

A Medico-Religious Study of Exodus 1:17-20 and Lessons for the Nigerian Medical Practitioners

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ABSTRACT

The interaction between medicine and religion can be traced to a distant time in human history. Medicine has contributed to human society by proffering medical panaceas to health-related issues that can jeopardise man's existence. Medicine became necessary as man became vulnerable to health crises and problems that require medical attention. Man has been living based on medico-religious insights from the Old Testament period. For instance, in Isaiah 38:21, Prophet Isaiah instructed the servant of Hezekiah on a medicine that could cure his master. However, the practice of medicine was also evident in the Exodus passage, where midwives were seen upholding medical ethics beyond sanctions and strict orders. This paper examines the medico-religious analysis of Exodus 1:17-19 and lessons for Nigerian medical practitioners. The study is domiciled in multidisciplinary research, employing historical, descriptive, and interpretive methods, drawing insights from biblical studies, medical ethics, and religious perspectives. It was discovered that the midwives upheld the sanctity of life, which is derivative of both medical ethics and religious consciousness, despite the embargo placed upon the male children of the Israelites. Therefore, the paper recommended that Nigerian medical practitioners circumnavigate a complex ethical landscape with an obligation to preserve life and uphold their professional integrity.

KEYWORDS

Exodus 1:17-19; Medical Practitioners; Medico-Religious; Nigeria.

Introduction

The practice of medicine has been from time immemorial, ranging from biblical times to the present generation, where advancement and sophisticated equipment are used for sound

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health, treatment of illness, and proffering solutions to man's medical maladies. Several narratives in the Old Testament, such as the plague episode, pestilence, and other medical problems, spot the biblical record as significant events in the lives of those affected and as examples of the Lord's intervention.³ Medicine is the field of health and healing. It includes nurses, doctors, and various specialists,⁴ and according to Adeyeye Agnes and Abolaji Tosin, these specialists include but are not limited to the midwives, who are majorly women, and their primary function is to oversee the birth delivery process.⁵ The common thought of the Old Testament about sickness or any form of a health-related issue, which may also include barrenness or hard labour during birth delivery, has always been divine-driven, i.e., God's wrath or vengeance on erring nations and individuals (Leviticus 26:16; Deuteronomy 28:22; Psalms 38:2-3). Simeon Zahl corroborated Augustine's submission that hunger, weariness, and bodily pain are just as much evidence of God's ire against sin as a particular illness or disease would be.⁶

Despite the common reason for illness or health-related issues in the Old Testament, there are medicine prescriptions from God to his people and practising physicians. These prescriptions, found in some instances like Genesis 20:17, Psalms 104:14, and Isaiah 38:21, portray the healing power of God as a great physician. Other Old Testament biblical passages attested to the presence of physicians in the Israelite communities. Prophet Jeremiah asked a timely question in Jeremiah 8:22, "Is there no balm in balm in Gilead? Is there no physician there?...." The word physician can refer to professional medical practitioners in the ancient Israelite community, like other ancient communities such as Mesopotamia and Egypt.

The book of Exodus draws attention to an unforgettable event in the ancient Israelites' history, and for years, it became an intersection between the Abrahamic era and the Mosaic era. The world ruling power was Egypt, and the Israelites community who had previously moved into Egypt based on the favour received from King Pharaoh through Joseph (Gen. 47:5) became invalid at the installation of a new Pharaoh (Exo. 1: 8). The remarkable growth of the Israelites became worrisome and political threats to the new Pharaoh, hence the adoption of the medical practitioners (midwives) to further annihilate, and reduce the number of the Israelites. The involvement of medical experts, such as midwives, is an indirect attempt to reduce the number of Israelites. Subsequent passages identify Pharaoh's direct attempts to end the descendants of Abraham through forced labour and a decree stating that every male Israelite child should be dumped into the river (Exo. 1:22).

