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An Analysis of How Prospect for Promotion Affects Job Performance in the Federal Teaching Hospitals in Nigeria

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Abstract
The study was undertaken to identify ways of improving the job performance of the health workers in the federal teaching hospitals in Nigeria. The investigation concentrated on how the prospect for promotion affects job performance in the federal teaching hospitals in Nigeria, and covered the top fourteen federal teaching hospitals in Nigeria. The study was based on operant conditioning theory of B. F. Skinner, which postulates that people learn to perform behaviours that lead to desired consequences and learn not to perform behavior that lead to undesired consequences. A sample of 560 health workers was chosen purposively. The hypothesis was tested using univariate analysis of variance. Test results of the tests of between-subject effects present the model for the relationship between staff performance and other variables and the relationship between staff performance and each of the variables separately. With F- values at $P < 0.05$, it is revealed that the model relationships are significant. This indicates that on its own, an intense desire for promotion (a very important reward) will not motivate a health worker to a greater effort. The major determinant of his motivation is his generalized experience on whether had work hard earned him promotion in the past, and how it is likely to earn him in the future. It is therefore recommended the Hospital management board should design a career structure, in which promotions are tied to better job performance, and health managers should make every effort to keep the process as objective as possible in the federal teaching hospital in Nigeria.

Keywords
Prospect for promotion, Health force management, Job performance, unsatisfactory career, Low productivity, Public-to-Private Brain Drain, Coping Strategies.

Introduction

Health care delivery in Nigeria seems to be seriously affected by imbalance in distribution of staff, ineffective utilization low job performance, and motivation. Resolution, WHA.40.14 adopted by the World Health Assembly in 1987 urges member states to ensure that manpower is not only adequately planned for and trained, but also skillfully managed, including the improvement of career development, and incentive schemes to ensure its most effective utilization. A glance into the health care system in Nigeria appears that overall the problems are mal-distribution of personnel, shortages or surpluses or low productivity, unsatisfactory career structures and promotions, ineffective cultivating education and supervision and poor living and working conditions. Most of these problems could have existed and persisted in the federal teaching hospitals in Nigeria for many years now (Carefoot, 1994; Ajuogu, 2002).

The concern of the health sector personnel to see personnel management improved through a systematic application of sound management principles and techniques is not new in Nigeria as expressed in the regular labour disputes, moon-lighting, predatory behavior, public-to-private brain drain, coping strategies and conflict of interest as the *defacto* justification. Yet it appears that the traditional focus of human resources for health development in Nigeria has been on improving planning, education and training; not enough attention seams to have been paid to management and the personnel needs of health workers. Improved housing, better working conditions and greater opportunities for continuing education and career development can act as powerful incentives and lead to better job performance. The federal ministry of health may need to solve these problems in the teaching hospitals in Nigeria, as more than 70% of the federal government health service budgets are enmarked to be spent on personnel. The concern for getting the most out of this expenditure is fully justified. Current economic trends in Nigeria make it particularly urgent to get good value for money. Thus, paradoxically, at the same time that the federal government is being forced by economic crisis to reduce expenditure, she is under enormous pressure to expand the health services and make them both accessible and affordable. The health

services needs seem to have grown faster than the national economy, as health services expenditure has tended to claim an increasing greater proportion of Gross National Product (Awokoya, 2003).

These conflicting pressures can be reconciled mostly by improving the productivity of the federal teaching hospitals, and attention needed naturally be turned to the most costly component in the health equation in terms of budget expenditure, personnel. For instance, a 100% rise in personnel productivity brought about by modifying skills, motivation organization and procedure would mean that 10 health workers of a given category could do the work previously done by 11 such workers, thus "freeing" the extra person for other work. This is equivalent to having an extra worker without paying any of the usual cost of training, salary, benefits, and allowances and so on. Thus, following this argument, services can actually expand in the face of shrinking health budgets. Although no systematic study has been undertaken to estimate the extent of the waste of the resources in the federal teaching hospitals in Nigeria, there is some evidence that if is in considerable (SSA, 2002). If even half of the waste is due to low job performance of personnel, it would be reasonable to expect a substantial reduction when there is better personnel management.

Therefore, this study was an attempt an attempt to investigate the personnel motivation in the federal teaching hospital in Nigeria, with the aim of identifying ways of improving job performance of the health service workers in the sub-region of West African. The investigation concentrated on how the prospect of promotion affects job performance in the federal teaching hospitals in Nigeria. It is intended that this study would be used to draw attention to motivation options available in the health system services which could lead to widespread effort for improving job performance of front-line health workers and the provision of continuing education in the federal teaching hospitals in Nigeria.

