

AN APPRAISAL OF THE LEGAL FRAMEWORK FOR THE COMPULSORY TREATMENT AND CARE FOR GUNSHOT VICTIMS IN NIGERIA.¹

Abstract

Many gunshot victims in Nigeria have been reported to have lost their lives after being denied medicare because of their inability to provide police report or inability to pay the initial treatment deposit. The Compulsory Treatment and Care for Victims of Gunshot Act, 2017 was enacted to remedy this situation. The Act mandates hospitals and medical facilities to provide immediate medical treatment to victims of gunshot injuries, regardless of the absence of a police report or initial treatment deposit; this is to ensure that gunshot victims receive prompt medical attention, regardless of their financial or legal status. The National Health Act 2014 also makes it an offence for health care providers, health care workers, or health establishment to refuse a person emergency treatment. The Compulsory Treatment and Care for Victims of Gunshots Act, 2017 was enacted to specifically protect the rights of gunshot victims in Nigeria. Despite the provisions of the National Health Act 2014 and the Compulsory Treatment and Care for Victims of Gunshots Act 2017, most health care facilities and health care practitioners still insist that the requirement of police report and initial treatment deposit are met as pre-condition for treatment of gunshot victims. The Compulsory Treatment and Care for Victims of Gunshots Act 2017 focuses on upholding the sanctity of life by preserving the lives of gunshot victims and removing the obstacles that prevent access to quick medical attention; the rights of gunshot victims and volunteers or helpers of gunshot victims; obligations of hospitals; obligations of the police and penalties for violations under the Act. Despite the beautiful provisions of the Compulsory Treatment and Care for Victims of Gunshots Act 2017, which specifically provides for the treatment and care of gunshot victims in Nigeria, hospitals and medical practitioners still make police report or payment of hospital bills a pre-condition for treatment. This article examines some of the impediments and challenges facing the implementation of the existing law. This research attempts to find out why the practice persist, despite the relevant enactments. This research identified some of the impediments and challenges to the implementation of the existing laws on the compulsory treatment and care for gunshot victims in Nigeria and explores the way forward to ensure compliance and implementation of the existing laws.

Keywords: Compulsory Treatment, Care for Gunshot Victims, Rights of Gunshot Victims, Nigeria

1.0. Introduction:

There have been several cases of avoidable deaths in Nigeria caused by the practice of health workers and health facilities insisting that police report be produced and/ or initial treatment deposit be made before treatment of gunshot victims. This practice persists in Nigerian health facilities, despite the relevant provisions of the Constitution of the Federal Republic of Nigeria, National Health Act 2014 and the Compulsory Treatment and Care for Victims of Gunshots Act, 2017 is a matter of grave concern. Increase in gunshot injuries was recorded after the civil war, as more people had access to arms during the civil war.² The military government swung into action to avoid abuse of the use of arms and made decrees that dealt with robbery and firearms; with the transmission to civilian government, the decree became the Robbery and Firearms (Special Provisions) Act 2004. The Robbery and Firearms (Special Provisions) Act made provision for the duty of any person or health facility that admits, treats, or administers any drug to any person suspected of having bullet wounds to immediately report the matter to the police.³ It did not intend to make police report a pre-condition for the treatment of gunshot victims. Unfortunately, most hospitals erroneously belief that police report is a pre-condition for the treatment of gunshot victims, particularly because of the harassment health care workers and health care facilities by overzealous police officers. There are several reported cases where gunshot victims were denied medical treatment, especially for their inability to provide police report or inability to pay the initial treatment deposit. One Ogubayo Ohu was reported to have died from gunshot injuries after he was shot severally by suspected hired assassins and was rushed by his neighbours to some hospitals that refused to administer treatment without a police report.⁴ Also one Alhaji Saula Saka was reported to have been shot repeatedly by some assassins, when rushed to the hospital, he was refused treatment

¹ By U.C Kalu, Professor of Law, Faculty of Law, Nnamdi Azikiwe University, Awka, Nigeria ;
Chidimma Anuli Ewelukwa, Lecturer, Faculty of Law, Nnamdi Azikiwe University, Awka, Nigeria.
ac.ewelukwa@unizik.edu.ng

² AF Imosemi, 'Compulsory Treatment for Victims of Gunshot Act (2017): Saving Lives in Nigerian Hospitals or a Contradiction of the Provisions of the Administration of Criminal Justice Act (2015)?' *NJM* (2018) 27 (5) <<https://www.ajol.info/index.php/njm/article/view/181917>>accessed 6 August 2023.

