

# **The Concerns and Motivations of Indonesian Nurses and Care Workers in Japan in the Frame of IJ-EPA (Indonesia-Japan Economic Partnership Agreement)**

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## **Abstract**

This study focuses on the factors that influence Indonesian nurses and care workers who migrate to Japan, and their motivations for working in Japan in the frame of Indonesia-Japan Economic Partnership Agreement. This research uses quantitative methods and interviews. From the results of questionnaire analysis and interviews, it can be concluded that the factors which influenced Indonesian nurses and care workers to migrate to Japan are basically economic, namely the chance to get a better economic life. The motivations of nurses and care workers working in Japan are further related to 1) economic security, 2) esteem and 3) self actualization.

*Key Words;* Indonesia-Japan Economic Partnership Agreement IJ-EPA, migration, working motivation, nurse, care worker

## **I. Introduction**

The Economic Partnership Agreement (EPA) is a bilateral or multilateral agreement among states to eliminate customs and domestic regulations other than import/export regulations, in order to harmonize economic systems, and to facilitate the free movement of natural persons, goods, and capital within a region (METI 2005, p. 2). The Indonesia-Japan Economic partnership agreement (IJ-EPA) was signed on August 20, 2007 and was effective on July 2008. Indonesia had a quota to send 600 care workers and 400 nurses to Japan in two years in the frame of the IJ-EPA. The sending of Indonesian nurses and care workers to Japan had been facilitated by the Japan International Corporation of Welfare Service (JICWELS) and the National Agency for the Placement and Protection of Indonesian Migrant Workers (BNP2TKI).

Even though the population of Japan is smaller than the population of Indonesia, the number of nurses in Japan per 100,000 of the population is almost 5 times greater than in Indonesia (Table 1). This is because the increase in the number of elderly that need nursing care in Japan. Based on the data from the Ministry of Health, Labor and Welfare Japan 厚生労働省, in 2005 the numbers of elderly that needed nursing care were 4.17 million people or about 16.6% of the total population of elderly in Japan. In 2010, Japan needs a total of 1,406,400 nurses, and it has presently a shortfall of 15,900 nurses (Matsuno 2008). Based on the estimation of the Japan Aging Research Center, the proportion of elderly people will become 25.2% of the total population in 2013, and this means that the need for nurses in

Japan will increase in the future.

Table 1. Number of Medical Manpower in Indonesia and Japan (2006)

No.	Medical manpower	Population in Indonesia per 100,000	Population in Japan per 100,000
1	Doctor	19.93	40
2	Nurse	137.87	635.5
3	Maternity nurse	35.4	100

Source: Health Department of Indonesia 2008, p. 111 and Okushima 2010, p. 1

The increasing numbers of elderly has also raised the need for care workers in Japan. Based on the estimation by the Ministry of Health, Labor and Welfare, from the year 2000 until the year 2006 the number of care workers in Japan had increased from 550,000 to 1,170,000, and it has been estimated that, in 2014, the need for care workers in Japan will become 1,400,000 to 1,600,000 people (Fuyuno 2007). Besides that, the increasing Japanese need for nurses and care workers is also caused by a large number of resignations in the profession.

The conditions in Japan really contrast with Indonesia, where the demand (need) for nurses is smaller than the supply, so that Indonesia has a surplus number of nurses. As a result, the sending of Indonesia nurses and care workers to Japan in the frame of IJ-EPA is also a good chance to solve Indonesia's problem of surplus.

