

# International Labor Migration of Health Care Workers in Japan Under the Economic Partnership Agreement: The Case of Indonesian Nurses

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**Keywords:** Economic Partnership Agreement (EPA), International labour migration, Health care workers, Falling birth-rate and depopulation.

**Abstract:** With falling birth-rate and depopulation accelerating in Japan, the country relies on international labour in various fields. The Japanese government began to receive Indonesian (2008), Filipino (2009), Vietnamese (2014) nurses, and health care workers under the Economic Partnership Agreement (EPA). Meanwhile, many of these candidates cannot pass the national exam and go back to their countries after three years, although they entered Japan as a solution of chronic labour shortage in health care fields. This research demonstrates that there is mismatch between Japanese and Indonesian governmental policies that leads to a consequent loss of opportunities for the nurses. This paper analyses the interviews with two nurses who passed the national examination and reside in Japan and six ex-candidate Indonesian nurses who returned to their country as well as, an interview at the Japan International Corporation of Welfare Services (JICWELS) and *Badan Nasional Penempatan dan Perlindungan Tenaga Kerja Indonesia (BNP2TKI)*. It examines what institutional issues exist under the current Economic Partnership Agreement (EPA) system. The collected voices and data reflect the actual situation for both receiver and sender countries to understand both countries' policy mismatch. As the EPA program and research are still ongoing, we also aimed to find out more on the suitable environment for international labour migrations to enter Japan from the perspective of the EPA sustainability framework.

## 1 INTRODUCTION

In this paper we will conduct an analysis focusing on the foreign nurses coming to Japan, whom Japan started to accept in 2008 through the Economic Partnership Agreement (EPA).

This year, 2017, marks the 10th year since Japan started to accept nurses in accordance with the EPA. For our analysis, we focus on Indonesian nurses who, in accordance with the EPA, come to Japan. There are three reasons for selecting Indonesian nurses. First, Indonesia is the first country that started sending nurses to Japan in 2008. Second, the author speaks Indonesian (*Bahasa Indonesia*). Third, we conducted an interview in Indonesia on a topic that was not covered by previous studies.

In previous studies, the nurses who came to Japan in 2008 were called the "first-batch" and those who came in 2009 were called the "second-batch" (Kawaguchi, Hirano & Ohno 2009, 2010c). We use

the same terminology in this article. At present, Japan accepts foreign nurses based on the EPAs from three countries: Indonesia, Philippines, and Vietnam.

Ogawa *et al.* (2010) argue that 'nurse and care worker candidates who come to Japan through the EPAs are one of the solutions to labour shortage in the field of nursing and care in Japan'. The survey conducted by above mentioned authors in 280 hospitals, shows that 51.8% of the hospitals responded: "we are well aware of it" to the question "Are you aware that Japan is trying to introduce foreign nurse and care worker candidates based on EPAs?" On the other hand, regarding reasons for not willing to accept candidates, the answer "there are concerns regarding their ability to communicate with patients" was the most common with 203 hospitals, while 142 hospitals responded: "It will increase the workload of the staff in charge of education, and

there are concerns about Japanese language proficiency.

Previous studies have shown that medical institutions are aware of the EPA and that there is a strong interest towards foreign nurses. Also, it is evident that hospitals that wish to accept foreign nurses and care worker candidates have expectations for securing labour power personnel: "...as part of an international contribution and exchange... [and] to resolve labour shortage even if only slightly," and "we expect them to add to the workforce as nurses in the future." At the same time, the following responses were given by those who were reluctant to accept foreign nurses: "There are concerns with regard to their ability to communicate with the patients" and "It will increase the workload of the staff in charge of training nurses, there are concerns about Japanese language proficiency." These hospitals indicated their concern for the Japanese language proficiency of the candidates and for looking after the candidates from acceptance until they pass the national examination. It appears that they are aiming to resolve the shortage of human resources on the job site but at the same time they are concerned that the burden on those already working may increase by accepting the foreign candidates (Ogawa *et al.* 2009, 2010).