The paper's thrust is to engage the passage to examine the interplay between medical practice and religious consciousness as basic yardsticks for the actions of the two midwives in Exo. 1:17-20. With this aim in mind, the paper adopted historical, descriptive, and interpretive methods, drawing insights from biblical studies, medical ethics, and religious perspectives. The intersectionality between religion and the medical profession greatly alludes to the piousness and impiousness of medical practitioners in contemporary Nigerian society. This piousness

³ RODERICK, Saxey. "A Physician's Reflections on Old Testament Medicine", *Dialogue: A Journal of Mormon Thought*, Vol. 17 (3), 1984, 122–128, <https://doi.org/10.2307/45227943>.

⁴ Medical News Today, "What is Medicine", 11th January, 2024. <https://www.medicalnewstoday.com/articles/323679#fields-of-medicine>.

⁵ ADEYEYE, O. Agnes and ABOLAJI, S. Tosin, *Equilibrium Between Marriage and Ministry (An Exposition on the Life of Pastor Dr. Mrs. Agnes Omotayo Adeyeye)*, (Ilorin: CHRIDAMEL Publishing House), 58.

⁶ SIMEON Zahl, "Sin and Bodily Illness in the Psalms", *Horizons in Biblical Theology*, 42 (2020) 186-207.

largely owes to the religious proclivity and the reverence for human life. At the same time, the impiousness is driven by the money ideology of meeting economic demands and the family pressure of the medical experts.

However, about the two midwives in Exodus 1 account, is it correct to say that the actions of the two midwives were socially right? Are the two midwives not economically pressured? Is there any relationship between medical practice and religion? To address these questions, the paper is further divided into five subdivisions, which include the historical background of Exodus 1 and the exegetical study of Exo. 1:17-20, nurses midwives practice in Nigeria, lessons for the Nigerian medical practitioners and a conclusion.

Historical Background of Exodus 1

The Book of Exodus has been placed in the second category in the Hebrew Bible as a Pentateuchal catalogue, usually referred to as the “Torah” in the Hebrew Bible. The opening line of the text, *Shemoth*, which translates to “And these are the names of,” is where the book’s Hebrew name originates. Additionally, this statement appears in Genesis 46:8, where it also presents a list of the names of the Israelites “who went to Egypt with Jacob” (Exodus 1:1). This linking statement and the fact that the book starts with the conjunction “and” highlight the fact that Exodus was never meant to stand alone; rather, it was conceived as a continuation of a story that started in Genesis and was finished in three additional books (Leviticus, Numbers, and Deuteronomy).⁷

The Book of Exodus is the book of “history of the history” since it recorded the end of many generations and the beginning of another generation, leading to the undeniable salvific move of Yahweh, who had previously allowed the descendants of Abraham to sojourn in Egypt for 400 years, and has in His unquestionable authority led them out before the presence of the tyrannical king, Pharaoh. It further gave in detail some remarkable narratives such as the Passover feast, the Sinatic experience, the unreplicable act of the Red Sea, and the wilderness wandering, which gave the Book of Exodus a pride of place after the Book of Genesis. Davies G. I. writes:

The name ‘Exodus’, a Latinised form of a Greek word (ἐξοδος: cf. LXX at 19.1) meaning ‘departure’, reflects the standard designation of the book used in the early Christian Church and Greek manuscripts such as Codex Vaticanus (Alexandrinus adds Αἰγύπτου, ‘from Egypt’): the earliest surviving attestations of ‘Exodus’ as a title is in Justin’s Dialogue with Trypho (e.g. 59.1-2: mid-second cent. A.D.) and a list of biblical books attributed to Melito of Sardis (late second cent. A.D.) by Eusebius, HE 4.26.12- 14.⁸

The fundamental agreement of Davies’ views with most scholars on the meaning of Exodus lies in the etymological interpretation of the term. He went further to affirm that another Greek word that is primarily suitable for the understanding of the term “exodus” is ἐξάγω (echago),

⁷ KAISER, Walter “Exodus” in *The Expositor’s Bible Commentary with the New International Version of the Holy Bible*, Volume 2 (Grand Rapids, Michigan: Zondervan, 1990), 287.

