Human Resource Governance in Health Sector and Productivity of Health Workers in Enugu State University Teaching Hospital, Enugu, Nigeria, 2003-2023

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Abstract

The development of human resource governance in the health sector in Africa has remained paramount as government at various levels strives to meet up with global best practices. Thus, since the return to democratic rule, the Nigerian state has partnered with critical stakeholders in states and local governments to achieve a global re-commitment to a new development framework, the Sustainable Development Goals (SDGs), and increasing global support for the attainment of Universal Health Coverage. Thus, the aim of this study was to examine the extent to which the implementation of Human Resources for Health strategy has impacted on productivity of Health and social workers in Enugu State University Teaching Hospital, Park Lane, Enugu between 2023 and 2023. The specific objective was to determine whether financial motivation of health workers enhanced effective service delivery and, to ascertain if training of health workers accounted for high maternal and child mortality in ESUTH. This study employed time series research design, while Survey and Documentary methods were deployed for data collection. The study found that financial motivation of workers increased effective service delivery, and poor training of health workers on the use of Endoscopy machine accounted for higher maternal and child mortality. Arising from the findings of the study, the study recommended that adequate financial budgetary allocations should be made available to take care of the needs of employees, and regular and strategic training of health workers to increase their knowledge and competence.

Keywords: Human Resources Management, Health workers, Training, Need Assessment, Motivation

Introduction

In the recent times, following the needs to catch up with the trends of global competitiveness, organizations in their respective capacities have relied on the human element available at its disposal. This is argued that the most precious elements in any organisation always remain the employees who tactically manage to ensure that the set objectives and goals are actualized (Uneke, Ndukwe, Ezeoha, Uro-Chukwu & Ezeonu 2015). Sequel to the above, the achievement of the goals of organizations have remained constant following the increase in skills and knowledge of the employees, rate of its

productivity and the product of the relevant trainings and development given, and acquired by the personnel (Uzochukwu, Okwuosa, Ezeoke & Onwujekwew 2015). Accordingly, no organization can choose whether or not to train its employees, all new employees regardless of their previous training, education and experiences need to be introduced to the employer's work environment and to be shown how to perform specific tasks (Yousaf., Latif., Aslam & Saddiqui 2014, p. 51; Pigors & Myers 1981, pp. 280-283).

In Nigeria, the health system has been in persistent decline over the past few years, with resultant poor performances and enduring burden of disease and alarming poor health status as reported by Obi, Aniebue, Okeke, Okonkwo & Ugwunna (2015). In response to this level of health system decline, the Government of Nigeria initiated processes of health sector reforms. These reforms were geared towards strengthening the national health system in its mission to deliver effective, efficient, qualitative and affordable health service, and thereby improve the health status of Nigerians (Ekwochi, Ndu, Nwove, Ezenwosu, Amadi & Osuorah, 2014). However, prior to the onset of the new democratic government in 1999, the Enugu State health sector was ineffective, inefficient and inequitable as was also the case in other parts of Nigeria. The state had a centralized healthcare system which did not allow for an effective monitoring and supervision of healthcare workers, especially those of them in the rural areas (Ezugwu, Onah, Ezugwu, & Okafor 2009). As a result, most of the health workers were hardly seen in their duty posts, and even when they go to work, they usually leave their duty post early to attend to their personal needs. As if the above is not enough evidence as regard the state of health facility in the state. Uzochukwu, Onwujekwe & Ezumah (2014, P.23), observed that the distribution of staff was also inequitable and has led to over-centralization of healthcare workers in the urban areas to the detriment of the rural areas where more than 70% of the population reside.

