



Akwa Ibom State Association of Nigeria, USA, Inc.
22nd Annual National Convention, Detroit, Michigan
THE NATIONAL TOWN HALL CONFERENCE

Theme: Enabling Positive Social Change through Pragmatic Policy Initiatives
Presentations & Discussions on Problems, Causes, and Solutions for AKS on:
HEALTH, EDUCATION, COMMERCE & INDUSTRY, AND SAFETY

Saturday, August 15, 2009
Panel Presentations & Discussions 1:00pm to 3:00pm
Hyatt Regency Dearborn
600 Town Center Drive
Dearborn, Michigan 48126-2793, USA



Assumptions

The suggestions herein submitted are intended for consideration as contributory ideas towards the reconstruction of Akwa Ibom State of Nigeria. Inherent in these suggestions is the understanding that Akwa Ibom is a developing state in a developing nation. Furthermore, the economic sectors that coexist in Akwa Ibom are identified as follows: Government, Philanthropic (NGO's), and Business.

Each sector plays an important role in the economic framework without which the other sectors cannot function in the development process. For sustainable socioeconomic development, the government is dependent upon the business sector to generate the wealth that supports the work of the government through taxation. The Philanthropic sector is dependent on both Government and Business financially, and the Business is dependent on Government for stability, security, and the core infrastructure for utilities, transportation and communication. To maintain cultural values and civil society, the government and business will depend on the Philanthropic sector. Fundamentally, these sectors are the stakeholders in the process of developing Akwa Ibom through collaboration for sustainability. Ultimately, these sectors work for the good of the citizens of the state, their families and communities.



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Health Care Alternatives

DEBUNKING COMMON MEDICAL IBIBIO BELIEFS, TABOOS, AND SUPERSTITIONS

By Dr. ASUQUO N. INYANG MD, FRCS, FWACS, AFMCS, FASE.

There is a lot to commend and be proud of Ibibio people, the culture and tradition, and the communal experiences that have framed our world view, opinions, and practices in medicine and civic society. In the absence of science and technology, our people developed and propagated our traditional medicine, even in specialties that would be regarded as crude genetics and forensics, which were useful before the advent of modern medicine. Probing of potential in-laws by investigators to ensure the purity of their lineage is a practice in genetic screening and forensics. Telling communities to avoid certain foods because they could be harmful was a form of immunology. Some of our practices got shrouded in mystery and was laced with incantations accompanied by a lot of song and dance. The limited ability to diagnose and treat ailments led to conjecture, the creation of a belief system immersed in taboos and superstition. So when we are unable to explain things, we attribute them to the gods. This situation is not limited to our Ibibio culture. The nature of emerging civilizations has been that when they are unable to explain a situation or condition, they attribute it to the gods. Ancient Greeks and ancient Egyptians thought that pain was caused when one offended the gods. Severe pain would require remedies that could include sacrifices. You can extrapolate the same to our Ibibio culture, when we are unable to explain a phenomenon; we attribute it to ekpo, ifot and ndem. Modern medicine does not have explanation to all our medical conditions, but it does have clear explanations of the conditions that we do understand.

EKPO NKAOWO

Ekpo nkaowo is nothing but what in medical terms is called Obstructed Labor, one of the commonest causes being cephalo-pelvic disproportion. That is a situation where the head of the baby is bigger than the mother's pelvis, and therefore, has difficulty being born. In modern day medicine, without early intervention, this can and does lead to significant maternal morbidity, especially in 3rd world countries. Absence of intervention can lead to both fetal and maternal mortality. The disproportion is usually due to the mother having a big baby compared to her size. It is conceivable, that a woman who has had normal sized babies in the past can have a huge baby from myriads of medical conditions, or the baby's father happens to be a much bigger person physically. Confession of infidelity has no way of medically resolving the situation. Expert obstetric care which may involve instrument delivery or a caesarian section will ameliorate the situation. There is no ekponkaowo, and no confession of infidelity is required. Period...

AKPA-UBENG

This says one half of your body goes dead. This is usually attributed to an assault by ekpo (ghost) slapping (or hitting) the victim, and the assaulted part of the body dies and the person no longer has the ability to use the arm and leg, and the face is distorted. The ekpo is supposed to have done this at the instigation of some community villain.

Explanation

In medical terms akpa-ubeng is called a stroke in lay-man terms. In real medical terms, it is called cerebro-vascular accident. This is caused by the disruption of blood supply to the brain, from a burst blood vessel as in very severe hypertension, aneurysms (dilatation of blood vessels) or some



malfamation of the vessels in the brain - a condition called arterio-venous malfamation. Disruption of brain blood flow can also be caused by a clot, plaque or debris in the brain vessels. Either way the result is the same. The patient is paralysed. In this situation, prevention is the key, in controlling blood pressure, and preventing situation that can lead to the propagation of emboli, or surgically clipping a brain aneurysm or arterio-venous malfamations. There are also many medical and surgical techniques that could be utilized to treat the patients. Time is of essence in this endeavor and requires the correct diagnosis so the appropriate therapy can be delivered.

NDUKPI

This is seizure disorder (epilepsy). There is an Ibibio belief that it is contagious, that if a sufferer touches you, that you can acquire the disease. This is so thoroughly wrong. Seizure disorder is caused by abnormal electrical waves from the brain which leads to the convulsions that are witnessed. There are many types of convulsions. The commonest type people know is the tonic-clonic type called grand mal seizure. Other causes of convulsions, especially in adults include brain tumors like it happened to US Senator Edward Kennedy, and commonly in children where it can be brought on by a high fever (febrile convulsion). I have witnessed instances where febrile convulsion has been blamed on ifot and villains named. Febrile convulsion is easily treatable, but it can kill if help is not sought on time and the temperature not lowered fast enough.

ITO (IMPOTENCE)

There was a period as recent as the 1980s and 1990s when witches were accused of stealing people's penises in our major cities in Akwa Ibom and Cross River States. As recent as 2008, the same was reported on CNN as emanating from Central Africa. The truth was that there were no missing penises, but the men not wanting to admit that they have become impotent accused witches of stealing their penises.

EXPLANATION

The penis is made of muscles, blood vessels, nerves and skin. It gets erect when it is engorged with blood. Impotence is caused when the blood supply to the penis is diminished so the person is unable to achieve an erection. This is especially common in diabetics, because uncontrolled diabetes tends to attack the small blood vessels in the body, especially the type that supplies the penis, a condition in medical lingo called microangiopathy. It does also occur in patients with peripheral arterial disease, where there is blockage of the arteries, and if it actually affects the artery that supplies the penis, erection will fail, and the person will be impotent. The penis will be floppy. As with any muscle in the body, if the muscle is not used, it atrophies and shrivels and becomes much smaller than it used to be. With vascular surgery and urological techniques blood flow can be restored in some circumstances. That failing, there are several types of penile prostheses that are available, they function well and are relatively easy to perform by the specialists.

COMPLETE UTERINE PROLAPSE

I was a final year medical student on vacation in Calabar way back about 1980-81 when there was a big ruckus in one of the side streets off Edgerly Road where a large crowd had gathered. I inquired what it was all about, and I was told a witch had just been exposed. The alleged witch was a scantily clothed elderly lady who could not walk and was crawling on her buttocks.



When she was asked to press some part of her anatomy, a big penis came out, and when she pressed the area again the penis disappeared. Only a witch the mob reckoned, as they continuously assaulted her, could have both male and female genitalia.