⁸ DAVIES, G.I., *The International Critical Commentary, Exodus 1-18 Volume 1 Chapters 1-10: A Critical and Exegetical Commentary*, (New York: Bloomsbury Publishing Plc, 2020), 1.

which means bringing out and or removal and its focus on the human (Moses) and divine agency which secured the Israelites' release.⁹

Michael D. Wilson sharply notes that “the historicity of the Exodus is a subject of considerable debate among scholars of the Bible and the ancient Near East. Some contend that the Exodus story is wholly fictional, whereas others believe it preserves fragments of genuine historical events.”¹⁰ He went further to establish the book's historical background to the time of enslavement in the land of Egypt.¹¹ The first two sections of Exodus are intricately linked to Genesis. The first part demonstrates how the few tribal families that travelled to Egypt with Jacob grew into a large multitude (1.1–5, 7; Gen. 46.8–27; 47.27); the second part focuses specifically on Joseph and the ascension of a new king who was unaware of Joseph's accomplishments (1.6, 8; Gen. 37; 39–50). However, Moses was adopted into the house of the Pharaoh and later exiled to Sinai.¹²

Generally, the dating of the Book of Exodus varies according to scholars' submissions. Nevertheless, a common observation is that the exodus occurred in 1446 BC. This is due to the calculation of 480 years from Israel's exit from Egypt to the 4th year of Solomon's reign (966 BC; 1 Kings 6:1). Yet, because Exodus 1:11 depicts Israel working on a city called Raamses, some scholars believe that this would suggest that the exodus occurred during the reign of Raamses II in Egypt (1279–1213 BC), possibly around 1260 BC (1 Kings 6:1).¹³

Chapter one of Exodus highlights the nature of the Egyptian bondage and the salvific work of God through the medical practitioner of the time. Shiphrah and Puah, the two Hebrew midwives (Exo. 1:15), displayed the intersection between medical practice and religious consciousness in a society where it is almost impossible to think that such fear of God exists. Shiphrah and Puah changed the mindset of the Bible readers who would have thought that the two women carried out Pharaoh's decree at first glance. However, a remarkable turnaround from this perspective was the reception given to the decree, which was informed by the two midwives' medical and religious consciousness.

Ibn Ezra suggests that “there were many midwives, suggesting that Shiphrah and Puah were the overseers of the practitioners, directly responsible to the authorities for the many women under them.”¹⁴ Furthermore, according to Ilona Rashkow, the identity of these women was argued by scholars like Francis Nataf, who debated the possibility of the origin of the two women as non-Israelites due to the translation of *miyaldot ha-Ivriot*, which can be translated as either “the Hebrew midwives”, or “the midwives to the Hebrews.”¹⁵ The central argument of this study is not to contest whether or not the two midwives were of Hebrew descent. Though their ethnicity might have contributed to their religious consciousness, it can still be contested that even non-Hebrews loved, feared, and obeyed God's commandments such as Rahab (Joshua 2), Ruth (Ruth 1:16-17), and Cyrus (Isaiah 44:28). Rashkow concludes the Talmudic attribution of

⁹ DAVIES, G.I...1.

¹⁰ MICHAEL, D. Wilson, *The Historical Origin of Exodus*, 12th January, 2024, <https://ia800708.us.archive.org/34/items/TheHistoricalOriginOfTheExodusMichaelDavidWilson/The%20Historical%20Origin%20of%20the%20Exodus%20Michael%20David%20Wilson.pdf>.

¹¹ MICHAEL, D. Wilson, *The Historical Origin of Exodus*.

¹² DAVIES, G.I...3.

¹³ Bible.net, “What is the Background of Exodus”, 12th January, 2024, <https://www.bibles.net/book-background/background-of-exodus/>

¹⁴ See Ibn Ezra, Sforno, Ohr Hachayim on Exodus 1:15.