³ Robbery and Firearms (special provisions) Act, 2004, section 4 (2)

⁴ Kamal Tayo Oropo, 'Bayo Ohu, the Guardian Reporter, Murdered' *The Guardian*. 31 August 2009: <<https://guardian.ng/news/nigeria/national/bayo-ohu-the-guardian-reporter-murdered/>>accessed 20th July 2023.

without a police report and he died as a result of the gunshot injury.⁵ On July 11, 2020, Emmanuel Samuel was reported to have been shot at the thigh by a cop; he was rushed to the hospital but was declined treatment on the ground that there was no police report.⁶ The same week, one Mr Ebenezer Ayereni lost his life after he was attacked and shot by some hoodlums. He was denied treatment at the University College Hospital, Ibadan and J Rapha hospital; he later died after he lost too much blood.⁷ Mr Precious Owolabi, a media practitioner was also shot while covering the clash between the Nigeria Police Force and members of the Islamic movement in Nigeria but was rejected by the hospitals he was taken to.⁸ On 25th December 2022, Omobolanle Raheem, a legal practitioner was shot by a police officer,⁹ she was rushed to Budo specialist hospital where she was outrightly refused treatment due to non-submission of police report, she was also taken to Doren hospital and eventually to Grandville hospital where she was confirmed dead.¹⁰ There are numerous other cases of loss of lives caused by refusal to treat gunshot victims without police report, or for their inability to pay the initial treatment deposit.

The Compulsory Treatment and Care of Victims of Gunshots Act, 2017 was enacted to specifically save the lives of gunshot victims by removing obstacles that prevent the immediate treatment of gunshot victims, protect hospitals, doctors and 'good samaritans' who attend to gunshot victims, from molestation and harassment by the police; without hindering the duty of the police to apprehend and prosecute. Few states in Nigeria like Lagos State and Anambra State have enacted state laws on the compulsory treatment and care of gunshot victims. Despite the provisions of the laws, hospitals still demand police report and initial treatment deposit. This research tries to find out why this practice persists despite the provision of the existing law and the way forward to ensure compliance and implementation of the law.

2.0. Legal Framework for the Treatment and Care of Gunshot Victims in Nigeria.

2.1. Constitution of the Federal Republic of Nigeria, 1999

Gunshot victims in Nigeria are entitled to the fundamental human rights enshrined in chapter four of the Constitution.¹¹ The Constitution guarantees and upholds the right to life,¹² except for the constitutionally provided exceptions.¹³ The Constitution also guarantees the right to dignity of human person and protects individuals from torture or inhuman or degrading treatment;¹⁴ right to personal liberty;¹⁵ right to fair hearing which preserves the principle of presumption of innocence;¹⁶ right to privacy;¹⁷ right to freedom of thoughts, conscience, religion and belief;¹⁸ right to freedom of expression, including freedom to hold opinions and to

⁵ FIDH, 'Assasination of Mr Alhaji Saula SakaNGA 001/0108/OBS 008.16 January 2008. Available at: <https://www.fidh.org/en/region/Africa/nigeria/Assasination-of-Mr-Alhaji-Saula> accessed 25th July 2023.

⁶ A Percy, 'Police Report: Families of Gunshot Accident Victims in fear amid Rising Cases of Needless Deaths' 5 September 2021. The Punch. Available at <https://www.punchng.com/police-report-families-of-gunshot-accident-victims-in-tears-amid-rising-cases-of-needless-deaths/%3fam%3Ap%3A> accessed 30 July 2021.