EXPLANATION

The lady had what is called procidentia or complete uterine prolapse in which there is a weakness in the floor of the pelvis so that the internal female reproductive parts - cervix and uterus descend through the vagina to appear on the outside just below the pubic symphysis, where a male phallus would be situated. This is a rather common situation in women who have had many pregnancies and vaginal deliveries. The repeated pressure of the babies' heads against the mother's perineum eventually weakens the mother's pelvic floor that would eventually set her up for some degree of prolapse. When the prolapse is complete, and the uterine cervix exposed to irritation and friction, it does become somewhat keratinized, and when seen can actually look like a full sized male phallus. What the mob needed was education and enlightenment, and what the lady needed was care and sympathy. There are numerous surgical techniques that are used to strengthen and or repair weak pelvic floors and there are surgical treatments available for all the various degrees of uterine prolapse. Nobody should ever be subjected to such inhumane treatment.

IFOT ATA UBOK (The witches attacked the arm)

Subacromial tendinitis – rotator cuff injury

The muscles around the shoulder that enable movement of the arm from the side as if one is standing at “attention”, to raising the arm over the head as if in “surrender” are called the rotator cuff muscles. When the tendons from the muscles are inflamed, this is called tendinitis. The commonest tendinitis of the lot is the subacromial tendinitis. When this happens, one is unable to raise the arm up to and beyond 90 degrees or horizontal level. It can be so painful that one may not be able to use the arm for some considerable amount of time. When the arm is not used for a long time, the muscles will waste away, and it will look as if the arm has been paralyzed. Thankfully, the tendinitis is usually self limiting and short lasting, so that the inflammation subsides eventually and one can use the arm again even without any treatment at all. Healing can be accelerated by pain management techniques such as the injection of steroids and local anesthetics into the joint, combined with physical therapy. Rotator cuff tears are a different entity altogether, and would require, arthroscopy and or surgical rotator cuff repair.

IFOT ATA ITONG UKOT

Achilles Tendon rupture

This is another tendon injury that is common in physically active middle aged men. The onset is always traced to some physical activity like playing tennis, and the person suddenly finds that he is unable to run or walk and lifting the foot takes an effort. Our people attribute this to ifot. The medical explanation is the degeneration of the Achilles tendon with the gradual loss in tensile strength. This condition does have a genetic background and can also be as a result of the irritation of the tendon on a bone spur. The weakened tendon then snaps when the force exerted on it is greater than its tensile strength. Treatment is surgical repair of the tendon, and will require the wearing of a below knee plaster cast to immobilize the joint until the tendon is completely healed. Premature exertion of the Achilles tendon may lead to a repeat rupture, thus further playing to the lore.



Appendicitis

Our people call this ayo idip – meaning abscess or pus in the abdomen. It used to be thought that appendicitis was caused by the ingestion of sand or tiny fragments of rocks that used to be prevalent in Nigerian produced rice – that used to be called Abakiliki Rice – and this would lodge in the appendix and obstruct it leading to appendicitis. In medical lingo any word that ends in “itis” would suggest inflammation. There are numerous causes of appendicitis, some would include the obstruction of the lumen of the appendix by a fecolith – stone formed from feces or by round worms, pin worms, lymph nodes usually close to its base near the caecum. This compromises the blood flow to the rest of the appendix. Appendicitis can also be caused by viral infections. There is also familial susceptibility to appendicitis because it tends to run in some families that almost all family members would have it. Very often the cause of appendicitis is not found. The bottom line is that the appendix gets swollen, red and angry looking (inflamed), becomes turgid, and if not dealt with expeditiously, it becomes gangrenous, can form an abscess (ayo idip). It can rupture and spew pus all over the abdomen setting up what is called peritonitis. This is a grave situation as it can be lethal. This is what killed the New York Senator Daniel Patrick Moynihan and the famous magician Houdini. For this reason, appendectomy (appendicectomy) is the commonest emergency surgical operation, to remove the appendix before it progresses beyond the easily treatable stage.

Sickle Cell Disease

Sickle Cell Disease is caused by alteration in the hemoglobin gene. Hemoglobin is contained in the red blood cell and it is the main substance that carries the oxygen in the blood round the body. The normal red blood cell contains Hemoglobin A, it is shaped like a disc, it is soft and pliable and therefore, able to pass through tiny blood vessels to supply oxygen to end organs. When there is gene alteration (mutation) the hemoglobin is no longer Hemoglobin A. The commonest one is the Hemoglobin S, but there are also Hemoglobin C and SC. Somebody with AS is only a carrier of the gene, this person does not have the disease, but can pass this gene to the off-spring. If an AS person marries another AS person, statistically, ¼ of the off-spring will be SS, ¼ will AA, and ½ will be AS. Red blood cells with this variant hemoglobin S is not as soft and pliant as A. When oxygen is low, the shape changes from discoid to a crescent hence the name sickle cell, because it looks like the sickle – a farm tool. This sickle cell is rigid, and gets destroyed very easily in the body, so the life span of the red cell is shorter. Instead of the normal 120 days for Hemoglobin A, the life span of the S hemoglobin is 16 days. Therefore, there is continuous red cell destruction; the patients are continually anemic and jaundiced. They are susceptible to certain kinds of infection and as a general rule tends to have a shorter lifespan. Our people recognize the short lifespan, and would say people do not live long in that family, and it is attributed to some villain in the family. Fortunately, with modern medicine, marrow replacement and close monitoring, the lifespan of these individuals can be prolonged. Genetic counseling before marriage to avoid the SS situation is a good start. Gene therapy is the future hope for these patients to correct the original gene mutation.

NDEM (Bipolar Disease); Schizophrenia and Genetic counseling; Nkwa Iyo (Ijaw); Inia (Chronic open sore); Ayo Okpo (Osteomyelitis); Akpai-kpai Ikong (TB); Ikong Ebok (ASTHMA)



HIV/AIDS: Risky Behavior

Dr. Ibanga Ikpe. President: Global United Children's Foundation, Inc. Miami. FL.

Despite evidence that prevention programs instituted some time ago in Nigeria to reverse the tide of HIV/AIDS are beginning to have an impact in some parts of the country, the HIV/AIDS epidemic continues to grow in Akwa Ibom State. The number of those infected has grown astronomically in some parts of the state, especially in urban areas in comparison to others. Stigmatization, discrimination and poverty are some of the factors that new infections among women, especially young women continue to outgrow those among men.

Possible causes of the health care dilemma and risky behavior in Akwa Ibom State stems from the lack of promising and comprehensive approach to reversing the spread of the pandemic and deaths due to AIDS. This problem is also compounded by the absence of tailored and appropriate prevention, testing, treatment, care and support intervention that targets those at the greatest risk of contracting and transmitting the disease.

Other factors that promote the continuous rise of HIV/AIDS in Akwa Ibom State are; the lack of knowledge about the disease, lack of trained health workers, medical supplies, lack of integration of HIV/AIDS programs with other services such as maternal health care. Making unhealthy choices, stigma and discrimination leads to social exclusion and discrimination against those at risk and thus thwarts prevention effort by driving marginalized individuals underground. One big cause of HIV/AIDS spread in Akwa Ibom State is the cost of the antiretroviral drugs as most of the affected persons are poor and cannot afford the cost.

Gender and socio-economic inequalities make women more vulnerable as poverty drives them to engage in transactional sex to either pay for food, school fees, or other necessities. Most women cannot negotiate condom use and are often bullied to engage in sex acts.

“Gaining the upper hand against the AIDS epidemic in Akwa Ibom State will require rapid sustained expansion in HIV prevention.”

