INDIVIDUAL GOALS AND TRAINING IN LEPROSY: NEED FOR REVISION OF CURRENT STRATEGY

Sir,

I read with great interest Dr A. C. McDougall's apt editorial, "Training in leprosy—does the current strategy need revision?" (*Lepr Rev*, 1995, **66**: 88–95). I would however like to stress an aspect which was apparently under-emphasized by the author, i.e. the harmonization of individual goals of leprosy workers with organizational goals as far as leprosy training is concerned.

In a study related to job satisfaction amongst laboratory technicians in six leprosy projects in Nigeria¹, the major reasons for poor job satisfaction compared to that obtained by leprosy control supervisors and doctors, were, in order of frequency: lack of 'recognition'; slow career advancement; and inadequate overseas training. The study revealed that (further) training was of relatively low priority for this group of workers. My experience with other categories of leprosy workers trained over the past 6 years at the National Tuberculosis and Leprosy Training Centre, Nigeria, suggests that the feelings expressed by the leprosy technicians are shared by other groups of leprosy workers.

Most leprosy workers in developing countries apparently seek training mainly to achieve personal goals of 'recognition', (e.g. good credentials, promotion, improved status and financial remuneration), a well-defined and viable career path as well as an opportunity for a dream trip abroad! For as long as opportunities are not created for the realization of some of these personal goals, altruistic organizational goals are unlikely to receive the commitment they warrant no matter how well the leprosy training curriculum has been designed and/or revised.

The following measures may facilitate the realization of the goals of leprosy training in Nigeria:

development of a well-defined and viable path for graduates of the leprosy supervisor's course by, for example, making their certificates tenable for promotion in the Nigerian public service;

provision of incentives like financial rewards and travel fellowships to outstanding leprosy workers in every state of the Federation on a regular basis; and

adoption of a holistic view of training as provided for by the concept of Human Resources Development (HRD)². HRD has been defined as 'organizational learning experiences in a definite time period to

180 Letters to the Editor

increase the possibility of improving job performance and growth'. Growth is further defined as being both personal and organizational. This may entail (further) training of leprosy workers in areas in which they can positively contribute to leprosy control services and at the same time be "recognized" for such contributions, e.g. community empowerment strategies³.

Acknowledgment

I sincerely thank Dr Pieter Degeling of the School of Health Services Management, University of New South Wales, Australia, for encouraging me to submit this letter.

References

- Awofeso N. Inventory of skin smear examination practices in sic leprosy control programmes in Nigeria. *Lepr Rev*, 1993, **64:** 150–156.
- ² Cocioppe R, Warren-Lanford P, Bell L. Trends in human resources development and training. Asia-Pacific J of Human Resources Managagement, May 1990, 55–77.
- ³ Srinivassan H. Deformities and disabilities—the unfinished agenda in leprosy work. *Lepr Rev* (Editorial), 1995, **66:** 193–200.

261 Dickinson House The Prince Henry Hospital Little Bay NSW 2036 Australia NIYI AWOFESO