⁷ Ibid

⁸ O Ebuka, 'Nigeria: An Appraisal of the Compulsory Treatment and Care for Victims of Gunshot Act, 2017: Late Precious Owolabi' <<https://www.mondaq.com/nigeria/constitutional-administrative-law/835070/an-appraisal-of-the-compulsory-treatment-and-care-for-victims-of-gunshot-act-2017-late-Precious-Owolabi>> accessed 13 July 2023.

⁹ Oluwakemi Adelagun, 'Christmas Day Tragedy: Police Officer kills lawyer in Lagos' (26 December 2022) <https://www.premiumtimesng.com/top-news/572407-christmas-day-tragedy-police-officer-kills-lawyer-in-lagos.html> Accessed on 16 July 2023

¹⁰ Olugbenga Soyele, 'Gunshot Victims Act: Prosecute Hospitals for Rejecting Bolanle Raheem' Foundation <https://leadership.ng/gunshot-victims-act-prosecute-hospitals-for-rejecting-bolanle-raheem-foundation/> Accessed on 15 January 2023.

¹¹ The Constitution of the Federal Republic of Nigeria, 1999.

¹² Ibid, section 33 (1)

¹³ Ibid, section 33 (2)

¹⁴ Ibid, section 34 (1)

¹⁵ Ibid, section 35

¹⁶ Ibid, section 36

¹⁷ Ibid, section 37

¹⁸ Ibid, section 38(1)

receive and impart ideas;¹⁹ right to freedom of assembly and association;²⁰ right to freedom of movement;²¹ right to freedom from discrimination;²² right to acquire and own immovable property anywhere in Nigeria.²³

2.2. Robbery and Firearms (Special Provisions) Act, 2004

The Robbery and Firearms (Special Provisions) Act was one of the early enactments that made provision for the treatment and care of gunshot victims. The Act makes it an offence for a person to knowingly house, shelter, or give quarters to any person who has committed the offence of robbery.²⁴ Although the Robbery and Firearms (Special Provisions) Act focused on the offence of robbery, it made provision for the duty of any person, hospital or clinic that treats any gunshot or bullet victim to report the matter to the police. The Act specifically provides that it shall be the duty of any person, hospital or clinic that admits, treats, or administers any drug to any person suspected of having bullet wounds to immediately report the matter to the police.²⁵ It is not the intention of the Act that a police report be made a requirement for the treatment of gunshot victims but where treatment has been administered, the person who administers the treatment must report the matter to the police; it only places a duty on a person, or health facility that admits, treats, or administers any person with gunshot injury or suspected to have gunshot injury, to immediately report the matter to the police.

2.3. National Health Act 2014

The National Health Act 2014 amongst other provisions, provides for the rights and obligations of users and healthcare personnel.²⁶ Gunshot victims taken to hospitals are users and are entitled to the rights of users under the National Health Act 2014. The Act creates a duty and obligation on healthcare providers to render emergency treatment and not to refuse a person emergency treatment for any reason;²⁷ any person who refuses a person emergency treatment is liable on conviction to a fine of N100,000.00 (Hundred thousand Naira only) or to imprisonment for a period not exceeding six months or both.²⁸ The Act also provides that every healthcare provider shall give a user relevant information pertaining to his state of health and necessary treatment,²⁹ including the user's health status, except in circumstances where there is substantial evidence that the disclosure of the user's health status would be contrary to the best interest of the user;³⁰ the range of diagnostic procedures and treatment options generally available to the user;³¹ the benefits, risks, costs and consequences generally associated with each option;³² and the user's right to refuse health services and explain the implications, risks, obligations of such refusal.³³ The Health care provider concerned shall, where possible, inform the user in a language that the user understands, and in a manner which takes into account the user's level of literacy.³⁴ The Federal Ministry, State Ministry of Health, Local Government Health Authority and every health care provider shall ensure that appropriate, adequate and comprehensive information is disseminated and displayed at facility level on the health services for which they are responsible;³⁵ this includes the rights and duties of users and health care providers.³⁶ The rights to be displayed include the right to emergency treatment.