Theoretical Framework

This study is based on operant conditioning Theory, developed by Psychologist B. F. Skinner which postulates that people learn to perform behaviours that lead to desired consequences and learn not to perform behaviours that lead to undesired consequences (Skinner, 1969). Translated into motivation terms, skinner's theory means that people will be motivated to perform at a high level and attaint their work goals to the extent that high performance and goal attainment allow them to obtain outcomes they desire. Similarly, people avoid performing behaviours that lead to outcomes they do not desire. By linking the performance of specific behaviours to the attainment of specific outcomes, managers can motivate organizational members to perform in ways that help an organization. The basic premises of this learning theory as applied to organizations is that managers can increase employee motivation and performance by the ways they link the outcomes that employees receive to the performance of desired behaviours in an organization and the attainment of goals. Thus, this learning theory (operant conditioning theory) focuses on the linkage between performance and outcomes in the motivation equation (Hamner, 1974; Skinner, 1969; Weiss, 1990; Jones and George, 2003).

Operant conditioning theory provides four tools that managers can use to motivate high performance and prevent workers from engaging in Absenteeism and other behavior that detract from organizational effectiveness. These tools are positive reinforcement, negative reinforcement, punishment, and extinction. Therefore in discussing how the prospect of promotion affects job performance in the federal teaching hospital in Nigeria, much was drawn from this operant conditioning theory aspect of *positive Reinforcement*, which gives people out comes they desire when they perform organizationally functional behavior. According to skinner (1969), these desired outcomes, called *positive rein-forcers,* include any outcomes that a person desires, such as pay, praise, or a promotion. Organizationally functional behaviours are behavior that contributes to organizational effectiveness, they can include producing high-quality goods and services, providing high-quality patient care, and meeting deadlines. By linking positive reinforces to the performance of functional behaviours, this study would show how health managers can motivate the health workers to perform the desired behaviours in the federal teaching hospitals in Nigeria.

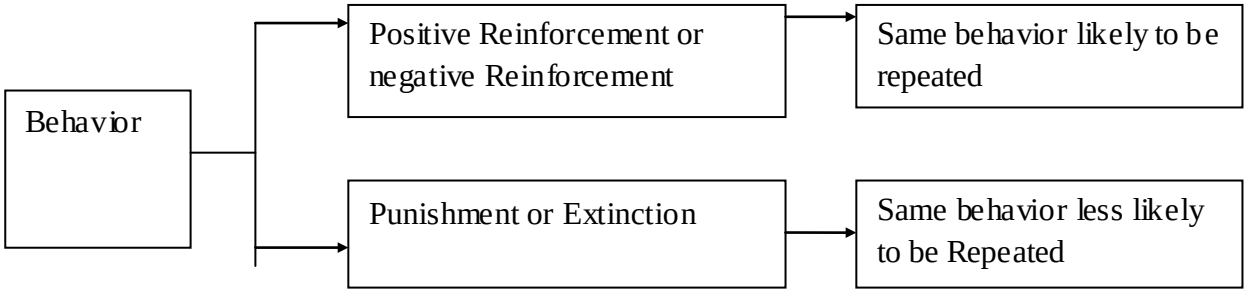

Figure I: *The consequences of Behaviour*
Source: Bateman, T. S. and Snell, S. A. (2002) *Management: Competing in the New Era,* McGraw-Hill: New York

The Reinforcement Theory enunciated by psychologist Edward Thorndike supported the operant conditioning theory, when it posits that behaviours that are rewarded tend to be repeated. This shows

that behavior is encourage or discourage depending on the consequences. *Positive Reinforcement* is a pleasurable stimulus or reward following a desired behavior that induces people to continue the behavior. For instance, people are likely to spend more time in the office if the feel it will help them earn promotions even though it may not increase their overall productivity. Withdrawing or failing to provide a reinforce behavior is "extinguished" or discontinue. *Negative Reinforcement* is the removal of unpleasant consequences associated with a desired behavior regulating in an increase in the frequency of that behavior. For instance, if employees feel that being creative at work will not lead to reprimands for not following procedures, they are more likely to try new ways of doing things and become more entrepreneurial. *Punishment* is an aversive or unpleasant consequence following undesired behavior. This leads to a decrease in that behavior. However, their avoidance of undesired behaviours through punishment does not mean that people will engage in desired behaviours. For instance a boss who yells at people for being late may provoke employees to show little initiative to try their best once they clock in. Infact, they may resent the boos and try to get even whenever they can. The theory indicates that the threat of punishment for undersided behaviours is more effective than the actual use of punishment because punishment decreases undersieable behavior only temporarily and may create anger and resentment, which hurt communization and undermine good will and personal initiative (Thorndike, 1971, Bateman and Snell, 2002; Gomez –Mejia and Balkin, 2002).

