes between 6 – 12 weeks for blood donors to recover from blood donation without any major illness.⁶⁷

The situation in Nigeria is quite pathetic. In December 2024, the Director General of the National Blood Service Agency, Prof. Saleh Yuguda, disclosed that Nigeria supplies less than 30% of its blood needs, highlighting a critical shortage in the country's blood supply.⁶⁸ Due to the unmet high demand for blood, black market where people go to donate blood for profit exists and is fast growing.⁶⁹ It gives serious concerns that not minding the fact that remuneration for blood donation is illegal and criminal, research shows that people still visit blood banks to sell their blood without much ado.

7.0. Conclusion/Recommendations

Blood donation is a sensitive issue that needs proper handling, management and regulation. The good health of the donors needs to be properly ascertained and established. The blood banks need to be properly regulated and monitored to ensure that the safety and quality of blood is not compromised. Internationally, the World Health Organization has put up a strong campaign against remuneration of blood donors globally on the basis of blood safety and the likelihood of the exploitation of the vulnerable that would compromise their health. Many nations of the world support the fight against the commercialization of donation. It is just about 25 countries that encourage incentive motivated blood donation.

The Nigeria law examined above shows that Nigeria aligns with the position of the WHO on payment of blood donors. With the present economic situation in Nigeria, it would do more harm than good to legalize paying donors to make blood donations for obvious reasons. The vulnerable would be exploited. Also, safety measures would most likely be compromised.

Presently, the National Blood Service Commission/Agency is tasked with regulating blood donation and transfusion, with the combined provisions of the NHA and NBSC Act. The presence of the NBSC through its blood collection and donation centres is limited to just 17 in number. The following are recommended with respect to blood donation in Nigeria.

Firstly, the NBSC needs to spread its administrative reach throughout the country to strictly regulate blood donation, collection and circulation throughout Nigeria. The number of private blood banks within the country is increasing by the day. Where not properly supervised,

⁶⁷ NHS, 'How your Body Replaces Blood.' <https://www.blood.co.uk/the-donation-process/after-your-donation/how-your-body-replaces-blood/> retrieved on March 26, 2025.

⁶⁸ L Adejoro, 'NBSA calls for more blood donation as Nigeria faces shortage.' <https://punchng.com/nbsa-calls-for-more-blood-donation-as-nigeria-faces-shortage/> retrieved on March 27, 2025.

⁶⁹ I Salah, "'Blood for money': The patients forced to turn to racketeers in Nigeria." <https://www.aljazeera.com/features/2024/1/6/blood-for-money-nigerias-broken-blood-supply> retrieved on March 27, 2025.

vulnerable people would be exploited to donate, blood safety would be compromised and safety measures in the collection/screening process might also be compromised. NBSC needs to partner with state governments in Nigeria for proper regulation of blood donation.

Secondly, private blood banks need to be properly monitored by the NBSC, in collaboration with the State Governments, to ensure that the safety of the blood donated to them is not compromised. Also, private blood banks should be strictly regulated to ensure that they do not receive blood indiscriminately or exploit people to increase their blood supplies.

Thirdly, NBSC needs to do a lot of awareness creation to encourage healthy people to donate to increase blood supply throughout the country whilst educating the masses that payment for blood donation in Nigeria is illegal and criminal. The NBSC can partner with NGOs and take advantage of the digital space like social media on this awareness creation drive. The NBSC can also partner with State Governments in the awareness creation campaign. When people are aware that getting paid to donate blood is illegal and criminal it may go a long way in discouraging them from being exploited.