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2022/2023 PhD Thesis Abstract

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AB: Telehealth is the provision of healthcare remotely, by means of telecommunications mediums such as high-speed internet, high definitions webcams, tablets and remote vital monitoring. Globally, Telehealth became an international phenomenon due to the Corona Virus Disease 2019 (COVID-19) pandemic which restricted physical doctor-patient visits. Telehealth became an effective option for that purpose. In Nigeria, Telehealth has become an imperative for additional reasons such as the dwindling doctor-patient ratio, prohibitive medical costs and the healthcare system which lags behind global standards. Beyond the pandemic, Telehealth has come to stay, in easing healthcare needs. In Nigeria, studies have shown the under usage of Telehealth before, during and after COVID-19. The challenge however is that Nigerian laws did not envisage Telehealth and there are no corresponding laws for Telehealth regulation. Therefore, this study examined the extant healthcare laws with a view to suggesting necessary reforms and producing a model of Telehealth law for the Nigerian National Assembly.

This study adopted a multi method research approach, comprising doctrinal and exploratory qualitative research methods. The exploratory qualitative research utilised semi-structured interview of 20 participants, comprising 17 doctors, two software engineers and a public health worker. The primary source included qualitative data, the Medical and Dental Practitioners' Act 1988, Code of Medical Ethics 2008, National Health Act 2014, Nigerian Data Protection Regulation 2019, Cybercrimes (Prevention and Prohibition) Act 2015, National Information Technology Development Act 2007, and Nigerian Communications Act 2003. These were complimented with secondary sources which comprised books, scholarly peer reviewed journals, articles and manuals. Data from the sources were analysed using thematic and narrative analyses.

The study found that Telehealth is evolving, and extant legislation is grossly inadequate for Telehealth practice in Nigeria. It was also revealed that the extant laws never envisaged Telehealth phenomenon and so have very limited provisions for it. Findings also revealed a need for regulation and stakeholder involvement, differences in opinion about forms of regulation and whether legislation or guidelines are preferable for Telehealth. Furthermore, it was discovered that infrastructural needs, data security, privacy, and quality control were some concerns for proper takeoff of Telehealth in Nigeria. It was also found that the lack of a research centre for Telehealth, stems both the enactment of a legal framework and policy advancement of Telehealth in Nigeria. The interviews generated themes including the existence of a legal framework, comprehension of Telehealth, infrastructural needs and capacity building for Telehealth. In view of the aforementioned, a model Telehealth Law was developed.

The study concluded that Telehealth practice in Nigeria can only develop with the enactment of a law on Telehealth. The study recommended that the multidisciplinary nature of Telehealth is a pointer to the need for a range of stakeholders to be involved in its regulation. The study proposed a Nigerian Telehealth Research Centre of Excellence (NiTHRECE) for a homegrown solution and continuous research.

Keywords: Data security and privacy, Doctor-patient ratio, Legal framework, Model regulation, Telehealth practice

Word Count: 471

Abbreviations: *RFN: Researcher's Full Name, RD: Researcher's Department, RS: Researcher's School, RE: Researcher's Email, RAE: Researcher's Alternate Email, RP: Researcher's Phone Contact, RT: Registered Title, MS: Main Supervisor, ME: Main Supervisor's E-mail Address, SP: Main Supervisor's Phone Contact, CS: CoSupervisor, CE: Co-Supervisor's E-mail Address, CP: Co-Supervisor's Phone Contact, AB: Abstract*

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