



### **Alma Ata Declaration of 1978**

Part of the Alma Ata Declaration is that health is a fundamental human right and governments should be responsible for the health of the people

Primary health care is essential health care based on practical, scientifically sound and Socially acceptable methods and technology made universally accessible to individuals

And families in the community through their full participation and at a cost that the

Community and country can afford to maintain at every stage of their development in the Spirit of self-reliance and self-determination. It forms an integral part both of the countries

Health system, of which it is the central function and main focus, and of the overall social and economic development of the community. It is the first level of contact of individuals, the family and community with the national health system bringing health care as close as possible to where people live and work, and constitutes the first element of a continuing health care process

### **Brief history of College of Health in Nigeria**

Colleges of Health Technology (CHT) were first established in the late 1970s as part of Nigeria's Basic Health Services Scheme to train a new cadre of Public Health Care (PHC) workers to staff the basic health units in the country. Because Colleges of Health is the only school that train professionals who are close to the grass root to meeting the health needs of the larger populations at primary healthcare, the focus of WHO has been to ensure they are well paid. That is why you hear CONHESS, HATTIS etc.

In 1960, there was no strong focus on health systems development. Policy makers and political actors made efforts to establish and expand health-care infrastructures with more emphasis placed on curative medicine rather than preventive medicine. From 1975 to 1980, health system development was initiated with PHC as the cornerstone. The National Basic Health Services Scheme (NBHSS) was developed based on a PHC approach (1). Unfortunately, the NBHSS program could not achieve its goals due to implementation challenges; hence, PHC services were not delivered across Nigeria. In 1985, Professor Olikoye Ransome-Kuti was appointed the Minister of Health. Professor Ransome-Kuti adopted PHC in 52 local government areas as models based on Alma Ata Declaration of 1978

### **The role of Professor Olikoye Ransome-Kuti**

Between 1986 and 1992, remarkable and innovative progress was made in the development of Primary Health Care, focusing on the Local Government Areas (LGAs). From 1986 to 1990, Professor Olikoye Ransome-Kuti expanded PHC to all local governments, achieved universal child immunization of over 80%, and devolved responsibility for PHC to local government areas. Professor Olikoye Ransome-Kuti worked assiduously between 1985 and 1992 to implement PHC policy based on the Alma Ata Declaration for the benefit of the Nigerian population. Professor Olikoye Ransome-Kuti introduced a comprehensive national health policy with a focus on PHC, placed emphasis on preventive medicine and health-care services at the grass root, ensured exclusive breast feeding practice, introduced free immunization to children, encouraged the use of oral rehydration therapy by nursing mothers, made compulsory the recording of maternal deaths, and encouraged continuous nationwide vaccination and pioneered

effective HIV/AIDS campaign. In 1992, the National Primary Health Care Development Agency (NPHCDA) was established following the recommendation of a high level WHO review team through Decree 29 of 1992 and merged with the National Programme on Immunization (NPI) in 2007. To ensure that the success of PHC is maintained in Nigeria, Colleges of Health Technology (CHT) were first established in the late 1970s as part of Nigeria's Basic Health Services Scheme to train a new cadre of Public Health Care (PHC) workers to staff the basic health units in the country. This is the mandate of CAHSTECH and that is why we partner with many organizations to support the vision of Government by funding this College to provide you access to being a professional and at the same time promote the healthcare delivery in Nigeria

### **Current challenges facing primary healthcare in Nigeria**

The current state of PHC system in Nigeria is appalling with only less than 20% of the 30,000 PHC facilities across Nigeria working. Presently, most of the PHC facilities in Nigeria lack the capacity to provide essential health-care services, in addition to having issues such as poor staffing, inadequate equipment, poor distribution of health workers, poor quality of health-care services, poor condition of infrastructure, and lack of essential drug supply.

### **Abuja Declaration of 2001**

African heads of state pledge to set a target of earmarking at least 15% of their annual budget to improve the health sector. Many African countries, including Nigeria, fall short of the Abuja Declaration of 2001 in spite of the pledge by heads of state of African Union countries

### **CAHSTECH**

Is a new generation innovation and entrepreneurial driven Government approved, Federal Government Assisted Institution, operating under private public partnership scheme of Federal Ministry of Education? CAHSTECH is designed to widen access to quality and pluralistic higher education through the provision of relevant industry-specific employable and highly professional skills. We focus on empowering you to achieving employable life-long professional qualification and practice in Medical Science, social sciences and Health Technologies.

### **A Destination for success**

The aim of the Institution is to create the next generation graduates with skills relevant to our economy and to create job opportunities for Nigerian youths. CAHST received a presidential and national award for Innovation in Nigeria in April 2012. The ceremony was held in Banquet Hall ASO ROCK Vila, Abuja on 12 April 2012.

### **The International Labour Organization (ILO) Declaration of 1998**

The International Labour Organization (ILO) Declaration of 1998 makes it clear that acquisition of employable skills and labour is a fundamental human right and insists that these rights are universal, and that they apply to all people in all States - regardless of the level of economic development.