¹⁵ ILONA RASHKOW, “Shiphrah and Puah: Two Strong Women in Exodus”, 102. https://jbnqnew.jewishbible.org/assets/Uploads/522/jbq_522_rashkowshifra.pdf

the liberation from Egypt to the credit of the morally upright women of that time may reflect the pivotal role played by the midwives in overturning Pharaoh's order. According to rabbinic belief, these outstanding individuals had to be Hebrews. Because these brave women could not just disappear from history, they were conflated with other notable women, like Jochebed, Miriam, and Elisheva, Aaron's wife.¹⁶

Exegetical Study of Exodus 1:17-20

The previous verses (15-16) introduced Shiphrah and Puah as the midwives who shall oversee the birth delivery of the Hebrew women. However, the verses Exodus 1:17-20 show the reactions of the midwives to the irreversible edict of Pharaoh and the aftermath of their behaviours. The verses of the chapter are written in the Hebrew version and further translated into the English version.

Hebrew Version of the Passage¹⁷

וַתִּירָאנָּה הַמִּיֻלְדֹּת אֶת־הָאֱלֹהִים וְלֹא עָשׂוּ כַּאֲשֶׁר דִּבֶּר אֲלֵיהֶן מֶלֶךְ מִצְרַיִם וַתַּחֲיֶינָּה אֶת־הַיִּלָּדִים:
וַיִּקְרָא מֶלֶךְ־מִצְרַיִם לַמִּיֻלְדֹּת וַיֹּאמֶר לָהֶן מִדּוּעַ עָשִׂיתֶן הַדָּבָר הַזֶּה וַתַּחֲיֶינָּה אֶת־הַיִּלָּדִים:
וַתֹּאמְרֶנָּה הַמִּיֻלְדֹּת אֶל־פַּרְעֹה כִּי לֹא כַּנָּשִׁים הַמִּצְרַיִת הָעֶבְרִית כִּי־חַיּוֹת הָיָה בְטֶרֶם תָּבוֹא אֲלֵהֶן הַמִּיֻלְדֹּת
וַיִּלְדוּ:
וַיִּשָּׁב אֱלֹהִים לַמִּיֻלְדֹּת וַיִּרְבֵּה הָעָם וַיַּעֲצְמוּ מְאֹד:

English Passage¹⁸

¹⁷ But the midwives feared God; they did not do as the king of Egypt commanded them, but they let the boys live. ¹⁸ So the king of Egypt summoned the midwives and said to them, "Why have you done this and allowed the boys to live?" ¹⁹ The midwives said to Pharaoh, "Because the Hebrew women are not like the Egyptian women; for they are vigorous and give birth before the midwife comes to them." ²⁰ So God dealt well with the midwives, and the people multiplied and became very strong.

Verse 17 of the chapter begins with the phrase, *וַתִּירָאנָּה הַמִּיֻלְדֹּת* (*wattîrenā hamyallədōt*) "But the midwives feared God..." The word *wa* (but) signifies a continuation from the previous verse (16) which was a contradiction against the edict *וַהֲמִיתֶנָּה* (*wahāmitten*) "...you shall kill him". The *wattîrenā* "feared God" has a tremendous theological implication since God is recognised as the basis of the Israelites' faith. "Feared" is when one senses a threat to one's life, but in other contexts, it expresses the idea of reverence and deep respect like in (Ps 25:14ff).¹⁹

¹⁶ ILONA RASHKOW, 103.

¹⁷ See <https://mechon-mamre.org/p/pt/pt0201.htm>

¹⁸ See The New Revised Standard Version (NRSV)

¹⁹ ADAM Clarke, *Clarke's Commentary: The Holy Bible Containing the Old and New Testaments with a Commentary and Critical Notes (6 Volume Set)*, (Nashville: Abingdon Press, 1999).

Adam Clarke opined that the fear was a result of their foreknowledge about God and his law regarding murder: for though the law was not yet given, Exodus 20:13, being Hebrews, they must have known that God had from the beginning declared, "Whoever sheds the blood of a human, by a human shall that person's blood be shed; for in his image God made humankind" Genesis 9:6 NRSV.²⁰ The midwives had a sense of religion, "feared God" sufficiently to decline to stain their hands in the innocent blood of several defenceless infants, and, rather than do so wicked a thing, risked being punished by the monarch.²¹ There were two types of fear in the passage. First was the fear of Pharaoh as a king, and second was the fear of God as the Supreme Monarch whose authority was unparalleled. They might have weighed their options and see which one would be beneficial to them, hence their choice not to kill the male children because they feared God.