A unified and state wide commitment, which includes sustained expansion of prevention and treatment efforts to turn the drag on this disease, should, nonetheless, be constructed. I do not see Akwa Ibom at home or abroad as worlds apart, I see Akwa Ibom people everywhere as a fundamental part of the homeland and should be partners and stakeholders in the development of the state. Our state Government should tap into the talents and partner with Akwa Ibomites in the Diaspora for a coordinated effort to rectify HIV/AIDS in our state.

Now let me be clear, Akwa Ibom State is not a crude caricature of people perpetually at war with itself, or uneducated people who cannot manage their own industries, rather we are proud people who need to train and educate people to do more for themselves.

As a “land of Promise,” Akwa Ibom State needs strong institutions that will enable its citizens reach the promise land of good health, prosperity and progress and extend its hand as a beacon of change that can unlock our potential as an HIV/AIDS free state.



Building a health service of all talents in Akwa Ibom State: The often forgotten multi-disciplinary / multi-sectoral approach

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Introduction

Governments across nations want to see greater efficiencies from the healthcare sector to cope with the demands of an ageing population and increased life expectancy. Many countries have reformed their health services since the 1980s due to rising costs and changing patient needs. Akwa Ibom State Government (AKS) may be arriving late at the centre stage in modernizing its health care sector but should not just be committed to expanding the number of doctors, nurses and other health professionals. However, alongside expansion must come reform, to change the way staff work, the way they are trained and how they are educated. Realizing the potential of all health staff should be our aim; we want a health service of all talents. This paper sets out briefly the reasons why the current workforce planning arrangements need to be changed to help deliver a multi-disciplinary workforce which the modernized health service in AKS requires. It also makes a series of recommendations as to how this can be achieved.

Where are we now?

The current arrangements for workforce planning create a host of problems, which need to be tackled. In particular current arrangements in the health service are **NOT**:

- Built around service needs and the skills required to deliver them.
- Well integrated with service and financial planning.
- Holistic in their approach, looking across primary, secondary and tertiary care or across staff groups.
- Responsive to service changes and developments.
- Supportive of multi-disciplinary training, education and working.
- Multi-sectoral in its approach

What changes need to be made?

In order to improve the present arrangements I will make a number of proposals and recommendations covering six key areas. While some of these recommendations are firm and can, subject to consultation, be taken forward quickly, others will require more debate and discussion to agree the way forward.

Greater integration, more flexibility: We need to recognize that current workforce planning and development arrangements inhibit the development of multi-professional planning and have not supported the creative use of staff skills. I would like to stress the need for:

- Greater integration of workforce planning and development with service and financial planning.
- More flexible deployment of staff to maximize the use of their skills and abilities.



I also make a number of proposals to help achieve these aims, including:

- Workforce planning and development to be aligned with service planning.
- Workforce plans to be developed on a multi-disciplinary basis, focusing on services to be delivered and looking across primary, secondary and tertiary care. For example, a nurse – led diabetic services (UK), community mental health services run by community health workers (UK) and surgeon-led mobile health service delivery centres (Ghana).
- The establishment of a **Health Workforce Development Board** to be responsible for ensuring the proper integration of workforce issues with service development taking account of skill-mix changes and research and development findings. It should incorporate the work of any existing uni-professional groups.
- Central action to co-ordinate work on skill-mix changes and the development of new types of healthcare worker.

A multi-disciplinary and multi-sectoral approach: There is a need to move away from the rule of purity (keep them apart) to the rule of relevance (put them together). There is a need for redefining professional boundaries within the health service and collapsing these boundaries wherever possible. This process needs to start with changing the pre-registrants' attitudes and providing an integrated curriculum in order to ease multi-professional relationship in later stages of the professional career.

It is recognized that values and power relations are very different in each occupational group, with high emotional investment and therefore, a tendency for interpersonal conflicts and troubles. As a result, an important aspect of any serious effort at sustained multi-professional working that will undoubtedly need the utmost care and attention is the personal and emotional support for those involved in a substantial degree in setting up the processes at micro level. However, a successful transition from traditional professional boundaries in health to a different way of working to enhance effective health care practice will depend on action also at a macro level. For this to come about, new management systems and structures have to be put in place.

The government needs to set out a health system based on partnership and closer inter-agency relationships. For example, inter-agency partnership between professionals from diverse disciplines and institutions, including health service, education, social service, housing, transport, works, children's charity and the church to provide seamless services that are tailored to patients' needs.

Better management ownership, clearer roles and responsibilities: Effective workforce planning and development require greater clarity about responsibilities, proper management and clear systems of performance management. At an employer level, it is the responsibility of each hospital management board or other local employer to develop workforce plans for their organization and be held to account for their delivery. While these local plans provide a major input to national workforce planning, they are not sufficient on their own.

Improved training, education and regulation: This paper recognizes the need to build on, and develop partnership working with those providing trainings and education for the health workforce and with the relevant regulatory bodies. Education providers should be fully involved in developing workforce plans in local health economies, contributing their knowledge and expertise. It is also important that the health service works with higher education providers and regulatory bodies to improve the flexibility of basic and post-basic training, and other continuing professional development programmes, facilitating career shifts during and after training. For example, the training of medical engineers should be collaboration between the University and the health service. Some of the more detailed proposals include:



- The development of training and education arrangements for staffs which are genuinely multi-professional and provide greater scope for switching training paths without staff having to start their training afresh.
- Involving professionals (AKS indigenes) who are already working with regulatory bodies to support AKS in securing accreditation, wherever possible.
- Reviewing the private sector's contribution to education and training of health care workers.

Staff numbers and career pathways: I recognize that AKS has fewer doctors and other health professionals per head than is professionally acceptable. Although staff numbers are not the only factor here – there are issues about how efficiently and effectively staff work – there is a need for more staff. While not centrally concerned with workforce numbers, there is a need to review longer-term requirements for all professional staff. We need to recognize the need for clear and flexible career structures and pathways for staff, which reflect the changing ways in which staff, will wish, and need, to work in future. Much work is already being done, or is in hand, in terms of expanding staff numbers. However, this needs to be based on professional requirements. In addition, I propose:

- Improved career counseling and support arrangements should be developed for all health staff in training, particularly in the early stages of their careers.
- A fundamental review of the primary care workforce.

Incorporating patient and public voices: Giving public and patients good information not only enables them to understand their health requirements but also helps them to make effective choices that are right for them and their families, and contribute to decision making in the health service. Information is essential for people making choices about their care. We need to create new ways to make information relevant, trustworthy and timely for everybody, so that in the future everybody has the right to choose. In addition to this, patients and local members of the public should be able to make their views on their local hospital heard, even if they have not been a recent patient of a particular service. They can also give their views on broader health policy issues through their membership of the **Health Workforce Development Board**. The Government needs to consider setting up **Clinical Governance Unit**, which would facilitate a regular patient and public satisfaction/perception surveys and patient journey analyses with feedback being used to improve health service. In addition, rather than continuing to compete with informal carers such as families, churches, traditional health professionals, we should seek to work with them to promote a more integrated health service for the people of Akwa Ibom State.

Implementation

I would recommend that a properly resourced implementation team be put in place to ensure delivery of the changes recommended. This team must draw expertise from all members of the health team including the public. This will be an opportunity for AKS to turn the once demonized 'brain drain' syndrome into 'brain circulation' by involving multi-disciplinary team of health care professionals in the Diaspora in a Global Health Partnership Scheme.