In summary, the learning theories (operant condition theory, reinforcement theory and others) indicate that managers should link desirable outcomes (such as pay raises or promotion) to the behaviours they want to encourage. They should also try to reduce undesirable outcomes associated with the behaviours they wish people to exhibit. This study was examined in the light of these Skinner (1969) and Thorndike (1971) postulations.

Research Methodology

The study covered the fourteen top federal teaching hospitals in Nigeria. They include the following.

- Ahmadu Bello University Teaching Hospital (ABUTH), Zaria.
- Aminu Kano Teaching Hospital, Kano
- Lagos University Teaching Hospital (LUTH) Idi Araba, Surulere.
- Nnamdi Azikiwe University Teaching Hospital, Nnewi
- Obafemi Awolowo University Teaching Hospital Complex, Ile-Ife.
- University College Hospital (UCH), Ibadan
- University of Benin Teaching Hospital (UBTH), Ugbowo
- University of Calaber Teaching Hospital, Calaber
- University of Ilorin Teaching Hospital, Ilorin
- University of Jos Teaching Hospital, Jos
- University of Maiduguri Teaching Hospital, Maiduguri
- University of Nigeria Teaching Hospital (UNTH) Ituku-Ozola, Enugu
- University of Part Harcourt Teaching Hospital, Port Harcourt
- Usman Dan Fadio University Teaching Hospital, Sokoto

A sample of 560 health workers was chosen purposively for the study. And since the study is concerned with specific prediction, narrations of facts and characteristics, a descriptive/diagnostic design was adopted for the study. The research instruments used for the data collection included both structured questionnaire and interview guide. Data collected were descriptively analyzed, using frequencies, simple percentage, charts, and means and standard deviation measures. The data were tested at 5% level of significance to establish whether the responses were normally distributed. They were done with the aid of the SPSS 17.0 statistical software. The hypothesis was tested using univariate analysis of variance.

Data Presentation and Analysis

In order to achieve the objective of this study on how the prospect for promotion affects job performance of the health workers in the federal teaching hospitals in Nigeria, the following questions were addressed as follows:

Question 1: How do you rate the job performance of employees in your teaching hospital?

Table 1: Job Performance of Employees in Teaching Hospitals

teaching hospital	How do you rate the job performance of employees in your teaching hospital?					Total
	Excellent	Good	Average	Poor	Terrible	
ABUTH Zaria	6	6	6	18	4	40
	15.0%	15.0%	15.0%	45.0%	10.0%	100.0%
Aminu Kano Teaching Hospital, Kano	7	5	3	21	4	40
	17.5%	12.5%	7.5%	52.5%	10.0%	100.0%
LUTH Lagos	3	7	4	20	6	40
	7.5%	17.5%	10.0%	50.0%	15.0%	100.0%
NAUTH Nnewi	4	5	9	18	4	40
	10.0%	12.5%	22.5%	45.0%	10.0%	100.0%
OAUTH Ile-Ife	3	4	4	22	7	40
	7.5%	10.0%	10.0%	55.0%	17.5%	100.0%
UCH Ibadan	5	4	1	23	7	40
	12.5%	10.0%	2.5%	57.5%	17.5%	100.0%
UBTH Ugbowo	6	7	5	18	4	40
	15.0%	17.5%	12.5%	45.0%	10.0%	100.0%
UCTH Calabar	3	4	4	21	8	40
	7.5%	10.0%	10.0%	52.5%	20.0%	100.0%
UITH Ilorin	4	7	7	12	10	40
	10.0%	17.5%	17.5%	30.0%	25.0%	100.0%
UJTH Jos	7	8	9	10	6	40
	17.5%	20.0%	22.5%	25.0%	15.0%	100.0%
UMTH Maiduguri	5	8	7	14	6	40
	12.5%	20.0%	17.5%	35.0%	15.0%	100.0%
UNTH Enugu	9	8	5	12	6	40
	22.5%	20.0%	12.5%	30.0%	15.0%	100.0%
UPTH Port Harcourt	7	5	9	12	7	40
	17.5%	12.5%	22.5%	30.0%	17.5%	100.0%
UUTH Sokoto	5	5	5	16	9	40
	12.5%	12.5%	12.5%	40.0%	22.5%	100.0%
Total	74	83	78	237	88	560
	13.2%	14.8%	13.9%	42.3%	15.7%	100.0%
Z-value	6.675					
p-value	0.000					