Previous studies conducted a survey of hospitals but they did not include interviews that involved nurses who were working in the field. Hence, in this study we discuss the opinion of nurses in response to the limitations of the previous studies.

We would like to describe the related organizations of Japan and Indonesia to better understand the agreement between these two nations. In Japan, accepting country, the Japan International Corporation of Welfare Services (JICWELS) is responsible for accepting nurses. In Indonesia, the sending country, *Badan Nasional Penempatan dan Perlindungan Tenaga Kerja Indonesia (BNPPTKI)* is responsible for sending nurses to Japan.

The aim of this paper is to provide an empirical evidence on the implementation of the EPA. We believe that this study can trigger opportunities for promoting new immigration policy. Moreover, new ways of approaching the issue of immigration in the field of nursing and care taking based on the implementation of the EPA scheme are being observed.

In addition, in the aspect of international relations, there is a possibility that effective implementation of the EPA system can become one of the conditions for acceptance of foreign workers

to Japan. Therefore, the EPA can exceed the level of being a means for solving a problem of lack of working power and affect the immigration policy of Japan.

To understand the implementation process of the EPA, the study addresses the following research questions: Does the current state of foreign nurses coming to Japan within the framework of the EPA reflect an effective functioning of the policies? Are there any issues that can be resolved regarding foreign nurses?

Our research findings demonstrate that there is an impact on nurses' economic wellbeing in Indonesia. The significance of the present study is that it indicates how the movement of human resources between nations may act as a framework that plays the role of resolving the global problem of aging societies with low birth-rate. We attempt to bring to light the possibility that there may be implications with respect to international relations.

The national examination results of the nurses who come to Japan through the EPA are reported in Japan each year. We believe a statistical data on the movement of nurses may reveal problems faced by the Indonesian nurses as well as problems faced by the accepting hospitals, which arise from accepting them. The number of nurses who pass the examination is small and the overall passing rate is low (Ministry of Health, Labour and Welfare 2017).

We argue—that foreign nurses and care worker candidates will become expert professionals of considerable importance in the future for the countries faced by an aging society with low birthrate, not only in Japan but in an international community. Hence, a careful review of the process of the acceptance of nurses and care worker candidates through the EPA which is currently taking place in Japan is likely to become a model case for an international community.

## 2 METHODS

The research method that was employed is interviewing different stakeholders. We conducted analysis based on interviews with two Indonesian nurses residing in Japan and six ex-candidates who returned to Indonesia. The interviews conducted with nurses were aimed at discussing the EPA program. Numbers are used to keep the names of participants anonymous (e.g., Nurse 1, and Nurse 2). (TABLE 1)

In addition, interviews were conducted with the accepting hospitals directors of nursing where nurses

practiced and passed the national examination in Japan. We were able to interview the directors of nursing departments in two hospitals in Japan about: (1) the circumstances leading to acceptance; (2) support system for nurses; (3) difficulties that emerged after accepting the nurses.

Two hospitals in Japan were selected for this study. The two hospitals that interviews were conducted are among of few hospitals that produced successful candidates who passed the Japanese national examination (Ogawa *et al.* 2009, 2010).

Following the research ethics, we explained the purpose of the interview and all of the participants signed the consent form.