Conclusion

In Akwa Ibom State, we need to make sure that we plan and develop the health workforce, and use our investment in it, to deliver the best, most effective, care for patients because caring for people is what AKS healthcare should be about. This paper stems from my long-standing concerns to address the way in which the healthcare policy and practice utilize the talents of all professionals including non-medics, educates, trains and uses its staff. I have made wide ranging and radical



recommendations to assist AKS in the current work to revamp the health service. However, at their heart is a simple theme – which the healthcare workforce, needs to be transformed in order to provide the sort of care which will be needed in the future. In summary, the emphasis needs to be on:

- *a team working* across professional and organizational boundaries;
- *incorporating other perspectives* – public and patient involvement in care;
- *flexible working* to make the best use of the range of skills and knowledge which staff has;
- *streamlined workforce planning and development* which stem from the needs of patients not of professionals;
- *maximizing the contribution of all staff to patient care*, doing away with barriers which say only doctors or nurses can provide particular types of care;
- *modernizing education and training* to ensure that staff are equipped with the skills they need to work in a complex, changing health service;
- *developing new, more flexible, careers* for staff of all health professions and;
- *expanding the workforce* to meet future demands.

And we need to do this not just because it is the right thing to do but because it will provide patients with the care they have the right to expect. It needs to be about care which is delivered quickly, by skilled professionals, who listen to patients and provide the best possible treatment and appropriate care.

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Education Alternatives

Science & Engineering in Akwa Ibom Schools

By Prof. Etim Ubong, PhD; Dr. Tech. Professor, Kettering University, Flint, Michigan.

We the citizens of Akwa Ibom State of Nigeria advocate for quality education for all citizens of the state, hence, an education panel is set to address this issue today before this National Convention. We all take the issue of education of our children seriously, but we forgot that our children alone cannot make a society, as such, we should think as a community, a state and as citizens of the world. Some of the issues that I am going to address today about our educational system at home revolve around neglect and defunding of an educational system and this is a cause of great concern to us in the Diaspora.

I care a lot about the progress and future of our Akwa Ibom people, which is why I have taken this opportunity to share my thoughts with you and trust that you share the vision of improving the lot of the Akwa Ibom people through a sound education. From studying and living in many regions of the world, it became clear to me that technology is the foundation of progress and advancement. This is why I am particularly interested in Akwa Ibom State (AKS) having a world-class university of science, engineering and technology to secure a foundation for the future of our people. I trust that you share this view and would welcome the following perspectives to ensure success.

Elementary Education

AKS should develop a sound elementary educational system for all children in the state where all will be given equal opportunity to obtain a sound education. This includes retraining teachers to meet the educational needs of the 21st Century, such as being computer literate and attending continued education courses in the nearby universities organized by experts in elementary education. The current elementary school infrastructure is too primitive for our siblings' education in Akwa Ibom State. A single building with computers, libraries, water, rest rooms in the same building powered by a -20 kilowatt solar panel will be ideal for the 21st Century education in AKS given the sources that it currently has.

High School

Certain high schools should be designated for training future science and engineering specialists. Otherwise our proposed University of Science and Technology will be populated by out-of-state students. It is understandable that science and engineering courses are not easy, that is why we should reward those who are willing to get into those areas with state and private scholarships. As at now, there is a wide gap between those who go for science; engineering and technology fields and we want to bridge the gap.

Vocational Schools

Alongside with colleges of education or universities, we need a good technical school for training technicians, such as: automotive, oil field, welding, electrical installation, computer maintenance technicians, etc.



After graduation, they can establish their private businesses and provide expertise to the state to maintain infrastructure.

A University of Science, Engineering and Technology

In 2001, after consultation with a cross-section of Akwa Ibom State (AKS) intellectuals here in the United States, we wrote to the former AKS Governor suggesting the establishment of a University of Science, Engineering and Technology-SET in the state. This suggestion was partly borne by the fact that we indeed lack many specialists in the Science, Engineering and Technology fields as well as by the projection that 60% of the lower and middle level positions in the oil industry will be left for indigenes of the area, if the agitation of the youths is to be minimized. This position is still being held to date as part or permanent solution to restiveness of the youths of the area. When this is implemented, unless we have an appropriate university to prepare our youths, we will continue to lack the ability to fill our quota. Note that all oil producing states, including Cross River State, now each has a University of Technology (except AKS).

Vision: Our vision for the university is:

- To give AKS an excellent Science, Engineering and Technology (SET) Institution of higher learning, un-paralleled in the Federal Republic of Nigeria, to fit our status as one of the three ethnic groups with the highest all round literacy in the country.
- To train our folks in the fields of SET. Currently, most AKS educated people hold degrees in non-SET fields.
- To position AKS in the path of technological greatness as other developed entities in the world
- To instill self pride in our folks by getting into these fields that drive the developments in modern societies.
- As fossil (petroleum) fuel reserves are dwindling due to increased world consumption, we should wisely use the current resources to build the institution. This will enable us to control our destiny by educating our children without sending them across state boundaries to attain a SET institution.
- To prepare qualified technical manpower to take over the oil infrastructure in our state.
- To engage the major oil companies operating in our soil to sponsor students/academic units/laboratories in AKS. We have been side-tracked from the year these oil companies started their operation, and it is time to engage in dialogues to sponsor our students in specific areas.
- To encourage our young ones in the elementary/middle/high schools to opt for SET education as a vehicle for future development
- To prepare our children with the technical capabilities to develop new industries and minimize our dependence on revenue from petroleum.

Resources in the Diaspora and the merits of the OAPP's support

AKS government, we are told, had adopted the blueprint to having Akwa Ibom State University of Science and Technology- AKUTECH. We responded by forming an organization here in the Diaspora – OAPP – the Organization of Academicians and Practicing Professionals placed with the objective of directing our energies to giving us a replica of the best SET institution in AKS. Our membership strength is about 100.

- We agreed to support AKUTECH by donating books and equipment, writing joint research proposals with AKUTECH faculty members to bring resources to support educational programs, and serving as adjunct or part-time faculty



- Additionally, affiliating AKUTECH with foreign universities in the fields that are germane to our needs at home.
- Administering distance on-line learning with AKUTECH – Professors in different fields will deliver live lectures to a class in Nigeria and students will be able to ask questions and receive answers...
- Developing new courses, course curricula, similar to the programs in developed countries, and recommending appropriate textbooks, equipment, and software to AKUTECH.
- Serving as faculty advisors and mentors to B. Sc, M. Sc, and PhD candidates
- Helping AKUTECH faculty members secure sabbatical abroad after some years of service.
- Recommending best institutions abroad where AKS Scholarships Board can send new and future AKUTECH faculty candidates for PhD studies abroad. In most cases, we can organize with our ALMA-MATER to admit certain number of candidates/year, especially at institutions where tuition is low or not charged.

Intellectual Merits of this exercise

- Position AKS, AKUTECH and OAPP on a higher pedestal using the revenue that we currently have.
- Encourage technology transfer between AKS citizens in Diaspora and those at home
- Create over 1000 new jobs for AKS intellectuals in the University and another 500 for the staff positions in the varsity
- Stop migration of AKS citizens to other states and abroad in search of jobs in SET sectors
- Engage retired (Emeritus) professors in active academic work by redeploying them to serve in various positions such as that of mentoring new faculty, writing proposals
- Enable Ibom people to live in AKS and spend their money in Ibomland and develop their homeland.
- Bring up our children in AKS instead of allowing them to migrate to hostile regions of the country where they are mistreated or even murdered.

Leaning on barrel of oil

Nigeria is still leaning on barrels of crude oil for its survival, so is AKS. Unfortunately, developed nations are now developing alternative fuel-powered vehicles, solar and wind turbines power plants, and hybrid means of propulsion, etc., and within President Obama's first term in office, the United States and other countries with developed economy, will wean out of the use of fossil fuels. So, our dependence on the revenue from petroleum puts us at great risk. This is our time to act wisely and use the current resources to set up a top notch SET infrastructure for our children and the generations to come.