The Act also provides that persons in charge of health establishments shall ensure that health record with the relevant information is created and available at the health establishment for every user of health services.³⁷ Such information concerning users health status, treatment or stay in a health establishment shall be confidential,³⁸ except with the written consent to disclose, court order or law requires the disclosure, or in the case of a minor with the request of a parent or guardian; and in the case case of a person who is unable

¹⁹ Ibid, section 39(1)

²⁰ Ibid, section 40

²¹ Ibid, section 41

²² Ibid, section 42

²³ Ibid, section 43

²⁴ Robbery and Firearms (Special Provisions) Act, 2004, section 1.

²⁵ Ibid, section 4 (2)

²⁶ National Health Act, 2014, Part 111

²⁷ Ibid, section 20 (1)

²⁸ Ibid, section 20 (2)

²⁹ Ibid, section 23 (1)

³⁰ Ibid, section 23 (1) (a)

³¹ Ibid, section 23 (1) (b)

³² Ibid, section 23 (1) (c)

³³ Ibid, section 23 (1) (d)

³⁴ Ibid, section 23 (1) (2)

³⁵ Ibid, section 24

³⁶ Ibid, section 24 (e)

³⁷ Ibid, section 25

³⁸ Ibid, section 26 (1)

to grant consent upon the request of a guardian or representative; or where non-disclosure of the information represents a serious threat to public health.³⁹ Health care workers or health care providers with access to health records of a user may disclose such information for any legitimate purpose within the ordinary course and scope of his/her duties where such access or disclosure is in the interest of the user.⁴⁰ Persons in charge of a health establishment in possession of a user's health records shall set up control measures to prevent unauthorised access to those records and to the storage facility in which, or system by which, records are kept.⁴¹ The Act provides that any person may lay a complaint about the manner in which he or she was treated and have the complaint investigated.⁴² Gunshot victims can complain where their rights as patients has been violated, especially where they were denied treatment by any health care worker or health care facility for any reason, including their inability to pay the initial treatment deposit or inability to produce a police report. The Act provides for the establishment of Basic Health Care Provision Fund,⁴³ part of which shall be used for Emergency Medical Treatment to be administered by a Committee appointed by the National Council on Health.⁴⁴

2.4. Compulsory Treatment and Care of Victims of Gunshot Act, 2017

President Muhammadu Buhari assented to the Compulsory Treatment and Care for Victims of Gunshot Act in December 2017.⁴⁵ The Compulsory Treatment and Care of Victims of Gunshots Act 2017⁴⁶ defines a victim as a person who sustains injuries because of gunshot, power burn, and other injuries arising out of or caused by the discharge of firearms.⁴⁷ Gunshot victims may be criminal suspects, victims of stray bullets, or victims of gunshots from criminals or even trigger-happy security men. The Compulsory Treatment and Care for Victims of Gunshots Act, 2017 is the primary legislation that provides for the compulsory treatment and care of gunshot victims in Nigeria. The Act provides for the compulsory treatment and care of victims of gunshot; it provides for the rights of gunshot victims; the obligations and duties of hospitals and security agents and made provision for some offences and penalties.

2.4.1 Rights of Gunshot Victims

The Compulsory Treatment and Care for Victims of Gunshot Act, 2017 provides for the right to immediate and adequate treatment. It specifically provides that every hospital in Nigeria whether public or private shall accept or receive any person with gunshot wound, for immediate and adequate treatment with or without police clearance.⁴⁸ Gunshot victims have the right to receive immediate and adequate treatment from any health care facility in Nigeria, with or without police clearance,⁴⁹ and without initial deposit of money;⁵⁰ the right to receive any possible assistance from any person or security agents; and to be taken to the hospital for treatment;⁵¹ the right not to be subjected to inhuman and degrading treatment or torture by any person, authority or of the police or other security agencies;⁵² the right to be certified fit and not in need of medicare before he or she can be invited by the police;⁵³ the right to restitution for loss sustained by gunshot victims through the direct or indirect action of the person who caused the loss;⁵⁴ and the right to enforce an order of restitution given by the State High Court.⁵⁵