Table 2. Number of Indonesia Medical Manpower in 2007 (Need and Graduated)

No.	Medical manpower	Need (demand)	Graduated (supply)
1	Doctor specialist	2,258	615
2	Doctor	6,765	7,576
3	Dentist	3,640	1,116
4	Nurse	18,731	21,589
5	Maternity nurse	33,677	5,582

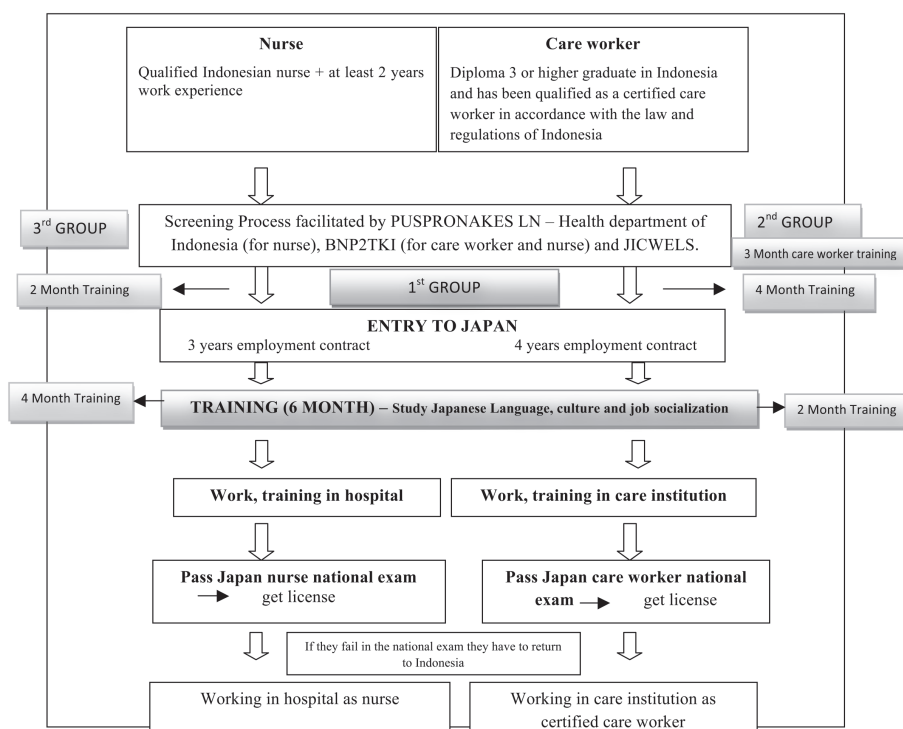
Source: Health Department of Indonesia 2007, p. 40.

Annex 10 part 1 section 6 of the draft of IJ-EPA implies facilitating the dispatch of Indonesian nurses and care workers to Japan; here the Japanese government refers to qualifications for Indonesians who want to work in Japan as nurses or care workers. First, Indonesians who want to work as nurse or care worker in Japan are required to possess a diploma or higher degree in Indonesia. Secondly, nurses must have nursing qualification in Indonesia, and at least two years of work experience. Nurses must be certified nurses and care workers must be certified care workers in accordance with Indonesia law and regulations. Lastly, Indonesian nurse candidates (assistants) within 3 years of their employment contract have to pass the national board exam to become a certified nurse in Japan, and for Indonesian care workers within 4 years of their employment contract also have to pass the national board exam to become a certified care worker in Japan. If they can not pass this national exam before their employment contract finishes, they are required to return to Indonesia.

When the author conducted this research, the third group (batch) of Indonesian nurses and care workers was about to be sent to Japan. The first group of Indonesian nurses and care workers came to Japan in August 2008 (104 nurses and 104 care workers) and the second group came in November 2009 (173 nurses and 192 care workers). They must take six months Japanese language training, before starting

training and working in Japan as nurse candidates (assistant) or care worker candidates while, at the same time, they try to pass the nurse or care worker national exams in Japan. Only those who pass the national exams can get a professional license and work as nurses at hospitals or as certified care workers at care facilities (see Table 3).

Table 3. The Sending Procedures and Procedure for Qualified Indonesian Nurse and Care Worker in Japan



Source: 「全国厚生労働関係部局長会議（厚生分科会）資料：平成21年度経済連携協定（EPA）に基づく外国人看護師・介護福祉士候補者の受入れについて」.

\* Indonesian nurses get a 3 chances to take profession national exam in their 3 years employment contract.

\* Indonesian care workers only get one chance to take profession national exam in their 4 years employment contract after they do training 3 years in care institution.