Educational Opportunities for growth

By Philip Udo-Inyang, Ph.D., P.E.

Background

Education has been long recognized as the sine qua non for development. The following are established:

1. Indirectly, and in a sustainable manner, fights poverty and directly empowers the individual and a group
2. Creates and sustains employment
3. Provides educators to perpetrate the process
4. Fuels economic growth
5. Fosters our competitiveness locally, nationally and globally

Current Situation Analysis

Based on observations the educational “state of the state” is characterized by the following:

1. Poor and declining funding.
2. Substandard education in primary, secondary and tertiary educational levels (e.g. about 25% of students from the state get a marginally acceptable score of 5 credits in the SSCE). There is general decline of quality in the subject areas.
3. Largely irrelevant curriculum which neither supports the current workforce demands no leads to future educational and societal advancement.
4. Incredibly low student/staff ratios (up to 1:52 at the primary level)
5. Sporadic and significantly declining participation of female students.
6. Declining and deteriorating educational infrastructure with increasing student population.
7. Inability of impoverished parents to afford their wards’ education.

Proposed Solutions

To solve the problems in a sustainable way, one of the recommended responses would be to make education a primary focus and establish collaboration with all stakeholders. Some of the ways of approaching the solution are:

1. Increase educational funding significantly with due understanding of its importance in the scheme of things.
2. Establish/hire educational consultants to evaluate, monitor and mentor the application of the curriculum to achieve the educational goals.
3. Phase in the changes.
 - a. Start out by establishing two secondary schools of excellence in each of the senatorial districts.



- i. Choose based on history preferring long-standing schools.
 - ii. Ensure the two schools are fairly well distributed geographically.
 - iii. Ensure proper student gender mix in schools and classes.
 - iv. Allow for adequate mix of out-of-state students.
 - b. Properly staff and equip these schools to educate the best the state has at the highest level. Staffing has to be from a pool that appreciates the educational vision, are passionate about education, have a track record of impacting the community and will lead the students in extra-curricular endeavors. They should all go through a rigorous selection and training process to ensure they have these qualities.
 - c. The atmosphere, and modified curriculum, should focus on training for ethical leadership in all areas.
 - d. Add a well-thought out course on ethics and relationships to the curriculum.
 - e. Add projects-based dimensions to the curriculum so students learn to undertake and complete individual as well as group projects.
 - f. Establish a culture of maintenance and continual improvement in the quality of the school.
 - g. Set up a mechanism to continually solicit support from parents, alumni, community, NGO's, etc. for these schools.
4. Support excellent secondary schools already existing in the state by sponsoring some students in such schools.
 - a. Establish that the schools are doing excellent work based on student's performance in WAEC, GCE, SSCE, etc.
 - b. Publicize the measures that government is taking to help schools that are pursuing excellence in education.
 - c. Influence these schools to add the ethical leadership dimensions to their curriculum.
 - d. Recognize and reward improved, good and best schools.
 5. Use the above schools as models, going forward, as the rest of the schools in the state is slowly, but surely, being brought up to these high standards.
 6. Evaluate alternative funding sources to support quality education in the state.



Commerce & Industry

Commerce and Industry in Nigeria

By Lucy Ekanem

Background:

The objective of participating in this topic is to offer a non-bias view for the benefit of improving economic condition in Akwa Ibom State. And as a Nigerian who always envisions ways to improve lives comparably from life in the United States of America for her citizen.

For decades Nigeria was and is still aware of the role of commerce and industry for the development of any nation. Collective internet sources indicate Lagos Chamber of Commerce and Industry was established in 1888 and incorporated in 1950 as a non-profit making organization. The main objective was to promote measures affecting trade, industry, agriculture, and economy as a whole.

This means, there is already something in place that Akwa Ibom State could use as a starting point for her effort to bring hope for the economic rival.

The emergent pattern of our bad economy is not the lack of natural or human resources. The issues are complex and congregated. The long known and popular issues are:

- 1) Moral Deficit
- 2) Infrastructure
- 3) Accountability.

These are just but a few.

MORAL DEFICIT

The problem of moral deficit is enormous and costly though it cannot be measured. It is what could create relationships; also, what could destroy them. For instance, Nigeria was known as the most powerful country in Sub-Saharan Africa or sometimes called the "Lion of Africa". This same country across Europe in the eighties and nineties was identified to travelers with a cautionary statement on sign posts 'beware of Nigerian businessmen' - limiting movements of this group only at the airport while waiting for connecting flights.

Moral turpitude is a serious matter that cannot be ignored. It is what gives life to our deepest aspirations and has the power to create or alter the very nature of what is possible to accomplish. It is a foundation for any capital venture. This is the mark where the whole world needs to start.

The national electric power supply authority or NEPA was often mocked from its acronym as 'Never Expect Power Always'. Steady power supply plays a major role in the advance countries. We are gathering here in a small town of Michigan State for this event. There will not be any power supply interruption except by nature, which would be restored within an hour or less of such occurrence.



What is the secret? Power supply in America is privately operated.

Nigeria is one of the OPEC nations but lack steady power supply generation after generation thus hinders a practical effort for commerce and industry. Electricity supply is part of the infrastructure that needs to be address.

ACCOUNTABILITY

The problem with accountability is the lack of law enforcement against the individuals, especially among the elite class. Unlike United States, cases are investigated and tried from the top. Using contract awards as an example, when a project is awarded to an individual, the funds would be distributed among gangs by the name of subcontractors. The project is stock because the funds had been spread too thin. Who must be held accountable? None, because rules and laws are not enforced by the proper authority. This is just an example of many cases.

ACTION PLAN

The economic woe is real with alarming impact even in the United States other countries look up as a model nation. What does this mean to developing nations? Nigerian currency value is falling way below what it was in the past. In the 70s, it was 80 kobo to \$1.00 US dollar. What is it today? All of us in this room can answer this question. The challenge is more than a ‘food for thought’. Crimes are at the peak. Citizens are living in fear and uncertainty because of senseless act of crimes. It is a call for action than annual conventions. During June 2009, a case of murder was reported in Abak Local Government about a young girl of twenty or so demanding ransom from the parents. Although the parents scrambled so much naira to the perpetrators, that girl’s life was still taken prematurely.

Centuries ago, Darwin came up with his well known evolutionary theory “Survival of the fittest “ Akwa Ibom State could tackle this economic downturn by setting an example for other States in Nigeria right at this 22nd Annual event in Michigan by:

- 1) Set up a system to build trust and attract investors – after conducting feasibility study.
- 2) A State Commercial Bank partnering with top foreign bank for commerce and industry
- 4) Decentralize government administrations and operations to local government for development disparity
- 5) Promote entrepreneurship among citizens to curb unemployment and reduce the burden from the government.
- 5) Focus on one project at a time for a successful completion by setting deadlines.
- 6) Computerized system is a springboard in the 21st century.
- 7) Infrastructure is the part of the whole like veins and blood is to human body.

It is my hoped that this view will add to many other suggestions from concern citizens of Nigeria and Akwa Ibom State indigenes to move along with the western world in an effort to combat the economic war and become one of the ‘survival of the fittest’



Commerce & Industry in Akwa Ibom State – A Strategy for Moving forward.

By Ekerete Umoren

It's the economy, stupid. Bill Clinton's campaign strategist – James Carville.

Two significant, barely noticeable, undercurrents conspire against Commerce and Industry in Akwa Ibom. This paper identifies these problems, gives their background and offers solutions to them.