Verse 18 displayed the significance of evaluation in the phrase מַדְדָּא עָשִׂיתָן *maddūa'āśi-ten* "Why have you done this?...." The word expresses superiority and accountability in the discharge of responsibility. Pharaoh discovered that instead of a decrease, it was an increase and demanded the reason for the change in the expected result. The fear of the king came in contrast with the fear of God, and they allowed the fear of God to supersede. The fear of the LORD is the beginning of wisdom (Prov. 1:7). In describing the fear of God versus the fear of the king, Christopher Naseri opined that it is this fear of God understood as reverence and piety that prompts the identification or understanding of Pharaoh's instruction as evil by the midwives and their subsequent avoidance of it. It is this avoidance of evil by the midwives that the narrator thus interprets as fear of God.²² However, the ruler needed accountability. This was a similar case of Shadrach, Meshach and Abednego, where Nebuchadnezzar demanded the reason for their defilement and wanted to see whether the report was accurate (Dan 3:12ff). "...and save the male children?" It is glaring that Pharaoh was aware of their choice to save the male children but inquired if there was any substantial reason for their disobedience. Again, Pharaoh might have been shocked to know that there was a deliberate flouting of rules by the midwives and wanted to be sure of their reasons before he judged them. Pharaoh's interest was not in the Israelites' women but in the male gender. Perhaps he considered the women harmless to his rule; hence, he paid little or no attention to the midwives flouting his rules. He went for what was most pressuring to his interest and authority: the male gender.

Verses 19-20. The women's response to Pharaoh met a mixed reaction from biblical scholars. Ellicott opined that this was probably true but not the whole truth. Though the midwives dared to disobey the king, they did not have "the courage of their convictions" and were afraid to confess their real motives.²³ Matthew Poole writes:

"...for they are lively...." suggests the activeness and liveliness of the Hebrew women during the birth of their children, compared to some other creatures which conceive on their

²⁰ Precept Austin, "Exodus 1 Commentary," 12th January, 2024, <https://www.preceptaustin.org/exodus-1-commentary>

²¹ CHARLES, J. Ellicott, "Ellicott's Bible Commentary for English Readers" (Zondervan: Gospel Publishing, Kindle edition, 2018).

²² CHRISTOPHER Naseri, "Exodus 1:15-22 and the Midwives who Dared Pharaoh to Protect Lives", *European Journal of Scientific Research*, vol. 159, no. 3 June, 2021, 45.

²³ Charles, J. Ellicott, "Ellicott's Bible Commentary for English Readers", (Zondervan: Gospel Publishing, Kindle edition, 2018).

own... This might be no lie, as many suppose, but a truth concerning many of them, and they do not affirm it to be so with all. And so it might be, either because their daily and excessive labours joined with the fears of the execution of the king's command, whereof they seem to have gotten notice, did hasten their birth, as the exact causes do commonly in other women, or because they, understanding their danger, would not send for the midwives, but committed themselves to God's providence, and the care of some of their neighbours present with them.²⁴

Poole concludes that was nothing but truth, though they did not speak the whole truth, which they were not obliged to do.²⁵ The reply of the midwives is interpreted as a commonplace response to fool the king. The king is identified as so confused by his obsession to eliminate the Hebrews that the women to whom he assigns the covert operation quickly trick him.²⁶

The reward of their reverence for God is seen in verse 20 of the passage. "Therefore, God dealt well with the midwives." The word *teb* 'well' in this stem תָּבַח means "to cause good, treat well, treat favourably." The vav-consecutive shows that this favour from God resulted from their fearing and obeying Him. The recompense God gave them for their tenderness towards his people: "He dealt well with them," Exodus 1:20. Note, God will be behind-hand with none for any kindness done to his people, taking it has done to himself. In particular, he made them houses (Exodus 1:21), built them into families, blessed their children, and prospered them in all they did.²⁷ The understanding of the **verse 20** can be seen in the **verse 21** of the passage. While considering **verse 20 and verse 21** simultaneously, Christopher asserted that in v.20, God prospers the work of the midwives' hands for being faithful to the very essence of their profession in enhancing life, in v. 21 he blesses them in particular for their 'fear of God', for their acting according to the demand of God to respect and preserve life. God's blessing for the midwives is that he gives them their families.²⁸ וַיַּעַשׂ wayya'as (provision) and בָּתִּים bātīm (house) were two important additional blessings which God gave to the midwives, which symbolise stability, source, rest, peace and legacy. With the house, the midwives can find rest after work and happiness with their husbands and children. However, this was a significant blessing for women in ancient and contemporary times who always envisaged a happy home.

