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Every Second Matters: Bridging The Gap In Nigeria's Emergency Response

written by

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Introduction

On my way home, I saw a man trying to cross a busy, untarred road when a speeding bike nearly hit him. In that split second, time froze. Onlookers gasped. The bike screeched to a halt, and the man rushed across.

In that moment, one thought struck me: What if he had been hit? Would any of us—the bystanders—know what to do?

Too many Nigerians die not because help isn't possible — but because help doesn't know what to do. In a country where cardiac arrests and road accidents happen daily, the absence of basic emergency response skills like CPR often turns recoverable incidents into irreversible tragedies.

This sobering reality is what the OCI Foundation seeks to change through its Basic Cardio-pulmonary Resuscitation and Emergency Response Strategies (BACERS) project. By equipping Nigerians aged 10 and above with life-saving CPR skills, BACERS addresses a deadly gap in our public health system. In this essay, I will explore the life-saving impact of early CPR and justify why BACERS is not just necessary — but long overdue.

What's CPR and Its Impact?

According to Mayo clinic, “Cardiopulmonary resuscitation (CPR) is a lifesaving technique useful in many emergencies, including heart attack or near drowning, in which someone's breathing or heartbeat has stopped”[1]. Bystander-initiated CPR is known to improve survival outcomes among cardiac arrest victims[2].

Cardiac arrest (also known as sudden cardiac arrest) is a condition in which the heart suddenly and unexpectedly stops beating[3].

When the heart stops, there's reduced blood circulation and flow to the brain and other vital organs. When this occurs, brain cells begin to die within 4-6 mins, leading to coma or brain death due to lack of oxygen.

CPR acts as an artificial pump, helping to push blood out of the heart into the body. This slows the damage and keeps the person alive until AED or EMS arrives. Every minute without CPR or defibrillation reduces survival by about 10%[4]

Chain of Survival

The "Chain of Survival" is a series of essential steps that can improve chances of survival during cardiac arrest. According to the American Heart Association (AHA), CPR is a critical step in the chain of survival[5]

These steps include:

- Recognition of cardiac arrest and activation of the emergency response system
- Early CPR with an emphasis on chest compressions
- Rapid defibrillation
- Advanced medical care afterward
- Post-cardiac arrest care
- Long-term recovery support

Following these steps closely can improve chances of survival and recovery for cardiac arrest victims.

The Emergency Landscape of Nigeria

One word can describe the emergency system in Nigeria — fragile.

Nigeria's health system has struggled to meet the needs of an ever-growing population despite economic advances that have increased the annual gross domestic product per capita from \$568 in 2000 to \$2230 in 2019[6]

Compared to other developed countries, Nigeria has a much lower survival rate from OHCA (out-of-hospital arrest)

A Peep Into The Emergency System

Cultural Consideration

A participant in a BMJ Open study recalled a case in rural Nigeria where a man performing CPR on a collapsed woman was mistaken for assaulting her. Neighbours reported him to her father, unaware he was trying to save her life[6]. Fear of misjudgment like this discourages many from helping in emergencies. This highlights the urgent need for public awareness and community education on life-saving interventions like CPR.

Knowledge Gap

Recognizing an emergency is the first step in response. But even when cardiac arrest is identified, many bystanders can't help due to a lack of basic life support (BLS) training.

Delayed Ambulance Services

Ambulance response is often delayed by poor roads and heavy traffic—if the service is even reached. Many ambulances aren't given right-of-way, and patients are often transported in private vehicles without proper medical attention from trained personnel.. Ambulances arrived in only 34.6% of cases, with average response time around 25.6 minutes, often too late[7]

Obsession With Content Creation.

First aiders report a disturbing rise in people reaching for their phones to record traumatic events rather than offering immediate support.[\[8\]](#) This leads to delayed emergency intervention, costing precious time.

Nigeria's emergency healthcare crisis is not just about policy failure—it is about lives being lost to bureaucracy, fear, ignorance, and apathy disguised as entertainment.

The BACERS Project. A Strategic Response.

The Basic Cardio-pulmonary Resuscitation and Emergency Response Strategies (BACERS) project by the OCI Foundation is a bold, people-centered solution to Nigeria's critical emergency response gap. It seeks to empower Nigerians aged 10 and above with the life-saving knowledge and skill of basic CPR and first response in emergencies.