Introduction

The economy, and its main drivers, commerce and industry, is an area that tends to have the most sustained, long-term effects on the quality of life of people. Akwa Ibom State has been no different in this regard.

Problems and issues with the Commerce & Industry Component

There are two seemingly innocuous, yet very potent negative trends that have not boded well for the economy of Akwa Ibom. I outline those trends here without necessary going into all the details.

Business Mortality and stunted growth

The Commerce & Industry component of the economy is anemic at best and appears totally unsustainable in a meaningful way at this point. Typically, people tend to point at other issues to be the source of this problem, but hereby suggest a different cause. The business spectrum, like any other spectrum is continuous and needs to be continuous and should range from the very small business, through to the medium businesses and then to small, medium and large corporations. Looking at Akwa Ibom, it becomes readily apparent there is a significant part of that spectrum missing.

Companies do not tend to follow the natural progression of birth growth and a morphing into significant, stable and perpetual, wealth and employment-generating entities. Most of them plateau out in their growth and eventually die off when the progenitors vacate the scene.

This unrealized potential and premature death of the business entities is a scenario that keeps playing over and over in the economy leaving devastation in its wake. As long as this problem is not checked, Akwa Ibom business community cannot sustainably create, and maintain employment, and also set itself up to compete in the global market.

This bit then is a systemic cancer that needs to be excised from the sphere of our commerce and industry for there to be a meaningful forward move in the component.

Government overshadowing of the economy

Secondly, the ever-expanding direct government role in its attempt to execute all the relevant aspects of the economy is counterproductive and needs to be checked. As long as the trend continues, real unemployment will grow as businesses are stifled and robbed of both material resources (for growth) and qualified employees to maintain the businesses.



Causes of Problems and issues with the Commerce & Industry Component

My study of the area has led me to believe the evolution of these problems and their impact on our quality of life are rarely, if at all, understood and so the solutions proffered are suspect at best and downright unworkable in most cases.

Business Mortality and stunted growth

While several reasons can be offered as causes of the problem, I believe the following are significant: The structures of our businesses – the sole proprietorship or partnerships – are at the root cause of our business mortality. That structure can also, indirectly, contribute to the stunted growth as resources for growth can be quite limited with these business structures. While most businesses start as such entities, the natural order of business growth is for them to outgrow these structures, which are quite susceptible to mortality, into the more permanent structures of corporations, which have in-built resistance to mortality and are also usually awash with resources for continued growth.

The lack of a growth vision with most of our companies also works against us here. The unwritten mantra of companies in vibrant economies is “grow or perish”. Our business enterprises also have to embrace this mantra if we hope to arrive at a vibrant business atmosphere.

Government overshadowing of the economy

Progression of government growth

To try and figure out the causes of the issues with this component we have to look back to the pre-civil war years and maybe also to the years immediately after the war to check on the state of commerce in the area. We would have to admit there was thriving commerce and industry prior to the war a significant bit of it continued after. After the war, there was the added dimension of significant oil revenues that came in order to provide an added stimulant to the economy.

It was, at this point, some of the seeds of today’s economic mess began to be sowed. To put it bluntly, the Nigerian government had money, or at least thought it did. Some politicians made pronouncements, to that effect. Of course, money, being what it is, has to chase after goods. Nigeria’s monies went to the central until from where it was distributed to the different subdivisions using arbitrary formulas.

With all that money at its disposal, our government went on a wave of nationalizing entities, both business, educational, whatever it could lay its hands on, thus increasing the size of the government tremendously. In our myopic understanding of how economies work, we applauded the moves. Why, those “mission schools” were not paying such great salaries to begin with. Government would do much better. Of course, if someone bothered to ask, they would have understood such schools produced top notch graduates year in year out without the government intervention.

The government then went on a spree establishing a spate of factories like Champion Breweries, Battery Factory, Paper Mill, etc., again, expanding government even in the industrial sector. Being government, of course, usually these factories were just overpriced, alien showpieces fueled by the one-commodity (oil) economy and doomed from the start, but we applauded.



Effects of government growth

I will list the effects without really elaborating

1. Everyone now looks to and waits for the government as its effects and apparent largesse is almost omnipresent.
2. Despite higher levels of resources, this government growth is what has fueled unemployment.
3. Deterioration of institutions, e.g. schools, churches, etc. that formerly held the place together as a functioning mechanism can be attributed to this inordinate growth of government.
4. The growth of corruption can be correlated with the growth of government. There is no hope of containing corruption without also reducing the reach of government.
5. The growth of high crime – kidnappings, etc. can be correlated with the growth of government and its resources.
6. The significant growth in inflation has been fueled by the overshadowing done by the government.

While there is a legitimate and necessary place for government in the economy, there is a definite, and significant, problem when its influence overshadows the economy.

Solution

With a proper understanding of these overwhelming problem areas the following solutions are preferred.

Business Mortality and stunted growth

Since the bulk of the resources reside in the government, it will have to play a significant role in arresting this trend. It needs to do the following (see also the Government overshadowing of the economy section):

1. Set up Business Development Agency/Organization whose sole raison d'être is to nudge businesses in the direction of positive growth and structuring for longevity.
2. The following should be the structural characteristics of such an organization:
 - a. It should have very strong, pro-business leadership that fully understands the vital nature of the mission to the survival and thriving of our business environment.
 - b. The leadership should be those who fully appreciate the role of business in the society.
 - c. It should be set up with such a charter as to be immune to the whims of incoming and exiting political administrations. Essentially, political influence on its day-to-day running should be legislated to be minimal no matter the political time or party.
 - d. Initial (several years) funding should come from the government. Ultimately, the various chambers of commerce and other business groupings should be able to fund its activities. Such initial funding should be devoid of political strings.
 - e. Its charter, as well as the measures of success, should be clear from the start.
3. The following should be what the organization is charged with:
 - a. This agency should also be a powerful tool to productively redirect some of the resource government now sits on to the private sector.



- b. Working with a company or companies with a view to aiding them set up as a more permanent, growing business entity. Essentially, the businesses should be incorporated and professionally run so they continue, with growth, in perpetuity.
 - c. Helping such setups work towards increased productivity, better staff development and compensation, general best practices that will increase the competitiveness of the business.
 - d. The process will include helping several similar businesses consolidate into more viable ones as the environment dictates. Usually, this should follow, sometimes lengthy, periods of negotiations as no one should ever be coerced to join up with what they do not fully agree with.
 - e. Beyond these, it should also set up shop to offer some basic services, like set up accounting, to help small businesses set up and run their books properly and also help them, from time to time, along the continuum of using professional business services.
 - f. Educate the populace on the importance and potential positive impact of business on the quality of life of the community. Currently, there is a hostile attitude towards business.
4. The following is the role government should play:
- a. Set up the aforementioned organization following the suggested parameters.
 - b. Provide the resources to help it fulfill its mandate.
 - c. Help in other areas that are outside of this process:
 - i. Remove some of the roadblocks, whether legislative or by fiat, that have been in the way of business growth.
 - ii. Provide steady power supply for businesses.
 - iii. Make it a habit to consult with all business vested interests when legislating for business.

Government overshadowing of the economy

The solution here lies in trying to circumvent the overshadowing effect of government. Government, we all know, has the bulk of the resources coming into it. The intuitive, and overwhelming urge, is to use these resources in doing “good” things for Akwa Ibom. There is nothing wrong with this approach as long as we recognize what appear to be “good” things can have a counterproductive effect and become very damaging.