## II. Focus and Methodology

This study focused on the factors that influenced Indonesian nurses, care workers (first and second groups) to go to Japan, and their motivation for working in Japan within the frame of the IJ-EPA.

This study used quantitative methods and interviews. Quantitative research was done by sending questionnaires to respondents via e-mail; the author sent 106 questionnaires in two phases (24 April and 8 May 2010). Of these, 45 respondents (42.5%) returned the questionnaire. The questionnaire consisted of 2 types of question: 75% closed questions and 25% open questions, such as respondents personal data (Table 4), their opinions about Indonesia-Japan economic partnership agreement, their motivation for working in Japan, their working conditions in Japan, and also their opinions about nurse and care worker licensing in Japan. The interviews were done to the BNP2TKI staffs who are involved in the sending process of Indonesian nurses and care workers through IJ-EPA, Japanese researchers who are also doing

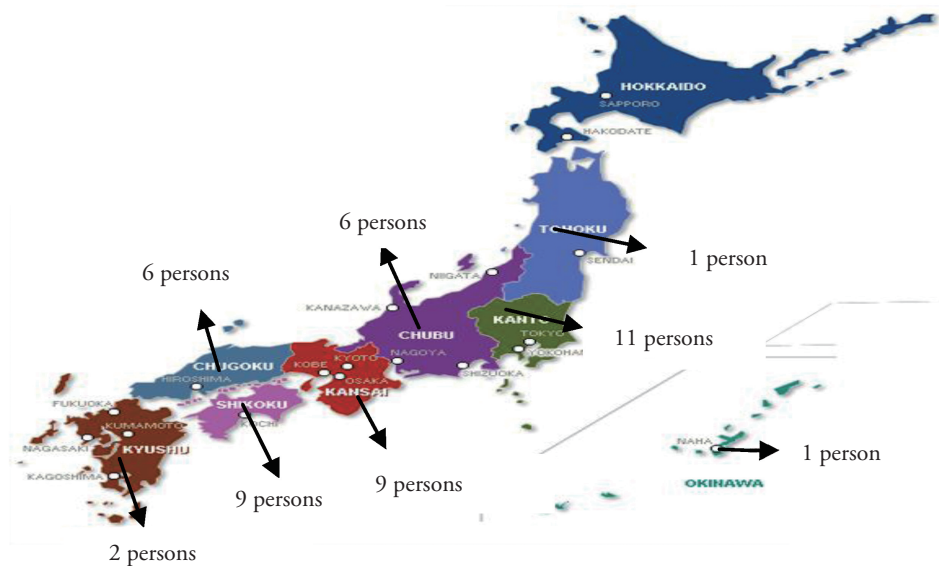
a research related Indonesian nurses and care workers who work in Japan through IJ-EPA, and the two respondents who are now working in Japan, one as nurse candidate and the other one as care worker candidate. To network with Indonesian nurses and care workers currently working in Japan, the author joined the *Indonesia no kangoshi kohosa* (IJEPA I)" and "ijepa2" in Face book (FB).

Table 4. Respondent Data

Respondent: 45 persons

	Gender	Age	Occupation in Japan	Education Back ground	Working experience
Male (31%)	14 persons				
Female (69%)	31 persons				
21—25 year	47%	21 persons			
26—30 year	44%	20 persons			
31—35 year	9%	4 persons			
Nurse candidate		42%	19 persons		
Care worker candidate		58%	26 persons		
Nursing college			80%	36 persons	
Non-Nursing college			20%	9 persons	
Nurse				56%	25 persons
Others				13%	6 persons
No working experience				31%	14 persons

Figure 1. The Respondent Spread in Japan



### III. Results of the Questionnaire Survey and Analysis

#### III. 1. Factors that Influenced Indonesian Nurses and Care Workers to Work in Japan

Migration theory, as proposed by Everett S. Lee, holds that migration is influenced by 4 factors: (1) those associated with a migrant's origin—the push factor, (2) those associated with a migrant's destination—the pull factor, (3) obstacles between the migrants' origin and destination and (4) personal factors.