The Problematique

The administration of Enugu State University Teaching Hospital (ESUTH), Parklane, has raised a lot of issues and unanswered questions. A lot of literature has concentrated in tackling the human resource challenges in other sectors, paying little or no attention to human resource governance in the health sector as it regards social and health administration (Ogbuabor, Okoronkwo, Uzochukwu & Onwujekwe, 2016). These were in response to why the state government's policies to reposition the health governance system in line with the national human resources for health strategy have refused to respond to series of diagnoses and treatments-reforms. Thus, one of the key elements of public policy in the form of National Human Resources for Health Strategic Plan is for the promotion of good health care system that supports the achievement of the national health objective of providing health for all, and the attainment of a broad-based economic growth and development with healthy citizens (Oluwabunmi, Akosu, Ejembi, Bassi & Zoakah 2009). It would also be noted that the service delivery powers of workers depend on their commitment to work, and that the health workers have been identified as an integral part of health system and is very relevant in improving health outcomes (Uneke, Ogbonna, Ezeoha, Oyibo, Onwe & Ngwu 2007). Notwithstanding the above shortcomings, the national human resources for health strategy through the Enugu State Ministry of Health between the period of 2003-2023 reveals that efforts made over the last few years on human health resources, governance and basic health infrastructure, the health system of the state has now appreciated to substantial growth.

Methodology

The study utilized mixed methods approach (Cross sectional survey and Documentary Method) for data collection. Documentary method was carefully used to obtain in-depth knowledge from secondary sources such as journals, periodicals, government publications, reports, encyclopedia, magazines, newspapers and from the internet. Survey method includes questionnaire and interview. However, for the purpose of this work, the researchers made use of questionnaire instrument for collection of data.

Population of the Study

The study was carried out in Enugu State focusing on Enugu State University Teaching Hospital, (ESUTH) which is the state's teaching hospital. The hospital is made up of thirteen Departments which are obstetrics & gynecology, surgery, internal medicine, pediatric, school of midwifery, medical social services, pharmacy, nutrition/dietetics, chemical pathology, micro-biology, hematology, histopathology, medical records. The population of the study which is Five hundred and twenty-eight staff (528), according to ESUTH Bulletin, 2018 which covered all the staff in the aforementioned Departments. The staff includes health professionals and non-health professionals. The health professionals include consultants, resident doctors, medical officers, optometrists, physiotherapy, clinical psychologists, nurses, pharmacists, laboratory scientists and radiographers. The non-health professionals include administrators, medical assistants, drivers, sanitary agents, porters, clerical officers, medical records, accountants and security men.

Sample Size and Sampling Techniques

The study adopted Stratified Random Sampling technique in which all the individuals that consist the population stand chance of being selected. To determine the sample size, respondents were selected from various Departments in the hospital, ensuring that every staff stands the chance of being selected. Out of the thirteen departments in the hospital, all Departments were randomly selected to form our sample population. The total population in these Departments is 528 from which the sample size is derived. Taro Yamane's formula was used in determining the sample size.

Results/Discussions

The results generated from the field on the areas of Implementation of Consolidated Health Salary Structure, Health Workers and the Group life/Group Personal Accident Assurance Policy, Utilization of Medical Residency Training Fund and Reduction of Death rate of Patients, Work Environment for Health Workers and Admission Turnover over of Patience are discussed under the following themes.

• State Government Approval and Implementation of Consolidated Health Salary Structure (CONHESS)

The Consolidated Health Salary Structure (CONHESS), is the salary structure used by the federal government of Nigeria to pay health workers. The payment scheme was introduced by the federal government in 2009, and it came to effect in 2010. The implementation of Consolidated Health Salary Structure (CONHESS) at the federal level is managed by the National Salaries and wage Commission. However, in line with federal government policy in health sector through National

Human Resources for Health Workers, the state governments have started to key into federal health policy through the implementation of Consolidated Health Salary Structure (CONHESS) at the state level.