There is a significant overshadowing and stifling of the private sector by the government. The only thing that can begin to undo the damage is a ***creative rechanneling*** of the bulk of the resources that come into the government to the private sector. Without such rechanneling, it is my fear all the efforts and resources expended would be in vain.

The postulate here are that such significant resources have to meet with productivity else the net result is just more inflation and deterioration in the standards of living. Such productivity can ONLY be realized through the deploying of the resources in the private sector in a PRODUCTIVE fashion.

1. One of the several possible creative ways of channeling these resources is to use some of them to set up the business development agency previously mentioned and funding it properly.



2. Another effort of government leadership would be to begin to recognize.
3. Government will need to systematically begin to limit its efforts at becoming all things to all people and focus on the areas that only the government should focus – power production and supply being currently the most pressing one.
4. Government should, thus, minimize its efforts that tend to interfere in running of businesses, by trying to run businesses itself, and instead birth policies that would help those businesses. E.g. there are some excellent private schools and also some good ones recently privatized. Instead of policies that can undermine these schools, government can reward excellent, private schools, by sponsoring children, through scholarships, that attend such schools. The message this move would send is that the government is interested in excellence and is willing to support it.

Conclusion

In conclusion, many attempts have been made to tackle problems like unemployment, poverty, etc, in our state. Most of these attempts have been made without a clear understanding of the structural drivers of these societal maladies. I have tried here to hit on the real drivers here and point to a way out.

I believe that neglecting these structural issues and going to the usual route will dig us deeper into the hole we are in despite our most rosy forecasts of being able to get out of such a hole.

Public Safety

Facilitating Regional-Community Counter Criminal and Terrorism Initiatives

By Emmanuel Umoh

Background

What has evolved into a nightmare for Akwaibomites today manifested as the work of Militants from neighboring states like Rivers and Delta in 2006. This behavior was quickly noticed and copied by competing and unsuccessful politicians in the Niger Delta region. A combination of youth population growth and rising unemployment in Akwa Ibom is noted as another factor. According to state industry statistics, between 1975 and 1980 there were eleven industries in Akwa Ibom state in comparison to 1.5 today. This lack of viable sources to employ the growing young minds created opportunity for common thieves and occultists to apply themselves negatively. After the 2007 national elections, the militants kidnapped for the first time in Ikot Abasi and Eket targeting foreign workers in Akwa Ibom. After extensive security on the foreigners, indigenous oil workers/relatives became victims of the local breeds of kidnapers. By extension, rich politicians were kidnapped and the incentive to continue was the immediate and handsome rewards to release victims. Now, common criminals in the state have created a product based on fear and threat for a price before release...known as kidnapping...a word as foreign as the act to the people of Akwa Ibom.



Causes of Kidnappings

While kidnapping is not unique to Akwa Ibom or Nigeria, the following socio-economic conditions have accelerated the rapid growth and possibly sustainability of kidnapping:

- Extensive corruption in Nigeria is a fertile breeding ground.
- The gap between the rich and the poor continues to grow.
- The establishment and growth of militants in the region
- Excessive unemployment due to lack of public or private sector investment
- Quick way to compete with politicians
- Yielding to the demands of kidnappers created an incentive to continue.
- Unenforceable laws, weak and inadequate law enforcement
- Weak security/law enforcement infrastructure
- Non-existing Criminal intelligence training standards
- Lack of community involvement due to fear of reprisal
- Availability of technology without regulations – cell phones, fax and computers
- Bloated but ineffective government

Solutions

Providing the right solution requires an understanding of the characteristics of the adversary. There are two sets of sources to the problem of kidnapping in Akwa Ibom State. They are classified in terms of Criminality and terrorism as follows:

Know the Adversary

Criminal	Extremist (Militants)
• <u>Criminal</u>	<u>Extremist (Militants)</u>
• Opportunistic	Focused
• Uncommitted	Committed
• Self-Centered	Team-Oriented
• Undisciplined	Disciplined
• Untrained	Trained
• Escape-Oriented	Attack-Oriented

Based on Federal Bureau of Investigations (FBI) profiling, there are eight basic indicators to know about the actions of a kidnapper before any Kidnapping act takes place. Understanding these factors helps both citizens and law enforcement to minimize the occurrences of kidnapping in communities.



Indicators

- Surveillance
- Elicitation
- Tests of Security
- Acquiring knowledge of victim's routine
- Suspicious People Who Do Not Belong
- Dry Runs
- Notification – phone, texting faxing..to strike fear
- Deploying Assets/ Getting Into Place

Ownership of Problem: Joint Task Force (JTF)

- Enforce existing laws, support legislation to regulate IT communications in the country
- Establish State and Regional sponsored (South-South Niger Delta).
- Ensure that at least one member of JTF is in every Police field office.
- Deploy representatives from local, state and federal agencies.
- Establish Public safety partnership of local, state and federal agencies.
- Establish inter-agency/group communication, analysis, and information sharing designed to anticipate and counter violent acts.
- Collect, evaluate, analyze, disseminate information related to Security issues to the public.

Akwa Ibom State Law Enforcement Role

- Establish Critical Intelligence Management System (CIMS) to interface with JTF.
- Analyze intelligence information to disseminate to JTF and Police officers.
- Provide training in kidnapping and critical infrastructure related issues.
- Develop better community relationship
- Form partnerships with community youths and groups
- Develop Criminal intelligence Training Standards
- The best time for law enforcement to interdict kidnappers is before the traveling to the site.

Conclusion

There is a relationship between unemployment and kidnapping. It has been stated that an idle mind is a devil's workshop. Public safety is a basic requirement for economic development and growth of any entity. Kidnapping has cost Akwa Ibom economically by causing all the new businesses that sprouted in Eket and other areas to shut down or move to other states in the West. Foreign investment in the state is considered unsecured and has slowed down significantly. The government must embark on extensive public education initiatives to share the effects of criminality on the state – “the fear factor”. Law enforcement has to work closely with citizens to report and share activities that can lead to apprehension before crime is committed.



Brief Profile of the Presenters at the 2009 Town Hall Conference

Asuquo N. Inyang, MD. I obtained my MBBS from the University of Ibadan in 1983. I trained as a General Surgeon and Cardiothoracic surgeon at the University College Hospital (UCH) Ibadan, 1987-1991. I proceeded to England where I further specialized in Adult and Pediatric Cardiac Surgery at Leeds General Infirmary, and Thoracic Surgery at Bradford Royal Infirmary 1991-1995. I further trained in Transplant Surgery at Mount Sinai Medical Center (North General Hospital program) Manhattan, New York, Echocardiography, Critical Care and Anesthesia at Montefiore Medical Center/ Albert Einstein College of Medicine, Bronx, New York where I was a Staff and Professor before my recent move to Private Practice. I am a Fellow of the Royal College of Surgeons of Edinburgh, Fellow of West African College of Surgeons, Associate Fellow of the Nigerian Medical College of Surgeons, Fellow of the American Society of Echocardiography, Diplomate of the American Society of Anesthesia, Member of the American Heart Association, American Medical Association, American Stroke Society, Society of Cardiovascular Anesthesiologists. I am licensed to practice in Nigeria, United Kingdom, New York State, and the Commonwealths of Pennsylvania and Virginia. I have been named one of “America’s Best Doctors” from 2002 until date.