In Indonesia, the author conducted an interview in the government office of *Badan Nasional Penempatan dan Perlindungan Tenaga Kerja Indonesia (BNPPTKI)* in Jakarta as a first Japanese intern. The Director of *Badan Nasional Penempatan dan Perlindungan Tenaga Kerja Indonesia (BNPPTKI)* was interviewed about: (1) the EPA program; (2) existing implementation problems; (3) future plans regarding the implementation of the EPA program. In addition, six ex-EPA nurses from the second-batch who came to Japan were interviewed. The interviews were conducted in Indonesian language. (TABLE 2)

	Nurse 1	Nurse 2
Hospital type	General	General
Location	Osaka	Yokohama
Age	29	34
Year of passing the national examination	2012	2011
Nursing career in Indonesia	3 years	5 years
Nursing career in Japan	5 years	6 years
Religion	Christian	Muslim
Year of arrival to Japan	2009	2008
Total number of candidates in the hospital	2	1
Gender	Female	Female

Note: Data was collected and developed by author

Figure 1: Interview participants (nurses) in Japan

	Nurse 3	Nurse 4	Nurse 5	Nurse 6	Nurse 7	Nurse 8
Hospital type	General	Rehabilitati on Hospital	General	General	General	General
Location	Aichi	Osaka	Fukuoka	Okayama	Kumamoto	Yokohama
Age	30	23	25	25	27	35
Year of passing the national examination	Fail (Try again 2014)	Fail	Fail	Fail	Fail	Fail
Nursing career in Indonesia	7 years	1 years	3 years	3 years	6 years	4 years
Nursing career in Japan	3 years	4 years	3 years	3 years	3 years	6 months
Religion	Christian	Christian	Christian	Christian	Muslim	Muslim
Year of arrival to Japan	2009	2009	2009	2009	2009	2009
Total number of candidates in the hospital	1	1	1	1	1	1
Gender	Female	Female	Female	Female	Female	Female

Note: Data was collected and developed by author

Figure 2: Interview participants (nurses) in Indonesia.

### 3 RESULTS AND DISCUSSION

#### 3.1 Survey in Japan: Directors of Nursing Departments and Nurses

First, we report the points of view of the directors of nursing departments of the two hospitals where we conducted interviews and collected data regarding the shortage of nurses in Japan. At the hospital, which agreed to cooperate with the survey in August 2013 there was a shortage of doctors and nurses and challenges of hiring nurses.

Director of the nursing department in the hospital pointed out that there is a shortage of doctors and nurses. “Hiring nurses on a large scale is taking place mainly at large hospitals in urban areas and there are concerns that local hospitals may suffer”.

It is the patients and their families who will face problems because of shortage of doctors and nurses. The more specialized the hospital, the more important the number of doctors and nurses for the development of a healthy hospital environment. The interviews revealed the possibility that the shortage of nurses may directly affect the revenue of the hospitals.

The hospital, which agreed to cooperate with us in December 2013 stated: “The Ministry of Health,

Labour and Welfare says ‘one nurse should take care of seven patients’ but, in reality, it is not easy to do this under the current circumstances. There are 314 beds in our hospital and there are about 100 nurses that most of them work on a full-time basis.” To the question of difficulties faced by accepting foreign nurses, the director of nursing department provided the following answer: “We encountered no problems by accepting foreign nurses. The nurse who was hired had good nursing skills, good communication skills and she was also a hard-working person. Therefore, we cooperate and support each other. We tried hard and helped her to pass the national examination.”

Data from the Ministry of Health, Labour and Welfare and the Japan Nursing Association indicates that, from the viewpoint of the international community, the sufficient number of nurses are not secured for one patient in Japan and there are concerns about the lack of nurses. They emphasise that “The greater the number of nurses per hospital bed, which means 7 [patient] to 1 [nurse], the better the patient safety and it can provide with the highest quality.” Based on the analysis of the interviews and statistical data, we conclude that shortage of nurses is a social problem that requires much debate. The Japanese government sees it as an “urgent issue” and it has been brought into question in the National Assembly.

In view of the current situation in Japan, we believe that foreign nurses are important human resource that should be treated in the same way as Japanese nurses, and we also think that it should be a requirement for them, as it is for Japanese nurses, to pass the national examination since they are dealing with people’s lives. In reality, they strive to pass the national examination while working at host hospitals.