Thus, the Enugu state government has in 2021 made the announcement on the implementation of Consolidated Health Salary Structure (CONHESS), when the Governor addressed a delegation from JOHESU comprising members of the National Association of Nigeria Nurses and Midwives (NANNM), Nigeria Union of Allied Health Professionals (NUAHP) and Medical and Health Workers Sector Union of Nigeria (MHWUN). The State Chairman of JOHESU, Comrade Ezekiel Omeh, told Governor that they are very grateful to the Almighty God who has chosen you, Your Excellency, to actualize the implementation of Consolidated Health Salary Structure (CONHESS) for the health professionals and workers in Enugu State. Speaking further the JOHESU Chairman said:

Your Excellency, we are happy that today, you have placed us at par with our peers and contemporaries in the health industry who have been enjoying the CONHESS which is the appropriate Salary Scale operational in the Country since 2010. We are aware that in the previous times before your coming in as Governor, the Economy was good enough to implement CONHESS for us but our agitations for it then resulted in giving us more pains than relief. To assuage the situation, Your Excellency (Ugwuanyi) approved 10 percent CONHESS in 2018 and in 2021, you approved additional 31 percent making a total of 41 percent CONHESS. Retrieved from: https://theeagleonline.com.ng/jubilation-as-ugwuanyi-approves-60-conhess-for-health-workers/

The state chairman also maintained that the Governor has "given COVID-19 allowance that lasted for upward of one year when other states, including Federal Government, had withdrawn the payment. He emphasized that:

We also appreciate your aggressive investment in the health sector in Enugu State. To mention a few, we are impressed and grateful for the transformation of Poly Clinic Asata to General Hospital, Uwani Health Centre to a General Hospital, renovation and reconstruction of Udi General Hospital, Awgu General Hospital and School of Midwifery, Awgu, reconstruction and renovation of Nsukka General Hospital, Enugu-Ezike General Hospital, the phenomenal progress in construction of permanent site of ESUT Teaching Hospital at Igbo-Eno and building of new General Hospitals in different Local Governments in the state that are ready for commissioning. Retrieved from: https://theeagleonline.com.ng/jubilation-as-ugwuanyi-approves-60-conhess-for-health-workers/

However, it is interesting to state here and measure whether the implementation of Consolidated Health Salary Structure (CONHESS) for the health professionals and the punctuality of medics in Enugu State Teaching Hospital, Parklane. From the results of the field work as presented in the table, we can now measure the level of association between the implementation of Consolidated Health Salary Structure (CONHESS) for the health professionals and the punctuality of medics.

Table 1: State Government Approval and Implementation of Consolidated Health Salary Structure (CONHESS) and Punctuality of Medics

Test Item	N	Min.	Max.	Mean	Std. Dev.
State Govt. approval and implementation of CONHESS does affect the Punctuality of Medics	228	1	4	3.14	1.406

Source: Field work (2023)

Decision point = 2.5. Agree if mean \geq 2.5 and disagree if mean \leq 2.5

The finding from the above survey reveals that the punctuality of medics in Enugu State teaching hospital, Park Lane, was influenced by the approval of the state government in the implementation of CONHESS (Consolidated Health Salary Structure) for health professionals. However, with a mean 3.14, the respondents agree to the item statement having surpassed the benchmark of 2.5 as a decision rule for acceptance. The finding also reveals that the variation from the mean responses was very low to a measure of 1.406, hence expressing a high level of similarity in their responses to the test item. It also expresses a level of reliability in the responses derived from the survey.

• Health Workers and the Group life/Group Personal Accident Assurance Policy

The policy for Group Personal Accident Assurance is essentially designed to provide benefits to health workers in the event of sustaining injury, which may result to permanent disability or death. The assurance policy operates on a 24 hour basis irrespective of whether or not the injury occurred while at work. Importantly, benefits are usually in multiple of annual salaries, are paid in the event of death or permanent disability. As stated, the policy also pays a weekly benefit up to hundred and four (104) weeks, in the event of any employee being temporarily disabled. The amount of benefit here usually does not exceed the employee's actual weekly earnings.