Dr. Ibanga Ikpe is a community organizer and a lifelong learner who firmly believes that knowledge is key to solving most of the human ills and moral issues of our society. He holds a firm believe that people should be exposed beyond the quadratic equation and their most immediate environment through education, programs and projects. Dr. Ikpe is a Nigerian born and American trained educator. He holds five earned university degrees; a BA degree in World History, an MA in International Affairs, MBA in International Business and Marketing, an MS in Educational Leadership and a PH.D in Political Science. He is the founder and President of Global United Children’s Foundation, Inc; a Miami based Non- Governmental, Not -for profit Organization. He is an educator/ administrator and an Adjunct Professor at one of the local colleges. He holds various positions in international organizations in Africa and America and has traveled extensively to present lectures and seminars in HIV/AIDS and Malaria prevention in Africa, Stress management, Race Relations, Women Empowerment and Grant Writing among other topics. Dr. Ikpe is the Founder/CEO of Global United Children’s Foundation, Inc; a Miami based International Health Care Delivery non-profit organization. He is the Vice - President, Nigerian American Foundation (NAF) Miami, Fl. President Pro-Tempore, Federal Council of Nigeria (FCN), Miami, Former National Vice President, Akwa Ibom State Association, Atlanta, Former Vice-President and Secretary, Akwa Ibom State Association, Miami, Past Consultant UNDP (transfer of trade and technology), member Rotary club, Opa-locka, FL.



Professor Uduak Archibong, PhD in nursing, is Britain's First Professor of Diversity at the University of Bradford, United Kingdom, where she directs the Centre for Inclusion and Diversity and also coordinates broad based programmes established to promote equality and diversity across the University. Prof. Archibong facilitates educational programmes for many West African Countries including Cross River and Bauchi State Governments on evidence based health care practice and human resources development for senior health managers and leaders in addition to establishing and supporting library resource centers within Faculties of Health in Nigerian Universities including the University of Calabar and University of Nigeria, Enugu Campus. Prof. Archibong coordinates research projects for the West African College of Nursing and is currently assessing trends in the quality of nurse education in the West African sub-region. Prof. Archibong travels extensively and her work has earned her recognition as a fellow of the West African College of Nursing in 2001, a Visiting Professor at the University of Kwa-Zulu Natal, South Africa in 2006, as well as a Distinguished Nurse Leader in 21st century in May 2009. She is currently leading numerous large-scale collaborative research projects on representational diversity, which has attracted over 2 million pounds in research and development funding including a major study on Positive Action Measures in the European Union, Canada, United States and South Africa funded by the European Commission. She is also working in collaboration with other institutions on national and international research studies on recruitment and retention of health professionals from diverse backgrounds into senior management.



Offiong Aqua, M.D. Clinical Associate Professor, New York University, Manhattan, NY. Directed AKS Hospitals Systems Audit(for Ministry of Health and Hospitals Management Board) Uyo, AKS. Born in Nigeria. Grew up in Lagos and Calabar. Pioneer Student Union President, University of Calabar Student's Union. Led the Ali-Must-Go movement/strike which asked for educational reforms in the country in the late 70's. Among the 5 students rusticated from the university by the then Nigerian Military Head of State, General Olusegun Obasanjo for protesting against government policies. Was pardoned by the democratically elected civilian President, 1979 (Alhaji Shehu Shagari) and allowed to continue education.

Completed medical school and obtained postgraduate medical education in Moscow, Russia. Health Care Leader, New York University Africa House (a research institute that focuses among other things on health Infrastructure in African Countries). Helped set up and build health care programs and infrastructure in African Countries. Part of a group of senior faculty from NYU writing a grant for the establishment of an emergency medicine program in Accra, Ghana (1st of its kind in sub-Saharan Africa) This grant is written for the Bill and Melinda Gates Foundation and will have as signatories the following renowned person: Kofi Annan (former UN Secretary General), Michael Bloomberg (Mayor of New York City) and John Sexton (President of NYU). Completed a year-long audit of AKS Healthcare System on the invitation of H.E. the Executive Governor of AKS, Chief (Dr) Godswill Akpabio. Presented report to a special session called on this one issue, July 3, 2009. The report and its recommendations were adopted with slight modifications.



Dr. Philip Udo-Inyang, a registered Professional Engineer in Pennsylvania and Nigeria, is an Associate Professor of Civil Engineering in the Department of Civil and Environmental Engineering at Temple University, with primary responsibilities in teaching, conducting research, developing academic curricula and facilities, and serving the university and the engineering profession at various levels. He currently serves as the coordinator (director) of the Civil and Construction Engineering Technology (CCET) program at Temple University. He previously served as the Department Chair and the coordinator of the Civil Engineering program. While on sabbatical leave in spring 2002, Dr. Udo-Inyang assisted in revising the Civil Engineering program at the University of Uyo, Akwa Ibom State, Nigeria. Dr. Udo-Inyang has also performed consulting work in the area of construction project management, including computer applications in construction, for contractors and construction management firms in the Philadelphia area. He is very active in the National Society of Professional Engineers (NSPE), in which he served as the President for the Philadelphia Chapter of Pennsylvania Society of Professional Engineers (PSPE). He is also a member of the Nigerian Society of Engineers (NSE), American Society of Civil Engineers (ASCE), and American Society for Engineering Education (ASEE), Construction Management Association of America (CMAA).



Ekerete Umoren is a reflective individual, with a deep understanding of cooperative systems; who has a goal of positively influencing communal thinking one person at a time if need be. He completed high school at Holy Family College, Abak; received a B. Engr. Degree at University of Nigeria, Nsukka and an MBA at the University of Delaware. He lives, with his beautiful wife and two children (sorry young adults) in the premier planned US city of Columbia, MD where he plays an active role in organizations like his church, Akwa Ibom Association of Nigeria, Nto Annang Foundation, Annang Development Congress, etc., and also keeps his volleyball game in top form. Ekerete has travelled widely in North America, Europe and Africa and so loves a range of cuisines from Thai, through French, American to Akwa Ibom. He loves comedy, classical music (both Annang and Western), jazz, reggae and high life. Ekerete is really irked by people who do not have the concept of time but relishes people who can hold their own in an argument in a balanced and non-obnoxious fashion. He has engineering consulting experience covering a wide range of industries in his years with FM Global, a leading commercial insurance company.



Lucy Ekanem Born and raised in Ibiono Ibom LGA, Itu. Lived in the following places during primary school: PH, Abak, and Eket
Secondary: Nsukka, Owerri, Ikot Abasi, Calabar and Etinan. Worked in Calabar & Ikot Ekpene. BS, Business Communications, BS Organizational Psychology, MBA. An Author: Mystery of Tithing ... finding peace in difficult time. Mother of 5 including twins. Home base, Minnesota.



Emmanuel Umoh is a certified Systems Engineer and the Chief Executive Officer of a renowned Information Technology company (XEQ Technology) with branches in Nigeria and United States. Spent 22 years with Electronic Data Systems an HP Company as a Senior Systems Engineer and Subject Matter Expert (SME) in Airports Ground Operations and Material Handling Systems Integration such as Automated Baggage Handling Systems, Equipment, Vehicle and parts Maintenance Control Systems, Gate Systems, Automated Check-In Systems, Flight Scheduling and Display Systems for compliance with International Air Transportation Association (IATA), International Civil Aviation Organization (ICAO), and Federal Aviation Administration (FAA) regulations. Currently, a PhD candidate in Public Policy Management and Leadership from Walden University, Minneapolis, USA. Member of American System Engineering Excellence (ASEE). Member of American Society of Public Administrator (ASPA). National President of Akwa Ibom State Association USA, Inc (2004-2006). Project Leader – Akwa Ibom Professionals International USA Inc. Board Chairman Global-Rural Alliance Management (GRAM) Inc, USA. Awarded Special Congressional Recognition for Outstanding and Invaluable Community Service 2006.