According to the rules, the nurses are required to pass the examination within three years after coming to Japan and if they fail, they need to return to their home country. Based on Japan-Indonesia Economic Partnership Agreement Foreign Nursing, “we have been accepting candidates for nurse/nursing care worker candidates, and a cumulative total of 1,562 people have entered the country. Acceptance from these three countries is not done as a response to the labor shortage in the field of nursing and nursing care but rather from the viewpoint of strengthening cooperation of economic activities as a result of negotiations based on a strong request from the partner country.”

The interviews and statistical data from the hospitals indicate that nurses are expected to have advanced “expertise.” It is required that they should have high levels of expertise with an increased

workload which becomes the cause of failure in national examination. The data indicates it is important to secure human resources in the nursing field which, is current and future issue of Japan. (The House of Representative, Japan 2006).

We were able to understand the actual situation of the shortage of nurses in Japan, however, there are also limitations that the EPA has. Specifically, the official view of the Ministry of Health, Labour and Welfare is that with regard to the acceptance of foreign nurses, nurse candidates who come to Japan based on the EPA are not a solution to the shortage of workers. We assume the government and those in the actual field may have different outlooks concerning accepting nurses in Japan.

Hospitals that accept nurses are expected to be responsible for providing training for nurses with the purpose of preparing them for acquiring national qualifications. The interviews led to new questions about whether the burden on the accepting hospitals would increase or leaving hospitals unable to accept nurses in the future, if the purpose of accepting nurses were not to resolve labor shortage.

It will have a great impact on the international community if Japan constructs a framework that will allow the nurses coming to Japan within the framework of EPAs to settle down in Japan as members of the Japanese society instead of having a status of foreign workers. The framework of the current EPA has limitations in terms of people-to-people exchange, but the fact that the Ministry of Health, Labour and Welfare as well as the Ministry of Foreign Affairs have set aside a budget to implement the EPA (Ministry of Health, Labour and Welfare 2013) suggests its importance as a state policy.

Interviews of nurses who are influenced by the policies between nations cannot be overlooked. We interviewed two Indonesian nurses who agreed to cooperate with the study. Both passed the challenging national examination. Following is a chronological analysis of the interviews.

The interviews were conducted in the hospital. We interviewed a “second-batch” Indonesian nurse (see Table 1) who came to Japan in 2009 and the director of nursing department of the same hospital separately. The director of nursing department mentioned: “It’s not difficult to accept (the nurses)” and “nurses are faced with the challenge of passing national examination.”

The nurses were asked the following questions:  
(1) Are there any discrepancies between the treatment you receive at the accepting hospital and

what was explained to you during the briefing at the time of departure from Indonesia?

(2) Did the hospital support you until you passed?

(3) Are there any difficulties that you face at the hospital in Japan?

The common difficulty to both the nurse and the director of nursing department, as their responses revealed, was that the nurse was unable to speak Japanese at the early stages of arrival in Japan. However, the director of nursing department responded that “although there were problems with the language, no complaints were received from the patients as there are no significant differences in medical skills between Japan and Indonesia.” Also, the director stated that “the hospital had also hoped the nurse would pass the national examination and that it was not only for the purpose of human resource development but also for resolving the problem of shortage in staff.”

The response from the director of nursing department in the interview indicated that the nurse had a positive effect on other Japanese staff in the hospital by showing them that she was making an effort. Although she had difficulty understanding Japanese, the hospital created a good working and learning environment for her. To answer the questions on hospital support until national examination and difficulties that she faced at work in Japan, the nurse mentioned that the hospital used a unique technique to help her learn Japanese and obtain national qualification. For example, an acquaintance of the director of nursing department (a retired nurse) taught her medical terms three times a week.

The hospital encouraged the nurse to set aside time for studying in the afternoon, while working in the morning, and the Administration Division of the hospital properly handled and explained the Japanese system (income tax, pension system, etc.) regarding her salary. This led to trust and also resulted in her passing the national examination despite the language barrier and life obstacles, which she overcame with support of the hospital.