The majority opinion of the respondents regarding “sending of Indonesian nurses and care workers to Japan in the frame of IJ-EPA” was really positive. More than half of the respondents said that the program was a “very good” or “good” program (Figure 2). Their reasons included the following: “This program at least could minimize unemployment in Indonesia,” and “by this program [Indonesians] could get new knowledge and hopefully get new skills.” Other respondents (13%) said that this program was not good enough for the following reasons: “Non-nursing education background of care workers recruitment process is not efficient and not good”; “job activities in Japan are not appropriate for nursing”; “insufficient information about insurance, tax in Japan.” In general, respondents thought that the conditions in Japan were not better than conditions in Indonesia (Figure 3).

Figure 2

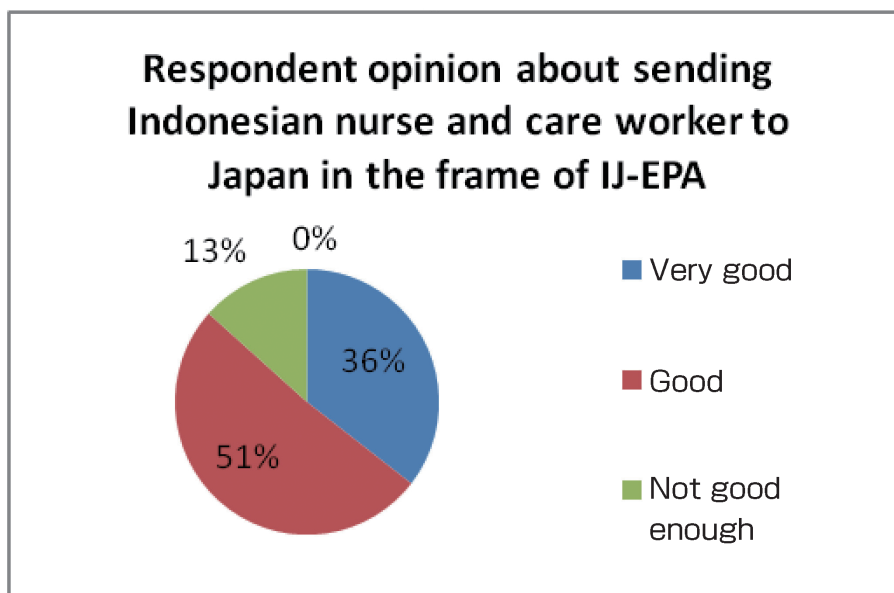
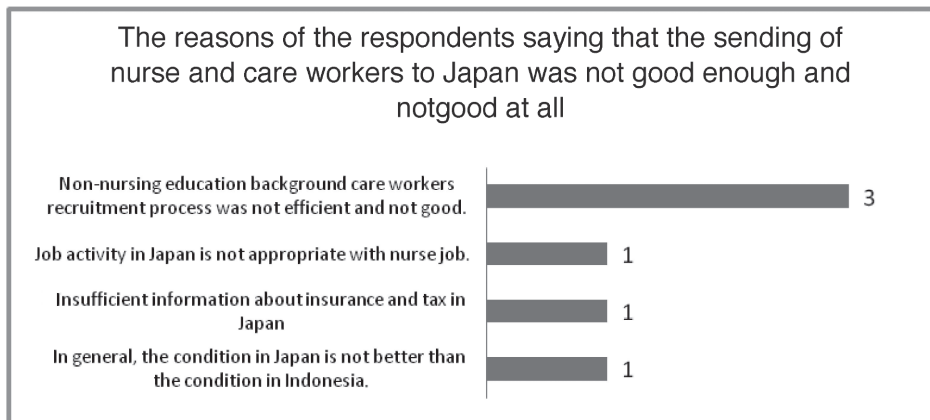
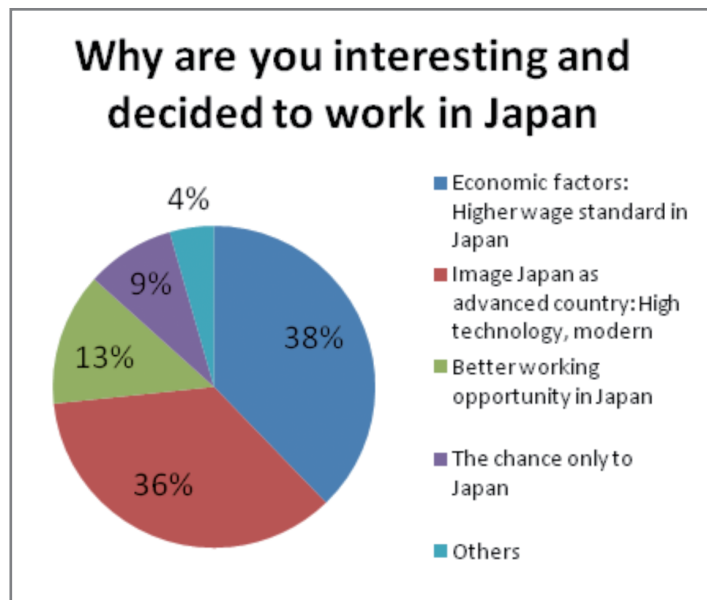