2.4.2. Obligation of Hospital or Health Workers and Security Agents

Hospitals and health workers have the duty and obligation to give immediate and adequate treatment to gunshot victims, with or without police clearance and without initial money deposit.⁵⁶ The Act specifically provides that hospitals in Nigeria shall receive persons with gunshot injuries for immediate and adequate treatment with or without initial monetary deposit; and they shall not be subjected to inhuman and degrading treatment or torture

³⁹ Ibid, section 26 (2)

⁴⁰ Ibid, section 27

⁴¹ Ibid, section 29 (1)

⁴² Ibid, section 30

⁴³ Ibid, section 11 (1)

⁴⁴ Ibid, section 11 (3) (e)

⁴⁶ Compulsory Treatment and Care of Victims of Gunshots Act, 2017, section 15

⁴⁷ Ibid

⁴⁸ Ibid, section 1(1)

⁴⁹ Ibid

⁵⁰ Ibid, section 2 (2) (a)

⁵¹ Ibid, section 2 (1)

⁵² Ibid, section 2 (2) (b)

⁵³ Ibid, section 4

⁵⁴ Ibid, section 14 (1)

⁵⁵ Ibid, section 14 (2); 15

⁵⁶ Ibid, section 2 (a)

by any person or authority including the police or other security agencies.⁵⁷ Refusal to treat gunshot victims who do not provide police report, or initial treatment deposit is a gross violation of the provisions of the law. Hospitals that receive or accept persons with gunshot injuries for treatment has an obligation to report the fact to the nearest police station within two hours of commencement of treatment.⁵⁸ On the receipt of the report, the police shall immediately commence investigation, with a view to determining the circumstances under which the person was shot.⁵⁹ The police shall not invite any person with gunshot wounds from the hospital for the purpose of investigation unless the Chief Medical Director of the hospital certifies him fit and no longer in dire need of medicare.⁶⁰ Hospitals that receive persons with gunshot wounds shall notify the family members or relations of the victim as far as they may ascertain within twenty-four hours of becoming aware of the victim's identity.⁶¹ Hospitals or health facilities that receive gunshot victims for treatment has a duty to keep adequate record of the treatment.⁶² There is a duty to treat every volunteer or helper of gunshot victims with respect, without subjecting them to unnecessary and embarrassing interrogation in their genuine attempt to save life.⁶³ The Act provides for the duty to render every possible assistance to persons with gunshot injuries and ensure that gunshot victims are taken to the hospital for medical treatment.⁶⁴ The police however have the duty to conduct investigation to ascertain the cause of the gunshot.⁶⁵

2.4.3. Offences and Penalties

The Compulsory Treatment and Care for Victims of Gunshots Act, 2017 clearly creates certain offences and penalties for any disregard or disobedience of the provisions of the Act. Failure to report to the police within two hours of commencing the treatment of a gunshot victim is an offence under the Act.⁶⁶ Hospitals convicted of this offence is liable to a fine of N100,000.00 (Hundred Thousand Naira), and every doctor that is directly connected to the treatment is liable to the same amount or a term of imprisonment of six months or both.⁶⁷ Anybody that receives the report shall furnish the hospital on demand, with background information on the victim as he may be compelled to incriminate the victim;⁶⁸ where any person refuses, fails, or neglects to give the report, such person is liable on conviction to a fine of N50,000.00 (Fifty Thousand Naira only) or imprisonment of six months term or both.

The Act also criminalizes standing by. Any person, or authority including the police, security agents, or hospital who stand by and fails to perform their duties under the Act, which results in the unnecessary death of any person with gunshot wounds, commits an offence and will be liable on conviction to a fine of N500,000.00 (Five Hundred thousand naira only) or imprisonment for a term of five years or both.⁶⁹ Persons who commit any offence under the Act which leads to or causes substantial physical, mental, emotional or psychological damage to the victim, is liable on conviction to imprisonment for a term of not more than 15 years and not less than five years without the option of fine.⁷⁰ Where a corporate body commits an offence under the Compulsory Treatment and Care for Victims of Gunshots Act, 2017, the head of corporate body shall be prosecuted.⁷¹