Finally, with respect to the question on differences between the treatment received at the hosting hospital and what was told prior to coming to Japan the nurse mentioned her salary. Prior to departure, she was told at the briefing that her salary would be around 200 thousand yen, which was guaranteed in Japan. However, the actual amount she received was different as dormitory fees and taxes were deducted, but she said she found it acceptable because, as mentioned above, the Administration Division explained about the

Japanese tax system and miscellaneous fees to her in detail.

At the same time, data revealed that among nurses who came to Japan in the second-batch, there were colleagues of the nurses who returned home before finishing their contracts in Japan. The reason was the hospital did not set aside time for them to study, the salary was different from what they had been initially told before departure, or they had been assigned to a local region where daily conversation was in a dialect, making it difficult to learn Japanese. We found that the difference of what was told at the briefing and the reality was the problem.

Our next step, was to conduct individual interviews in December 2013 with a nurse who came to Japan in 2008 in the “first-batch” and the director of nursing department.

The nurse indicated that the Japanese national examination was an issue in her answer to the question on discrepancies between the treatment she received at the accepting hospital and what was explained to her during the briefing at the time of departure from Indonesia. She said that during the briefing in Indonesia, they were told that they would be able to be involved in medical care as a nurse upon arriving in Japan and she did not know she needs to take the national examination. Both the nurse and the accepting hospital were confused about this and we were able to confirm that there was in fact, a miscommunication in Indonesia and Japan. We realized that this is an important issue that has the possibility of developing into a problem between states, and movement of people that the international community was concerned about, since Japan started accepting foreign nurses in 2008.

Regarding the support system of this hospital, the work shift system was designed so that the nurse could work in the morning and studied in the afternoon. In addition, prior to the national examination, the nurse was sent to Tokyo Academy (vocational school) to attend a national examination intensive course. In this way, the nurse herself and the hospital worked together to pass the national examination. The nurse told us that, although the work is demanding, as she works in the field of critical care medicine, she finds it very rewarding and she cannot imagine returning home to Indonesia.

Also, she has been wearing a scarf to cover her head, which is worn by Muslim women, since she arrived in Japan and the hospital also respected her wishes. The hospital stated that no complaints had been received from the patients thus far, and there were no concerns about religion as the time and place for prayer had been set aside within the

hospital and she made sure her professional responsibilities were not affected.

It became clear that both the hospitals and the nurses had undergone various forms of trial and error at the two hospitals with respect to acceptance. We believe information was not shared fully between the countries of Japan and Indonesia. As a review of the interviews, we conclude that, first, the explanation that was given to the first and second-batches when coming to Japan was neither clear nor sufficient.

Second, the way the nurses are treated differs depending on the accepting hospital. The present survey showed that Indonesian nurses are a valuable workforce and the nurses themselves find the nursing job rewarding. However, it seems that the above-mentioned problems suggest the EPA framework is not fully functioning yet.

### 3.2 Director of BNPPTKI and Ex-Candidates

The interview results by *Badan Nasional Penempatan dan Perlindungan Tenaga Kerja Indonesia (BNPPTKI)*, which have not yet been disclosed in Japan, are as follows. First, the director and the dispatching organization, are concurrent in making efforts to ensure that as many candidates as possible pass the national examination. To the question "What is the problem?" we received the answer that there was a miscommunication during dispatching the first- and second-batch in regard to passing the national examination in Japan.

The interviews revealed that various problems had arisen during three years after 2008 due to miscommunication between Japan and Indonesia.

Second, to reflect on the EPA program, the director stated that, "We would like two candidates to be accepted in one hospital," and "BNPPTKI cannot request the system of acceptance of the hospital. It is responsibility of Japanese government and candidates".