Furthermore, medical expenses incurred on any employee as a result of an accident are also reimbursed through the policy up to an agreed limit stated in the policy. However, in the implementation of the National Human Resources for Health Strategy in collaboration with state's government, the Enugu state government has approved assurance policy for medical doctors and other health workers in the state government to boost their morale in the war against the spread of corona-virus in the state (Tribune Online, August 16, 2021). All medical doctors in the Enugu State University of Science and Technology (ESUT) Teaching Hospital, Park Lane, Enugu as well as firefighters, the staff of Enugu State Emergency Management Agency (ESWAMA), and all those involved in other essential services are expected to benefit from the Group Life/Group Personal Accident Assurance Policy.

However, it is interesting here to measure whether the implementation of Group Life/Group Personal Accident Assurance Policy for the health professionals and the level of service delivery by medics in Enugu State Teaching Hospital, Park Lane. From the results of the field work as presented in the table, we can now measure the level of association between the implementation of Group Life/Group Personal Accident Assurance Policy for the health professionals and the level of service delivery of medics in Enugu State Teaching Hospital, Park Lane.

Table 2: Health Workers' the Group Life/Group Personal Accident Assurance Policy and increase admission turnover of patients

	N	Min.	Max.	Mean	Std. Dev.
Health Workers' the Group Life/Group Personal Accident	228	1	4	3.14	1.406
Assurance Policy is linked to the increase of admission					
turnover of patients					

Source: Field Work (2023)

Decision point = 2.5. Agree if mean \geq 2.5 and disagree if mean \leq 2.5

The findings from the survey shows that the implementation of Health Workers Group life/Group Personal Accident Assistance policy is associated with the rate of service delivery of medics in Enugu State Teaching Hospital Park Lane, with specific reference to the increase of admission turnover of patients. However, with a mean of 3.14, the respondents agree to the item statement having surpassed the benchmark of 2.5 as a decision rate for acceptance. The findings also reveals that the variation from the mean responses was very low to a measure of 1.406, thus, suggesting a high level of correlation in the responses provided by the elements of the sample as observed in the survey.

• Utilization of Medical Residency Training Fund and Reduction of Death rate

The Medical Residence Act 2017 states that there shall be a Residency Training Programme (in this Act referred to as "the Training Programme") for the training of all medical practitioners and dental surgeons in accordance with the provisions of this Act. On the funding of the Residency Training Programme, Article 11.-(1), maintains that all payments accruing to Resident Doctors shall be made through the Integrated Payroll and Personnel Information (IPPIS) platform, and article 11 (2), states that funds for the training Programme shall be made available through-(a) National budgetary allocations to Residency Training Institutions; and 20% internal funding from Residency Training Institutions.

In compliance with the National Human Resources for Health Strategy, the implementation of Medical Residency Fund by the Enugu State government has generate reactions by the members of the Association of Resident Doctors (ARD) at the Enugu State Teaching Hospital, Park Lane. However, it is interesting here to measure whether the utilization of Medical Residency Training Fund has reduced of death rate of patients in Enugu State Teaching Hospital, Park Lane. From the results of the field work as presented in the table below, we can now measure the level of association between utilization of Medical Residency Training Fund has reduced of death rate of patients in Enugu State Teaching Hospital, Park Lane.

Table 3: Utilization of Medical Residency Training Fund and Death Rate of Patients

	N	Min.	Max.	Mean	Std. Dev.
Utilization of Medical Residency Training Fund is linked to the and Death Rate of Patients	228	1	4	2.64	1.380

Source: Field Work (2023)

Decision point = 2.5. Agree if mean \geq 2.5 and disagree if mean \leq 2.5

Findings from the above survey reveal that the utilization of Medical Residency Training Fund is associated with death rate among patients admitted in Enugu Sate Teaching Hospital Park Lane. However, with a mean of 2.64, the respondents agree to the item statement because the mean response surpasses the benchmark for acceptance being 2.5. The findings from the survey also

expresses that the variation from the mean is very high at a measure of 1.380. This implies a high level of dissimilarity between the responses provided by the survey. This suggests that there exist a low degree of reliability in the responses provided.