In addition to the penalties under the Compulsory Treatment and Care for Victims of Gunshots Act, 2017, the High Court shall order a person or corporate body convicted of an offence to make restitution to the victim by directing that person or corporate body to pay to the victim an amount equivalent to the loss sustained by the victim.⁷² An order of restitution may be enforced by the victim or by the prosecutor on behalf of the victim in the same manner as a judgement in a civil action.⁷³

⁵⁷ Ibid, section 2(2)(a) (b)

⁵⁸ Ibid, section 3 (1)

⁵⁹ Ibid, section 3 (2)

⁶⁰ Ibid, section 4

⁶¹ Ibid, section 10

⁶² Ibid, section 12

⁶³ Ibid, section 3 (2)

⁶⁴ Ibid, section 2 (1)

⁶⁵ Ibid, section 3(2)

⁶⁶ Ibid, section 5

⁶⁷ Ibid

⁶⁸ Ibid, section 6

⁶⁹ Ibid, section 11.

⁷⁰ Ibid, section 9

⁷¹ Ibid, section 13

⁷² Ibid, section 14

⁷³ Ibid.

3.0 Impediments to the Implementation of the Compulsory Treatment and Care of Victims of Gunshots Act, 2017

More than five years after the enactment of the Compulsory Treatment and Care of Victims of Gunshots Act, 2017, the problem of requirement of police report and payment of initial treatment deposit persists. There has been continued breach of the provisions of the Act by health care facilities. Some of the impediments affecting the implementation of the Compulsory Treatment and Care for Victims of Gunshots Act, 2017 have been identified as follows:

i. **Legal Impediment**

The Constitution empowers the National Assembly to make laws on any of the items on the exclusive legislative list;⁷⁴ and empowers both the National Assembly and the States House of Assembly to make laws on any of the items found on the concurrent list.⁷⁵ The 1999 Constitution of the Federal Republic of Nigeria is silent on the legislative competence to legislate on health or even the treatment of gunshot victims in Nigeria; this is neither found in both the exclusive legislative lists and the concurrent legislative lists. The residual legislative list falls within the legislative competence of the State house of Assembly.⁷⁶ Some State House of Assembly like Anambra state, Lagos State and rivers state have enacted laws on the compulsory treatment and care of gunshot victims. Also, the Compulsory Treatment and Care of Victims of Gunshots Act, 2017 failed to make provision for the funding of the emergency treatment on gunshot victims.

ii. **Abuse of Power and Overzealousness of Police Officers**

The Nigerian Police have systematically encouraged a practice whereby medical personnels and health care facilities refuse to treat gunshot victims without police report. Hospitals in Nigeria apply caution in admitting patients with gunshot injuries due to the various cases of harassment.⁷⁷ The overzealousness of some police officers has been affected the implementation of the provisions of the Compulsory Treatment and Care of Victims of Gunshots Act, 2017. This has scared health care professionals and health care facilities into refusing to administer treatment to gunshot victims without police report.

iii. **Cost of Medical Treatment**

One of the major impediments to the realization and implementation of the Compulsory Treatment and Care for Victims of Gunshots Act, 2017, especially as it relates to the treatment of gunshot victims without the requirement of initial treatment deposit is the absence of the provision of who will bear the cost of treatment of the gunshot victim. Health care professionals and health care facilities expend time and resources in the treatment of gunshot victims and will need assurance that they will get reimbursed if they administer treatment on gunshot victims without insisting on payment of the initial treatment deposit. The Act was silent on who will pay the hospital bill in case the gunshot victims don't pay, and this is a cause for concern to most health care workers or hospitals.

