

WORKSHOP 7: TRAINING*Chair:* W. Felton Ross*Participants*

| | |
|------------------|--------------------|
| L. M. Balina | S. J. Nkinda |
| R. de Soldenhoff | D. V. A. Opromolla |
| K. V. Desikan | H. Sansarricq |
| U. Elvers | S. Talhari |
| P. Feenstra | E. S. Thangaraj |
| R. C. Hastings | J. R. Trautman |
| A. Hayes | J. L. Turk |
| M. F. Lechat | L. G. van Parijs |
| D. L. Leiker | R. Verduin |
| D. Lobo | Y. Yuasa |

There are two principal roles for professional associations in training. The first is to provide opportunities for continuing education for members and other professionals and the second is to recruit and train additional professionals. It is generally agreed that there is a great unmet need for training in leprosy, particularly among people responsible for the clinical care of leprosy patients in countries where the disease is endemic, especially where integration has been adopted as a national policy. With these presuppositions in mind, the members of the Workshop considered the topic in five aspects: 1) the INTERNATIONAL JOURNAL OF LEPROSY and other journals, 2) associations of leprosy professionals, 3) teaching and learning materials, 4) undergraduate medical education, and 5) possibilities for a resource information network.

INTERNATIONAL JOURNAL OF LEPROSY and other journals. Initially, the very existence of journals devoted to leprosy must be justified. As long as there is a need for a specialized body of knowledge which makes up leprology, there will need to be an international leprosy association and its journal. This need will exist as long as leprosy remains a health problem, i.e., for as long as the disease is not "adequately" controlled. Given that leprosy journals are still needed, to whom should these journals be directed? Certainly the relatively small group of full-time leprosy researchers and leprosy physicians (~2000?) should be served, as well as the significant numbers of physicians

and surgeons who must care for leprosy patients in specialist or general medical practice. Many paraprofessionals working in leprosy should find at least some parts of leprosy journals of interest. As a practical matter, it is most unlikely that leprosy journals can be of value to much larger but non-professional groups such as community health workers. A leprosy journal should provide leprosy professionals with a focus for their discipline, a means of exchanging information, and a constant motivation to perform better. A focused, well-informed, and well-motivated professional leprosy worker—in a laboratory, at the bedside, or teaching—is our greatest asset in caring for today's leprosy patients and in preventing tomorrow's. For the membership of the association, the journal should foster a sense of pride in belonging to a group with high professional standards as well as being a convenient, reliable and readable source of accurate, timely and stimulating information through original articles, editorials, review articles, and current literature summaries. For writers, including those who fill the correspondence columns and especially for the younger professionals, the journal provides not only motivation and an opportunity to share their work with others but also exposure to the discipline that publication in a reputable journal entails and the benefit of free, critical and hopefully kindly advice from experienced reviewers.

Associations of leprosy professionals. Leprosy associations are defined as being

those composed primarily of professional workers with a serious interest in this disease. Such professionals need not be leprosy workers exclusively, but will include any recognized medically oriented discipline. In providing training opportunities to those actively or potentially engaged in leprosy work control activities, it is important that the private sector not be overlooked. In many parts of the world private practitioners are becoming more involved in such activities. It is essential for the International Leprosy Association (ILA) to identify local or national associations (or appropriate institutions) with actual or potential ability and willingness to provide training for those with a need, and to design mechanisms by which whatever support required is provided to these associations so as to enable them to conduct effective training programs.

Although not defined at present, there needs to be a focus on specific targeted actions which will enhance these efforts, but it is deemed important to at least first identify ILA members who can and will collaborate in training activities. Determining the mechanism of their support, including financial support, is of prime importance.

Finally, the ILA and its individual members should strongly consider making serious efforts to convince governments of various nations that leprosy continues to be a serious global problem, and that support of leprosy control activities remains extremely important.

Teaching and learning materials. It is recognized that there is a very great unmet need for teaching and learning materials, especially for general medical workers at all levels involved in integrated leprosy programs. However, apart from once again drawing attention to the need, it was agreed that no specific role for the ILA could be identified in this area. The possibilities for the provision of material specifically designed for self assessment and self instruction were also

considered—again, it was emphasized that the greatest needs are to be found among those working in general health services who have limited numbers of patients to care for. However, it was considered questionable whether self-instructional material would be of greater utility for this group than basic handbooks or manuals, and the matter was referred for further study.

Undergraduate medical education. Leprosy is either not included at all or is allocated insufficient time in the curriculum of many medical schools. The ILA should emphasize the importance and value of teaching leprosy patient management and disease control in medical schools, especially in leprosy-endemic countries. The following approaches were discussed: a) interdisciplinary teaching in conjunction with dermatology, infectious diseases, neurology, epidemiology, ophthalmology, and rehabilitation medicine; b) the involvement of disciplines outside the clinical medical field, including sociology and psychology, in order to increase the understanding of and eventually to reduce the stigma associated with the disease; c) the preparation and distribution of leprosy training material; and d) the identification and encouragement of individual teaching staff who are interested in leprosy.

Resource information networks. There is a need for a resource information network to identify leprosy information materials and leprosy specialists worldwide, particularly in the field of training. Such a resource would be especially helpful to persons working in remote areas without access to good libraries and computer-search facilities. Because of the practical difficulties and costs inherent in the development and maintenance of these networks, it is proposed to proceed with caution and to possibly begin with a relatively small network linking individuals working in training institutions.