Source: Filed Data, 2013

Table above shows that over 50% of the respondents on an average from each of the sampled 14 teaching hospitals in Nigeria opined that staff performance in the teaching hospitals is either poor or terrible. With a Z-value of 6.675 at $p < 0.05$, this distribution is normal, hence, acceptable for further statistical testing.

Question 2: How often are promotions based on merit?

Table 2: Frequency of Promotions based on Merit

teaching hospital	How often are promotions based on merit?					
	Always	frequently	often	seldom	never	Total
ABUTH Zaria	3	3	4	21	9	40
	7.5%	7.5%	10.0%	52.5%	22.5%	100.0%
Aminu Kano Teaching Hospital, Kano	5	4	5	20	6	40
	12.5%	10.0%	12.5%	50.0%	15.0%	100.0%
LUTH Lagos	6	9	7	14	4	40
	15.0%	22.5%	17.5%	35.0%	10.0%	100.0%
NAUTH Nnewi	5	8	7	13	7	40
	12.5%	20.0%	17.5%	32.5%	17.5%	100.0%
OAUTH Ile-Ife	7	6	7	13	7	40
	17.5%	15.0%	17.5%	32.5%	17.5%	100.0%
UCH Ibdan	6	11	6	14	3	40
	15.0%	27.5%	15.0%	35.0%	7.5%	100.0%
UBTH Ugbowo	5	5	7	17	6	40
	12.5%	12.5%	17.5%	42.5%	15.0%	100.0%
UCTH Calabar	8	5	5	14	8	40
	20.0%	12.5%	12.5%	35.0%	20.0%	100.0%
UITH Ilorin	5	6	8	13	8	40
	12.5%	15.0%	20.0%	32.5%	20.0%	100.0%
UJTH Jos	5	6	8	17	4	40
	12.5%	15.0%	20.0%	42.5%	10.0%	100.0%
UMTH Maiduguri	4	4	7	20	5	40
	10.0%	10.0%	17.5%	50.0%	12.5%	100.0%
UNTH Enugu	4	8	7	15	6	40
	10.0%	20.0%	17.5%	37.5%	15.0%	100.0%
UPTH Port Harcourt	2	3	11	22	2	40
	5.0%	7.5%	27.5%	55.0%	5.0%	100.0%
UUTH Sokoto	4	4	6	19	7	40
	10.0%	10.0%	15.0%	47.5%	17.5%	100.0%
Total	69	82	95	232	82	560
	12.3%	14.6%	17.0%	41.4%	14.6%	100.0%
Z-value	6.395					
p-value	0.000					

Source: Filed Data, 2013

Table 2 above shows that over 50% of the respondents on an average from each of the sampled 14 teaching hospitals in Nigeria, opined that staff promotions in the teaching hospitals are seldom or never based on merit. With a Z-value of 6.395 at $p < 0.05$, this distribution is normal, hence, acceptable for further statistical testing.

Question 3: How regular are promotion exercises carried out in your teaching hospital?