Nurse Midwives Practice in Nigeria

The term "midwife" among the Yoruba tribe of Nigeria is known as "Iya Agbebi", which is traditionally construed as "a woman who aids childbearing" or "one who specialises in caring for pregnant women". Though the roles of midwives among the Yoruba are not limited to the appellation "Iya Agbebi", it went as far as taking care of ill children in the society. In the Igbo society, a midwife is called Ọdịnàny. Among the Igbo, the act of pregnancy and childbirth was, therefore, marked by various rituals and therapies that ensured the protection of women against

²⁴ MATTHEW Poole, "Matthew Poole's Commentary" 12th January, 2024, <https://biblehub.com/commentaries/poole/exodus/1.htm>

²⁵ CHRISTOPHER Naseri, 47.

²⁶ Matthew Poole, "Matthew Poole's Commentary" 12th January, 2024, <https://biblehub.com/commentaries/poole/exodus/1.htm>

²⁷ Matthew Henry, 12th January, 2024, <https://www.studylight.org/commentary/exodus/1-20.html#verse-mhm>

²⁸ CHRISTOPHER Naseri, "Exodus, 48.

physical, human, and spiritual harm. The midwife's role, and that of the expectant mother's family, went beyond mere delivery to performances that ensured the placating of deities and ancestors and securing divine protection against potential threats to expectant mothers.²⁹

Medical practice in Nigerian society has a long history in the pre-colonial era. In fact, at that period, the medical profession was at the frontline before the emergence and growth of some other professions in Nigeria.³⁰ Nurse Midwives are registered nurses who specialise in providing care to women during pregnancy, childbirth, and the postpartum period. They are highly trained healthcare professionals with advanced knowledge and skills in maternity care. Nurse midwives are equipped to handle normal pregnancies and births, as well as provide care for women with high-risk conditions.³¹ According to *the National Association of Nigerian Nurses and Midwives*, the term "midwife" is derived from two independent words: mid = with and wife = woman. Midwives offer antenatal care support givers to expecting mothers and attend the birth of the infants. They also provide postpartum care to the mother and the newborn child.³²

In the ancient Yoruba community, especially before the advent of the colonial masters, midwifery is practised alongside herbal medicine. In this regard, a midwife must be versatile in the knowledge of herbs to aid safe delivery to patients. They are in this wise called "elewe omo", meaning the owner of "herbs and child". They can be both male and female. This further implies that the work of midwifery was practised among the Indigenous people of Nigeria as a form of the traditional medical approach to aid delivery, and prescriptions of herbs are given to a child who is having fever, headache or being struck with chicken pox. However, the transformation of society has affected this traditional practice among the people of Nigeria. The name midwife is still maintained today, and there have been little or significant changes in how it operates in society.

Despite these intricacies, Nigerian midwifery is still health-inclined in its practice and ethics. According to the Nursing and Midwifery Council of Nigeria,³³ Below are the first twelve (12) ethical codes for nurses and midwives in Nigeria:

1. Provide care to all public members without prejudice to their age, religion, ethnicity, race, nationality, gender, political inclination, health or socioeconomic status.
2. Uphold the health consumer's human rights as the constitution provides.
3. Ensure that the client/patient of legal age of 18 years and above gives informed consent for Nursing intervention. If the health consumer is underage, the next of kin or the parents can give informed consent on his behalf.
4. Keep information and records of the client confidential except in consultation with other health team members to come up with suitable intervention strategies or in compliance with a court ruling or for protecting the consumer and the public from danger.