4.0 Towards Compliance and Implementation of the Compulsory Treatment and Care for Victims of Gunshots Act, 2017.

i. **Training and Sensitization**

The provisions of the Act should be infused in the police college and medical school curriculum. Government, Non-Governmental organizations, and other stakeholders should enlighten individuals on the provision of the law and the procedure to enforce their rights as stated in the relevant laws. Government and other relevant stakeholders should encourage nationwide engagement of the Nigeria Police Force and hospitals by educating, sensitizing, and training them on their duties and/or obligations as provided in the Act. There is need to create awareness to educate law enforcement authorities, hospitals and the public on the rights and obligations under the Act. The Federal and State Ministries of Health, Ministries of Health, Ministries of Justice, Nigerian police, and the public at large should take the initiative and drive the awareness programs.

ii. **Disciplinary Measures**

The Medical and Dental Practitioners Council of Nigeria should reiterate compliance with the provisions of the Act in their rules of conduct and the Medical and Dental Practitioners Disciplinary Committee should sanction violations. The Police should also take disciplinary measures against

⁷⁴ Constitution of the Federal Republic of Nigeria, section 4 (2); Part I Second Schedule

⁷⁵ Ibid, section 4 (7) (b); Part II Second Schedule

⁷⁶ *Emelogu v The State* [1988] 3 NWLR (pt 78) 524; *Sele v The State* [1993] 1 NWLR (pt 269) 261; *A.G Federation v A.G Lagos State* [2013] 16 NWLR (part 1380) 249 SC.

⁷⁷ A Percy, 'Police Report: Families of Gunshot, Accident Victims in Tears amid Rising Cases of Needless Death' *The Punch*. 5 September 2021. <<https://www.punchng.com/police-report-families-of-gunshot-accident-victims-in-tears-amid-rising-cases-of-needless-deaths/%3famp>> accessed 20 July 2023.

officers who harass health care workers or health care facilities for police report prior to the treatment of gunshot victims. The Police, Professional Associations and even the government should be more proactive in ensuring that the provisions of the Act are strictly complied with.

iii. Prosecution of Offenders

Efforts should be made to prosecute those who fail to comply with the provisions of the Act. This will ensure compliance and deter health professionals and police officers from violating the provisions of the law. The prosecution of erring police officers, hospitals and/ or medical practitioners that fail in their duty under the Act should be encouraged. This will serve as deterrence and encourage compliance.

iv. Civil Remedies

Apart from the criminal prosecution of offenders under the Act, victims can also sue for the enforcement of their rights to dignity of human person by exploring the fast-track procedure of the Fundamental Human Rights Enforcement Procedure Rules 2009. Victims can also sue medical practitioners for medical negligence where they deny gunshot victims medicare for non-production of police report or non-payment of initial treatment deposit.

v. Establishment of Medical Emergency Assistance Fund

There is need to create a special Medical Emergency Assistance Fund to cover the treatment of victims of gunshot. which should be accessible to hospitals and health workers anytime they treat gunshot victims who are unable to pay their bills.

vi. Review of Administrative Procedures

There is need to review administrative procedures, especially hospital's standard operating procedures, to accomodate the provisions of the Compulsory Treatment and Care of Victims of Gunshot Act 2017. Also, the police should review their administrative procedures, especially as it relates to making a report. The police should consider accomodating reports made to them by telephone or email, as it may not be realistic in some cases to conclude treatment and still make it to the police to report within two hours of commencement of treatment as provided for under the Act.

vii. State Legislations on Compulsory Treatment and Care for Victims of Gunshot

States' House of Assembly should make legislations for the Compulsory Treatment and Care of Victims of Gunshot. The state laws should make provision for emergency funds that can be accessed by health workers and health facilities that treat gunshot victims without requiring initial treatment deposit from them.

5.0 Conclusion

The Compulsory Treatment and Care of Victims of Gunshots Act, 2017 is an important law which preserves the sanctity of lives and guarantees the protection of rights of gunshot victims. Even in the light of the provisions of the Compulsory Treatment and Care for Victims of Gunshot Act, 2017, there are various reports of blatant disregard of the provisions of the Act. Many medical facilities and workers still refuse to admit and treat gunshot victims without police report. Many citizens are still ignorant of the existence of the law. There is need to promote free legal awareness and enlighten people of their rights and the existence of the Compulsory Treatment and Care of Victims of Gunshot Act 2017. Also, there is little or no implementation and enforcement of the Compulsory Treatment and Care of Victims of gunshot Act, 2017 and other relevant state enactments where applicable. Consideration of the recommendations proffered will ensure an effective implementation of the enactments on the Compulsory Treatment and Care of Victims of Gunshots.