	How regular are promotion exercises carried out in your teaching hospital?					
teaching hospital	always	frequently	often	seldom	never	Total
ABUTH Zaria	3	6	3	22	6	40
	7.5%	15.0%	7.5%	55.0%	15.0%	100.0%
Aminu Kano Teaching Hospital, Kano	6	5	8	13	8	40
	15.0%	12.5%	20.0%	32.5%	20.0%	100.0%
LUTH Lagos	4	5	5	20	6	40
	10.0%	12.5%	12.5%	50.0%	15.0%	100.0%
NAUTH Nnewi	3	3	8	22	4	40
	7.5%	7.5%	20.0%	55.0%	10.0%	100.0%
OAUTH Ile-Ife	3	4	9	20	4	40
	7.5%	10.0%	22.5%	50.0%	10.0%	100.0%
UCH Ibdan	3	3	6	17	11	40
	7.5%	7.5%	15.0%	42.5%	27.5%	100.0%
UBTH Ugbowo	4	4	7	19	6	40
	10.0%	10.0%	17.5%	47.5%	15.0%	100.0%
UCTH Calabar	3	6	7	20	4	40
	7.5%	15.0%	17.5%	50.0%	10.0%	100.0%
UITH Ilorin	3	4	7	19	7	40
	7.5%	10.0%	17.5%	47.5%	17.5%	100.0%
UJTH Jos	4	6	8	17	5	40
	10.0%	15.0%	20.0%	42.5%	12.5%	100.0%
UMTH Maiduguri	6	7	10	14	3	40
	15.0%	17.5%	25.0%	35.0%	7.5%	100.0%
UNTH Enugu	5	7	7	17	4	40
	12.5%	17.5%	17.5%	42.5%	10.0%	100.0%
UPTH Port Harcourt	6	7	5	18	4	40
	15.0%	17.5%	12.5%	45.0%	10.0%	100.0%
UUTH Sokoto	6	5	5	19	5	40
	15.0%	12.5%	12.5%	47.5%	12.5%	100.0%
Total	59	72	95	257	77	560
	10.5%	12.9%	17.0%	45.9%	13.8%	100.0%
Z-value	6.901					
p-value	0.000					

Source: Filed Data, 2013

Table 3 above indicates that over 50% of the respondents of the sampled 14 teaching hospitals in Nigeria opined that staff promotions in the teaching hospitals are seldom or never carried out regularly. With a Z-value of 6.901 at $p < 0.05$, this distribution is normal, hence, acceptable for further statistical testing.

Hypothesis
Prospect for promotion does not significantly affect job performance in the Federal Teaching Hospitals in Nigeria

The data presented in the above tables, are tested using univariate analysis of variance. The results are presented and discussed below.
Univariate Analysis of Variance

Between-Subjects Factors

		Value Label	N
how often are promotions based on merit?	1.00	always	69
	2.00	frequently	82
	3.00	Often	95
	4.00	seldom	232
	5.00	Never	82
how regular are promotion exercises carried out in your teaching hospital?	1.00	always	59
	2.00	frequently	72
	3.00	Often	95
	4.00	seldom	257
	5.00	Never	77

Descriptive Statistics

Dependent Variable:how do you rate the job performance of employees in your teaching hospital?

how often are promotions based on merit? (PROM)	how regular are promotion exercises carried out in your teaching hospital? (PRO)	Mean	Std. Deviation	N
always	Always	1.4419	.79589	43
	Frequently	1.7143	.56061	21
	Seldom	4.4000	.54772	5
	Total	1.7391	1.03827	69
frequently	Always	1.3000	.67495	10
	Frequently	1.8571	.59094	28
	Often	2.3462	.93562	26
	Seldom	3.7692	1.16575	13
	Never	4.2000	.44721	5
	Total	2.3902	1.18380	82
often	Always	1.0000	.	1
	Frequently	1.9375	.44253	16
	Often	2.8649	1.25083	37
	Seldom	3.8788	.64988	33
	Never	4.2500	.46291	8
	Total	3.1579	1.18784	95
seldom	Always	3.0000	1.63299	4
	Frequently	3.8571	1.06904	7
	Often	3.3846	.80384	26
	Seldom	4.0063	.77785	158
	Never	4.3243	.57995	37
	Total	3.9655	.82105	232
never	Always	5.0000	.	1
	Often	4.1667	.75277	6
	Seldom	3.9375	.90873	48
	Never	3.9630	.70610	27
	Total	3.9756	.83112	82
Total	Always	1.5763	1.02054	59
	Frequently	2.0278	.85534	72
	Often	2.9474	1.13333	95
	Seldom	3.9728	.80722	257
	Never	4.1818	.62254	77
	Total	3.3250	1.27509	560

Tests of Between-Subjects Effects

Dependent Variable:how do you rate the job performance of employees in your teaching hospital?