²⁹ OGECHUKWU Ezekwem Williams, "A Blur between the Spiritual and the Physical: Birthing Practices among the Igbo of Nigeria in the Twentieth Century", *Sacred Inception: Reclaiming the Spirituality of Birth in the Modern World*, Lexington Books, 2018.

³⁰ Medical Business, "Medical Practice in Contemporary Nigeria: Yesterday, Today and Tomorrow", 12th January, 2024, <https://sqhn.org/medical-business/>

³¹ NICOLAS Idoko, (August, 2023), "Understanding the Legalities for Nurse Midwives in Nigeria", https://professions.ng/legalities-for-nurse-midwives/#google_vignette, accessed 12th January, 2024.

³² Nursing and Midwifery Council of Nigeria, "Code of Professional Conduct" 12th January, 2024, <https://www.nmcn.gov.ng/codec.html>

³³ Nursing and Midwifery Council of Nigeria, "Code of Professional Conduct" 12th January, 2024, <https://www.nmcn.gov.ng/codec.html>

5. Avoid negligence, malpractice and assault while providing care to the client/patient.
6. Relate with a consumer professionally only.
7. Do Not take bribes or gifts that can influence you to give preferential treatment.
8. Consider the views, culture and Beliefs of the client/patient and his family in the design and implementation of his care/treatment regimen.
9. Know that all clients/patients have a right to receive information about their condition.
10. Be sensitive to the needs of clients/patients and respect the wishes of those who refuse or cannot receive information about their condition.
11. Provide information that is accurate, truthful and presented in such a way as to make it easily understood.
12. Respect clients' and patients' autonomy and their right to decide whether or not to undergo any health care intervention, even where a refusal may result in harm or death to themselves or a foetus unless a court of law orders to the contrary.

The above medical ethics provides an insight into the Nigerian medical system, especially that of midwives. Due to economic hardship in Nigeria, are these medical ethics still practised? It can be argued that Nigeria's health system is facing some issues, such as understaffing in rural and urban centres, lack of medical facilities, lack of trained and committed personnel, lack of remuneration and untimely salary payment, amongst several others. In the face of all these realities, what is the face of midwifery in Nigeria's medical system? The following section provides some reflections and lessons for the Nigerian medical association as they are faced with different challenges posing threats to the impossible implementations of medical ethics cum religious consciousness in real-life situations.

Lessons for the Nigerian Medical Practitioners

The medical life and religious obligation of Shiphrah and Puah is a challenge to Nigerian Medical Practitioners. The duo in health care delivery mustered up the courage to maintain their time's medical and religious duties under a tyrant leader, economic instability, social unrest and power clash between Pharaoh and God. After critical evaluation, the under-discussed are the lessons for the Nigerian medical practitioners from the lives of the duo:

1. Upholding Medical Ethics

The duo, Shiphrah and Puah, were able to uphold the medical ethics of their time, which included the preservation of life and respect for patients' rights (life). Nigerian medical practitioners must learn a great deal about the ethical dilemmas facing the medical sector in 21st-century Nigerian society. Some of these medical codes include but are not limited to providing care to all members of the public without prejudice to their age, religion, ethnicity, race, nationality, gender, political inclination, health or socioeconomic status, upholding the health consumer's human rights as provided in the constitution and provide care in emergencies where treatment is necessary to preserve life without clients/patients consent if they are unable to give it, provided that you can demonstrate that you are acting in their

best interests.³⁴ These ethics were seen in the roles of Shiphrah and Puah by upholding the rights of the women and their infants, that is, the right to life, as against Pharaoh's decree.

2. Ensuring Positive Religious Values

One of the most essential values displayed by Shiphrah and Puah is the awareness of religious values. Not only is taking the life of a patient a wrong act for medical practitioners, but it is also against God's commandment (Exo. 20:13; Deu. 5:17; Exo. 23:30; Lev. 24:17; 1 Jn. 3:11-12). Exodus 1:17 states that, "but they feared God...." The religious consciousness of the duo aroused and came into play regarding the evil edict enacted by Pharaoh. These spiritual values and consciousness aided the midwives in preserving the lives of children born under their watch. It must be stated here that Nigerian society has many different religious practices. However, medical practitioners should, regardless of their religion, put the fear of God in everything done within the system. The fear here also includes reverencing God by dutifully obeying his laws. Again, it must be stated here that the termination of lives under the toga of religious activities is a misinterpretation of God's law. Life is sacred and should not be taken under the pretence of a religious provision.