Work Environment for Health Workers and Admission Turnover over of Patience

Nigeria has experienced tremendous growth in its housing sector, as captured by the real estate sector, with the housing market estimated to have grown to about 20.0 per cent in terms of asset prices. However, the housing sector in Nigeria still accounts for only 3.0 per cent of Nigeria's GDP and the current housing construction stands at about 100,000 units a year for a country of over 190 million people (Agbugah-Ezeana, 2019). In spite of government's intervention in the housing sector, there is an acute problem of housing availability, accessibility and affordability without corresponding actions to match the demand and call for urgent collaboration among stakeholders (Ihua-Maduenyi, 2019). The need for increased government intervention is derived from the imperfections of the housing sector, the protection of vulnerable group(s) and the provision of an enabling environment for the sector to flourish.

However, Nigeria which has over 200 million population is facing a crisis of housing and accommodation. Housing problems abound in both rural areas and urban centers. The problem in the rural areas has to do with qualitative housing while the problem in the urban centre is both quantitative and qualitative in nature. Almost half of Nigeria's population live in cities, with 80 percent living in overcrowded slum areas and generally poor living conditions coupled with inadequate infrastructural amenities. Rural houses are of generally poor condition, and they are characterized by lack of potable water, toilet and decent environmental conditions.

Moreover, just like the way we have crisis of accommodation in Nigeria, the public utility like hospitals is not left out. Just like in the LASUTH, the Chief Medical Director, Prof. Adetokunbo O. Fabamwo, has admitted that the issue of lack of accommodation and low bed space has been a serious burden that the hospital, government and major stakeholders have been working tirelessly on. He maintained that the facility with just 750 bed space is overwhelmed with about 50,000 patients quarterly, which makes it very impossible to admit patients in most cases. He further noted that the tertiary health in the situation is overwhelmed with health cases as a result of patients not making effective use of the primary and secondary health facilities. He also maintains adequately that:

there are some cases that can be well attended to in primary healthcare centers but presented in tertiary healthcare centers instead of referral which increases the incidents of low bed space. We want to assure citizens that LASUTH management is listening and active. We are also listening and when we find out we need to amend our way, we do so. The state government has injected a lot of money. And LASUTH has about 150 consultants in various specialties. We have consultants that perform major surgeries and we want to extend such services to our people. We have heard complaints about bed space, we want to address it and some of the advanced things we are currently working on. We want our stories to not be told in an advertorial style but awareness

Also, the Association of Resident Doctors, Lagos State University Teaching Hospital (LASUTH), Ikeja, decried the lack of accommodation for resident doctors at the hospital, and how it has continued to affects service delivery. As observed by Its President, Dr Babatunde Fatai, he noted that it is:

Unfortunately, in LASUTH, there is no accommodation or hostel for resident doctors working, such that most of our colleagues, even when they are not on call will have to stay till late at night before they go home.this, definitely, will affect their works, one way or the other'

To cushion the effects of the above, the Chief Medical Director also maintains that LASUTH has streamlined her admission process by employing bed managers who constantly monitor available bed spaces and also the admission processes, reporting to appropriate quarters. The hospital also monitors stabilized patients at the emergency rooms to ensure they are transferred to the wards on time that more spaces are created for more patients. In addition to this, the hospital has embarked on a building project with 120 beds which is another strategy to solve the issue of limited bed space. However, it is interesting here to measure how work environment for health workers has impacted on the admission turnover over of patients in Enugu State Teaching Hospital, Park Lane. From the results of the field work as presented in the table below, we can now measure the level of association between work environment for health workers has impacted on the admission turnover over of patients Enugu State Teaching Hospital, Park Lane.

Table 4: Work environment for Health workers and admission turnover of patients

	N	Min.	Max.	Mean	Std. Dev.
Conducive work environment for Health workers is linked to admission turnover of patients	228	1	4	2.54	1.006

Source: Field Work (2023)

Decision point = 2.5. Agree if mean \geq 2.5 and disagree if mean \leq 2.5

The findings from the above table reveal that the conducive work environment for health workers does affect the admission turnover of patients in Enugu State Teaching Hospital, Park Lane. The mean score of 2.54 was above the 2.50 benchmark for acceptance. Hence, the item statement was accepted. However, the finding also shows that the deviation from the mean was high with a score of 1.006. This suggests a high level of dissimilarity between the responses provided in the survey. Thus, it implies that the same respondents are shared between extremes of the survey.