### **WHY FEDERAL GOVERNMENT SUPPORTS US**

Following this development, CAHSTECH was assisted 100 % by grants from Federal Government of Nigeria through Ministry of Finance and the YouWiN program of Mr President. We are now promoted from Innovation Institution to College of Advance

Health Science and Technology and became incorporated and approved by Ebonyi State and Federal Government of Nigeria.

#### **WHY COLLEGE OF HEALTH IS RIGHT FOR YOUR SUCCESS**

You gain 2 things; Ability to perform it; and a become a professional for life. The need to eradicate poverty through acquisition of employable skills is well documented. As Nigeria aspires to become a major player in the world economy in line with her Vision 20-2020. It is very clear that the most crucial vehicle for attaining such ambitious goal, apart from power infrastructure, is a skilled and competent workforce.

#### **OUR HERO AND BOARD CHAIRMAN**

The Chairman of the Governing Board of the College, His Royal Majesty Eze Ogo Dr. Agom Eze – The Ezeke-una One of Igbeze Onicha.

#### **MENTOR**

The Federal Government appointed mentor to the College since 2012 is the former Solicitor General, Permanent Secretary and Sole Administrator Barr. C. N. Orji.

#### **THE PROVOST**

The provost of Mr. Kenneth N. Omabe. He also doubles as a lecturer at Federal University Ndufu Alike. Trained at the Prestigious university that discovered DNA in the world; the University of Leicester in England UK. Registered medical scientist and a member of Institute of Clinical Research in the UK. He has published in international journals and works specifically in cancer research and Molecular Biology. His research and works address drug discovery and translational therapeutics. His is recently a doctoral fellow in cancer research in France

#### **HEAD OF THE COLLEGE COUNCIL**

Dr. Maxwell Omabe, a former Postdoctoral Fellow, National Science and Engineering Research Council (NSERC) Canada at University of Saskatchewan, Canada; Worked at University of Saskatchewan, and Royal University Hospital Saskatoon; and with provincial Diagnostic Service of Manitoba, affiliate of University of Manitoba Canada. He is Fellow, Royal Society of Public Health, Great Britain; Fellow, Royal Society of Tropical Medicine and Hygiene, London; Professional Member and Chartered Clinical Scientist, Institute of Clinical Research London; Member, TETFUND Research Grant Review Committee, Member PhD Synopsis Review Committee, EBSU, Board Member, School of Post Graduate Studies, EBSU; Coordinator, Postgraduate studies in Medical Laboratory Sciences and former HOD Medical Laboratory Science Ebonyi State University. Formerly Senior Lecturer, School of Biomedical Sciences, University of Ulster, United Kingdom, Visiting Associate Prof Edo University Iyamoh.

#### **CHAIR ACADEMIC ADISORY BOARD**

##### **Engr. Chukwuma Ogbonnaya.**

He is a registered Clinical Engineer and a top management professional. He is also a lecturer at Federal University Ndufu Alike. He is the author of internationally published book that is used by scholars in Germany, UK, USA and you can find it in Amazon, a worldwide stage. He has over many years contributed to the success in banking sector. A current British doctoral Fellow and a graduate of University of Warwick, England UK

### **Member Academic Advisory Board**

#### **Dr. Albert Okoro ocha Egwu**

A Senior lecturer in EBSU, and lectured Community Medicine. He studied at Liverpool School of Tropical Medicine UK and University of Leicester in the UK.

#### **Martin Ezeani,**

Marin is a medical scientist and studied and University of Sussex in London and at University of Dalhousie in Canada. He is a consultant and lecturer in cardiovascular medicine and neuropsychiatric medicine. He lectures neurophysiology and specialises in cardiac rhythm

#### **Dr. Jide Ojo**

He is a lecturer in university of East London and specialises in Diabetes and drug discovery. He is a Charters clinical Scientist and a consultant in biomedical science.

### **The Registrar**

#### **Mr. Ogonnaya Franklin Nwanja.**

Is a graduate of UNN and a seasoned Hematologist? He is so committed to the success of CAHSTECH and has spent 3 years working to build the College and now rises to the role of acting Registrar from October 1 2017

### **CAHSTECH**

Is a leading post secondary institution offering more than just an education – it offers career training in some of today’s most in-demand professions. CAHST provides impressive list of benefits inside and outside the classroom in partnership with industrial, health and cooperate organizations to make teaching and learning innovative, more rewarding and career oriented; making our graduate start making income on the job quick. Programs that are designed for jobs in high growth industries.

The College focuses on the health, ICT and pharmaceutical industries, where there is High demand in the job market, and are expected to remain in-demand in the future.

### **Corporate Training**

In today's world, human capital has replaced physical capital as a source of competitive advantage for all Local Governmental Authorities, Companies, and organizations, large and small. CAHSTECH work with clients on human capital development, whether it is to develop a capacity-specific strategy or an industry-wide strategy to address joblessness. We invite you to consider the partnership role that CAHSTECH can play in accelerating youth’s engagement in high in demand occupations. We can provide you with services like