3. Good Communication Skills

The need for communication is a fundamental trait of every relationship. Communication level and skills determine the extent of a relationship and the consequence(s) of a discussion. This attribute was found in the systematic and purposeful presentations of Shiphrah and Puah when the fearful Pharaoh summoned them. Both women gave an account of what had happened. They avoided implicative speech. Contrary to Ellicott, who believed that the duo communicated a half-truth, however, Rosalind Janssen opines that the response of the midwives is a 'delightful double entendre' through which they surreptitiously poke fun at Pharaoh, who, in his animalistic exercise of power cannot resist.³⁵ Nigerian medical practitioners should be good speakers and listeners when discharging their duties and functions.

4. God's Blessing for Obeying Him

The exodus narrative profoundly shows the reward for man's obedience to God. God blessed Shiphrah and Puah (Exo. 1:20-21) for being a positive instrument in his divine will for the Israelites. Contrarily, the Pharaoh's role in thwarting God's plan was unfruitful, and he was punished for this act. Nigerian medical practitioners should know that obedience to God's instruction attracts God's blessing, and disobedience to his laws brings his ire upon those who erred.

³⁴ Nursing and Midwifery Council of Nigeria, "Code of Professional Conducts" 12th January, 2024, <https://www.nmcn.gov.ng/codec.html>

³⁵ Rosalind Janssen, "A New Reading of Shiphrah and Puah: Recovering their Voices," *Feminist Theology*, 27 (2018): 21.

5. *Wisdom in Action*

The display of a high level of religious consciousness by the midwives is not anti-constitutional and extremist. The display of wisdom by the midwives in this situation means that there is a Supreme authority whose authority supersedes the previous authority. Hence, God's factor in this passage is the highest authority, not Pharaoh's. Therefore, their reaction to the Pharaoh's order was not anti-constitutional. On the other hand, despite the Supreme authority, the midwives were not extremists, hence their humble presentation as a recognition of the authority of the lower cadre –Pharaoh. The midwives attended to the conflict in authority between Pharaoh and God with wisdom, and their actions did not aggravate Pharaoh's anger against them. Hence, their lives were saved, and God's blessings were incurred upon them –a double blessing, a blessing from Pharaoh, and a blessing from God.

Conclusion

The interplay between medicine and religion is profound in the world's order. It involves the divine role and human agency to carry out medical tasks and religious obligations to traverse social, medical, political, economic, and religious maladies combating man's survival in the community. Every sector has instructions, ethics, and codes of conduct guiding successful operations that are geared towards actualising the pre-stated goals and objectives. These codes are also found in the medical and religious milieus, particularly in the action of the duo –Shiphrah and Puah in the Exodus 1:17-20 account.

The midwives, Shiphrah and Puah, displayed a high level of professionalism in health care service by preserving the lives of the male children of the Israelites. This is about Nigerian medical ethics, where the lives and decisions of every patient are taken with high confidentiality. They also displayed an outstanding level of religious commitment by honouring God instead of the royal edict by the tyrant king –Pharaoh. Disobedience to the wicked order was done concerning a divine will, which thus overrules it. God controls every living creature, including the ruler and the ruled. Therefore, the two midwives chose to obey God over the earthly ruler, who is against God's purpose.

Recommendations

1. Nigerian medical practitioners should circumnavigate a complex ethical landscape with an obligation to preserve life and uphold their professional integrity.
2. God should be feared, honoured and obeyed.
3. The life of a patient is important, and issues about patients should not be disclosed to third parties; thus, medical practitioners need confidentiality.
4. Midwives should avoid derogatory words to women in labour. That is, they should avoid derogatory remarks on their patients while discharging their duties.

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