BACERS aims to:

- Train at least 50% of Nigerians within two years, and 75% within five years, in CPR and emergency response.
- Leverage schools, churches, mosques, community centers, and existing youth programs (like NYSC) for large-scale outreach.
- Integrate local languages, pictorial guides, and peer-led workshops to ensure inclusiveness[\[9\]](#)

What sets BACERS apart is its focus on helping people at the community level instead of waiting for the entire system to change. It brings CPR to the people — where they are — instead of relying on ambulances that may never come or health workers who are too few and too far away.

The initiative also addresses two major bottlenecks in Nigeria’s emergency care:

1. **Knowledge Gap:** Most Nigerians are willing to help but are unsure of what to do in emergencies.

2. **Access to First Response:** BACERS equips communities to respond before professional help arrives.

In a country with a weak emergency system, BACERS provides a lasting, life-saving solution by turning bystanders into lifesavers and victims into survivors.

Justifying BACERS. Why It Matters Now

The World Health Assembly Resolution 72.12 defines emergency care as “an integrated platform for delivering accessible, quality, time-sensitive health care services for acute illness and injury across the life course”[8]. By this standard, Nigeria’s emergency system falls short — especially in terms of access, timeliness, and public readiness.

The BACERS project helps close this gap by taking emergency response skills like CPR to the grassroots. It empowers ordinary Nigerians to act quickly in emergencies, even before professional help arrives. This aligns with the WHA’s vision of emergency care as a system that starts at the scene — not just in the hospital.

The American Heart Association (AHA) identifies early CPR as a critical link in the Chain of Survival, a model that greatly improves outcomes in cardiac arrest cases[5]. In Nigeria, this link is often broken due to a lack of trained responders. BACERS addresses this directly by teaching

bystanders how to recognize emergencies and act immediately. Even more compelling is the AHA's finding that children as young as nine can effectively perform CPR — especially chest compressions. BACERS' plan to start CPR training from age 10 is both strategic and supported by research. With over 42% of Nigeria's population under age 15, early training can create a generation of confident, community-based responders. BACERS doesn't just prepare adults; it builds a new generation of first responders from the ground up.

The emergency response to out-of-hospital cardiac arrest (OHCA) in Nigeria is alarmingly poor, largely due to weaknesses in nearly every link of the Chain of Survival[7]. Early recognition is hampered by low public awareness, early CPR is rarely performed due to lack of training, and defibrillation is almost non-existent in public spaces. Even advanced care is often delayed due to poor ambulance infrastructure. BACERS directly targets these critical gaps by strengthening the first and second links in the chain — recognition and CPR — through widespread training that begins as early as age 10. By empowering everyday Nigerians to act swiftly and skillfully, BACERS ensures that survival doesn't depend solely on professional responders who may arrive too late.

Challenges To Expect and Proposed Solutions

There's no impactful project without obstacles and Bacers isn't exempted. By identifying these challenges early, we can create practical, long-lasting solutions that fit our local needs.

Low awareness and cultural misconceptions.

In many parts of Nigeria, emergency response is viewed as the sole responsibility of medical professionals. Some even perceive CPR as inappropriate or unnecessary, especially when performed by laypersons or young people. It might be viewed as harassment or something.

Proposed Solutions: BACERS will incorporate community engagement and sensitization campaigns to reshape perceptions. By using relatable stories, local languages, and culturally sensitive messaging, the project will demystify CPR. Partnering with religious institutions, community leaders, and local influencers will help normalize bystander CPR and increase public trust. This will stop people from being afraid to act in times of emergency.

Retention of Skills Over Time

One major challenge with first aid education is skill decay. Without regular practice or reinforcement, participants may forget what they've learned—especially in high-pressure situations.

Proposed solution: BACERS will build in annual refresher sessions, offer engaging simulations, and introduce gamified learning tools (quizzes, competitions, CPR week events) to keep participants motivated and skill-sharp over time.

Conclusion

When every second counts, CPR can mean the difference between life and death. It's a powerful skill—one that BACERS is ready to place in the hands of everyday people. Backed by the American Heart Association, the World Health Assembly, and the urgent need in Nigeria, this project empowers communities with the superpower to save lives—even before help arrives.

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