Source		Type III Sum of Squares	df	Mean Square	F	Sig.
Intercept	Hypothesis	1527.182	1	1527.182	70.168	.000
	Error	146.763	6.743	21.765[a]		
Prom	Hypothesis	43.016	4	10.754	5.359	.005
	Error	38.214	19.044	2.007[b]		
Pro	Hypothesis	83.788	4	20.947	7.942	.001
	Error	40.330	15.290	2.638[c]		
prom * pro	Hypothesis	46.020	13	3.540	5.386	.000
	Error	353.610	538	.657[d]		

a. .924 MS(prom) + .643 MS(pro) - .441 MS(prom * pro) - .126 MS(Error)

b. .468 MS(prom * pro) + .532 MS(Error)

c. .687 MS(prom * pro) + .313 MS(Error)

d. MS(Error)

Expected Mean Squares[a,b]

Source	Variance Component				
	Var(prom)	Var(pro)	Var(prom * pro)	Var(Error)	Quadratic Term
Intercept	29.666	29.626	6.975	1.000	Intercept
prom	32.116	.000	7.534	1.000	
pro	.000	46.054	11.057	1.000	
prom * pro	.000	.000	16.095	1.000	
Error	.000	.000	.000	1.000	

a. For each source, the expected mean square equals the sum of the coefficients in the cells times the variance components, plus a quadratic term involving effects in the Quadratic Term cell.

b. Expected Mean Squares are based on the Type III Sums of Squares.

Test results on the tests of between-subject effects presents the model for the relationship between staff performance and the other variables and the relationship between staff performance and each of the variables separately. With F-values at $p < 0.05$, it is revealed that the model relationships are significant. Hence, the null hypothesis is rejected and the alternative hypothesis accepted accordingly. Therefore, Prospect for promotion does not significantly affect job performance in the Federal Teaching Hospitals in Nigeria.

Discussion of the Major Findings

The finding of the study indicates that a health worker is motivated to a better performance in the federal teaching hospitals in Nigeria, when he perceives that there is an intimate relationship between his effort and promotion. Therefore, in discussing this link, much would be drawn from operant conditioning theory developed by psychologist, B. F. Skinner, which posits that people learn to perform behaviours that lead to desired consequences and learn not to perform behaviours that lead to undesired consequence. The descriptive statistics of this analysis reveals that the officials at the low ranks in the federal teaching hospitals in Nigeria were generally apathetic, as they sauntered up and down the corridors and office promises, engaged in idle tales and sleep, bending their heads over their work desks. The typists and clerks would feigned illness and disappeared from the office would to the explanation of this not be found in idleness due to low motivation of staff arising from poor manpower planning and poor manning in the federal teaching hospitals in Nigeria. This would agreed

with Skinner (1969) that an able worker will not be motivated if he does not perceive that there is an intimate relationship between his effort and his reward, and/or if he does not desire the reward emanating from the effort, and/or if there is inadequate infrastructural support. It is therefore, the cardinal finding of this study that the major cause of the low motivation of the health workers in the federal teaching hospitals in Nigeria is that the health worker does not perceive his work effort to be decisively instrumental in the attainment of the promotion rewards of work. The result of F-values at $p < 0.05$ shows that instrumentality is the missing link in the motivational efforts in the federal teaching hospitals in Nigeria. Take this reward of promotion again for analysis. On its own, an intense desire for promotion (a very important reward) will not motivate any worker to greater effort. The major determinant of his motivation is his generalized experience (Skinner, 1969). He will ask questions like, "Did hard work ever earn me promotion in the past?". Is it likely to earn me promotion now or in the future?" Have I been hearing from those who are working here that hard work earns people advancement?" If the answer is yes, he will tend to be motivated. If no, he will not be motivated. As skinner propounded in his Theory of Operant conditioning, behavior that is rewarded tends to be repeated while those that are not tend to be extinguished as table reveals the responses in the study.

A cornerstone of the Skinner Model is that performance is a multiplicative of motivation experience and ability. Motivation in turn varies with the attractiveness of the outcomes, valence, and the perceived instrumentality of effort towards the achievement of outcomes. Therefore, given adequate employee ability and infrastructural support, it follows that for the effort to call forth desired reward: the following four conditions must be met:

(i) The federal teaching hospitals in Nigeria must grant promotion rewards desired by the health worker.
(ii) The health worker in the federal teaching hospitals in Nigeria must perceive that the desired promotion rewards can be obtained only through the extension go greater effort on his part.
(iii) The promotion reward must be achievable, and as immediately as possible and;
(iv) The health worker must be mentally and physically able to strive for the promotion reward.