We will carefully examine this problem in the future based on the actual interview results of two hospitals. Third, the Indonesian government still sees many prospects with respect to the policies of the EPA. To reflect on the future plan about the EPA program, the answer was: "We are preparing to increase the briefing and testing venues in Indonesia to make it easier for more candidates to apply to the EPA program." It is desirable for both Japan and Indonesia to continue their collaboration.

Next, we conducted a follow-up interview with ex-nurse candidates who came to Japan in the

second-batch but returned home without passing the national examination. As we have already mentioned, careful examination is required on the issue of whether there is a difference in acceptance among hospitals. We hope to shed light on this issue faced by those working in the field, based on the interviews with the ex-nurse candidates who returned home.

The following paragraph demonstrates the results of the interviews of six ex-candidates, which were conducted in August 2013.

First, the interviews revealed that there were numerous comments regarding the accepting hospitals. The most common comment was that they would have passed the national examination if there had been no difference in treatment among the hospitals.

According to interviews with nurses, "The hospital's treatment had caused me to become unmotivated to pass the national examination. I was only able to work in the capacity of a nurse assistant, which did not lead to the improvement of my skills. I wanted to pass and continue working as a nurse in Japan." (Nurse 8) "I do not wish to be involved in medical care even if I go back because people will consider the three years in Japan as a period of absence during which I was not involved in medical care." (Nurse 3, Nurse 6 & Nurse 7). Lastly, "I would like to try again if I had the chance" (Nurse 3, Nurse 5 Nurse 6 Nurse 7 & Nurse 8). The reasons were that the wages of nurses are low in Indonesia. In future studies we would like to investigate whether differences in nurses preparation to national examination are caused by hospitals or any other factors by exploring the following questions:

- (1) What are the differences in support of work and preparation routine to the challenging national examination at the hospital?
- (2) What are the issues of acceptance system in the hospital?
- (3) How do nurses get a job in Indonesia after they return to Indonesia?

Based on the follow-up interview with those who returned home, we believe in the future, it is necessary to carefully observe, the circumstances of the issue regarding the treatment and system that the candidates themselves are unable to overcome even if they wished to work in Japan.

## 4 CONCLUSION

First, regarding the cause of conflicting information in the differences in policies of relevant authorities

on the acceptance and dispatch, the interviews in the Japan International Corporation of Welfare Services showed that its way of thinking is not different from that of the Ministry of Health, Labour and Welfare. For example, they do not see the nurses come to Japan from Indonesia with the aim of supporting the labour shortage.

On the other hand, the interviews of the Indonesian Agency for Overseas Placement and Protection revealed that Indonesia, the dispatching country, views their activities as a contribution to the resolution of labour shortage. This may be one reason for the miscommunication between Japan and Indonesia.

Second, the interviews with the first and second-batch, and the candidates that returned home revealed that there is a difference in the acceptance system from hospital to hospital. However, case studies of hospitals that accepted candidates who failed the national examination are not conducted, yet. This topic remains to be explored in the future.

Both the candidates and the accepting hospitals indicate language barrier as a factor to explain the low examination pass rate. We would like to point out that improvement in Japanese language ability depends on how much time the accepting hospital sets aside for work and study.

However, the level of the examination must not be lowered from an ethical viewpoint, as it is an occupation that concerns human life.

Third, when there is a difference regarding the EPA between the signing countries, there is a possibility that it may develop into problems involving the candidates as well as international relations. We conclude, based on interviews that it is likely to develop into international relations. We consider that, although Japan currently has a good relationship with Indonesia, new demands arise between the governments.

Our research showed that the EPA is aimed at mutually strengthening economic collaboration between nations and it is a considerably important agreement for the relation between the Association of Southeast Asian Nations (ASEAN) and Japan.

Analysis of the current situation revealed that the EPA framework, accepting foreign nurses in aging society with declining birth-rate is significant as this means nurses' cross-border movement and their contribution to global community. It is important that policies concerning movement of people are made with sufficient mutual decision-making by the nations.

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