Conclusion and Recommendations

The findings of the study show that the effective implementation of National Human Resources for Health Strategy and productivity of health workers in ESUTH, Park Lane, is dependent on motivation of health workers in ESUTH. This is evidence from the views of the respondents who agreed that financial motivation has led to increased service delivery in achieving government policy on the implementation of National Human Resources for Health Strategy. The financial motivation of workers increased effective service delivery as the mean score (x) for state government approval and implementation of Consolidated Health Salary Structure (CONHESS), stands at > 3.14. This means that there is a significant relationship between financial motivation of workers and effective service delivery as outputs of workers have increased the level of productivity in ESUTH, Park Lane. Thus, ESUTH, Park Lane is regarded among the largest employer of labour in Teaching hospitals in Nigeria. The crucial role of the hospital in giving adequate attention and treatments to patients requires that it should have under its employees, knowledgeable and skilled manpower. The struggle to get the talented prospective employees means that only organization with the best welfare package/incentive schemes/fat remunerations could succeed in attracting and retaining them.

Also, the findings of the study revealed that poor training of health workers accounts for high maternal and child mortality in ESUTH, Park Lane. This is evidenced from the responses of the respondents who agreed that health workers who are not properly trained, perform poorly in their service delivery. The poor training of health workers on the use of Endoscopy machine accounted for higher maternal and child mortality as the mean score (\bar{x}) is < 2.44. This is as a result of controversial laboratory tests coming out from different Laboratory Scientists. However, a strong health system must have a robust finance structure, well-remunerated and trained workforce, sufficient and highly maintained facilities, logistics for medicines, vaccines and technologies and a reliable and regularly updated health information system. With appropriate governance, all these ensure accessible and timely health service delivery to the population. As demonstrated by the repeated workers' protests, relatively poor state of health facilities, sub-optimal management of common diseases and high rates of medical tourism, among many others, the Nigerian health system is seemingly not fulfilling her obligations.

Furthermore, job satisfaction of health workers has decreased as the mean score (x) is ≥ 2.41 . This means that job dissatisfaction among the health worker has implicated on the latter absconding their duties. The resultant effect is the high records on the number of deaths, and wanton labour turn over from different Departments of the hospital.

Sequel to the above findings, the challenge of achieving the implementation of National Human Resources for Health Strategy goals in ESUTH, Park Lane, at the expense of the workers has been the bane of productivity and effective service delivery. In view of the strategic role of effective motivational schemes in attracting, developing, and retaining high calibre workers, the Chief Medical Officers of government general teaching hospitals are encouraged to be abreast with the principles and assumptions of motivation including contending motivational theories so as to stimulate goal directed behaviour among the workforce. To this extent, Chief Medical Officers are to discover the best forces that could spur staff to goal directed behaviour from time to time as satisfaction of one need leads to another need springing up for attention. Based on the findings of the study, the following recommendations are made:

- The welfare of ESUTH staff should be given priority over all others in the recurrent expenditure. Adequate budgetary allocations to taken care of the needs of employees should be made as financial motivation of health workers enhanced effective service delivery in ESUTH Park Lane.
- There should be an adequate strategic training of health workers. The existence of regular training of workers helps to increase the knowledge and abilities of workers and this will invariably increase workers commitment towards performing effectively to accomplish organizational goals.
- There should be constant employee recognition programmes that will enhance job satisfaction among the health workers, and reduce high labour turnover in ESUTH, Park Lane. Enugu state government in general, and ESUTH, Park Lane in specific should endeavour to show recognition in the form of National productivity award on any individual or group(s) of employees that perform effectively towards the achieving goals of the hospital.

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