Now, the first, third, and fourth conditions are sometimes met in the federal teaching hospitals in Nigeria as shown in the analysis of table 1 and 2. But the second condition is very controversial indeed. Hence, does the Nigerian health work in the federal teaching hospitals in Nigeria ever perceive that he can only attain a promotion (the desired outcome) through the exaction of greater effort? The answer to this question is decisive as shown in tables 1, 2 and 3 of the study analysis

The findings of this study therefore suggest that the health worker in the federal teaching hospital in Nigeria does not perceive that his promotion and advancements in the job depends much on how hard he works. The health workers responses in the study believe that people are promoted "mostly for being health managers' favourites" while only in significant number shows that promotion can be based exclusively on skill and effort. If this belief of the health worker is fed into the operant conditioning Theory which states "if a worker sees high productivity as a path leading to the attainment of one or more of his personal goals, he will tend to be a high producer, conversely if he sees low productivity as a path to the achievement of his goal, he will tend to be a low producer", then it follows that the Nigerian health worker in the federal teaching hospitals in Nigeria would have bad attitude towards work. He would be ill-motivated. To be otherwise is to be irrational. So instead of working very hard, the health worker follows the rational path, the road which he believes led others to their promotions – he assuage fate and rituals by offering sacrifices, wearing success charms, joining secret societies, and social clubs. He hovers around his boss, and attempt to work under his "townsman". And the time meant for work is spent in lobbying and nubbin 8 for favours

Conclusion and Recommendations

It is stressed that a health worker in the federal teaching hospitals in Nigeria will not be motivated to work hard unless he perceives that hard work in the organization is instrumental to his promotion reward; also that Nigerian health worker in the federal teaching hospital do not perceive that promotion and advancement in their work dependent much on their hard work. The problem with rewarding job performance in Nigeria is not necessarily that of measurement as is often claimed; it is rather the cost of parting with illicit gains of operating a system not based on fairness. Nepotism, greed and corruption have thus broken the link between effort and promotion. The implications are far-reaching. In the first place, a most important prerequisite of motivating health workers in Nigerian federal teaching hospitals is fairness. Any management practice, like nepotism and bribery that negates fairness must be abandoned if the health workers are to be adequately motivated for good job performance. It follows that the hospital managers who are nopatic and corrupt are the major causes of the bad altitude of the

health workers in the federal teaching hospital in Nigeria. Leadership is closely related to motivation. Each constitutes one side of the same coin. Good leadership is the engine, motivation the trailer. A health workforce cannot be truly motivated unless there is good leadership. One of the most important results of good leadership is therefore adequate motivation of the members. This suggests that if the health workers are badly motivated, then there is a tendency that the health managers are not good. The assumption usually made as a matter of course by leaders, management consultants and teachers in Nigeria, that all Nigerian health managers have an advent desire to improve their management styles may not be very realistic. One striking irony in the reward distribution pattern in the federal teaching hospitals in Nigeria is that given the right circumstances, inefficiency confers power on, and enriches well-placed inefficient officials, ie, that an action which penalizes a system may be beneficial to its subsystem. Sooner or later, these officials discover that it is in their best interest to institutionalize an "Efficient Inefficiency in their organizations.

Such health managers find themselves unwilling to reward the effort of their subordinates. And when there is indiscipline, they cannot bring the errant subordinate back to the part of rectitude because of the following reasons:

i. The health manager himself is also guilty and is benefiting from the inefficiency,
ii. Being guilty, he is more sympathetic towards the guilty,
iii. He fears to act, lest his secrets are revealed
iv. The boss does not have confidence in the disciplinary process,
v. The errant subordinate may be the front man of the boss
vi. The boss is aware that the society has almost settled for lower standard performance. Health managers should therefore not pretend that they are motivating their subordinates by giving them pep talks only. Setting a good example is pivotal to health workforce motivation. The health management board who are still searching for ways of motivating the health workers, while ignoring the role of prospect for promotion is not getting it right.

A health worker is motivated to greater job performance in the federal teaching hospitals in Nigeria, when he perceives that there is an intimate relationship between his efforts and promotion. In health workforce motivation, as in many other aspects of life, experience is the best teacher. As Skinner propounded in his theory of operant conditioning, behavior that is rewarded tends to be repeated while those that are not, tend to be extinguished. The health workers in the federal teaching hospitals in Nigeria should no longer that other Nigerians who were promoted, did not earn the promotion by working hard; they could be shown to believe that by good job performance, they would earn promotion.

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