Figure 3



The respondents to this study said they were interested and decided to work in Japan for the following reasons: the higher standard of living in Japan (38%); the image of Japan as a developed country, which is modern and has advanced technology (36%). These images were connected with respondents hopes to raise their nursing skill in Japan, and only 13% of the respondents said they were motivated by better working opportunities in Japan (see Figure 4).

Figure 4



Based on Lee's Migration theory, the factors that influence Indonesian nurses and care workers working in Japan can be analyzed as follows:

1. Push factor: (a) Standard of living in Indonesia is lower than Japan

(b) Job opportunities in Indonesia are few

2. Pull factor: (a) Higher standard of living in Japan

(b) Image of Japan as an advanced country with modern, advanced technology

(c) Better working opportunities in Japan

3. Obstacles: (a) Non-nursing education background of care workers recruitment process was not efficient and not good

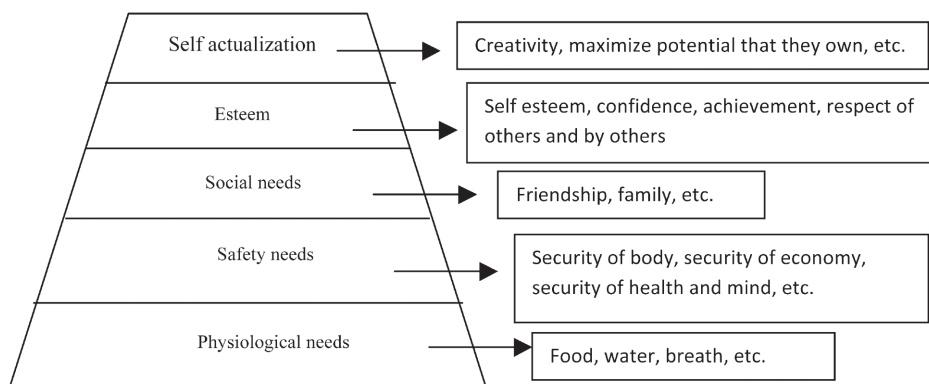
(b) Insufficient information about insurance and tax in Japan, such that it could deter Indonesian nurses and care workers from going to Japan.

The author did not input as obstacles “job activities in Japan are not appropriate for nurse job” and “in general the conditions in Japan are not better than conditions in Indonesia,” because respondents only recognized this situation after they came to Japan.

### III. 2. Motivation of Indonesian Nurse and Care Workers Working in Japan on the Frame of IJ-EPA

In this study, the author has used Maslow’s motivation theory, according to which humans work to fulfill needs. Maslow’s hierarchy of needs which is often depicted as a pyramid consisting of five levels of needs is as follows: (1) Physiological, such as food, water, etc; (2) safety, such as safety of the body, economy security, security of health and mind; (3) social such as friendship and family; (4) esteem such as self esteem, confidence, achievement, respect for and by others; (5) self actualization such as creativity.

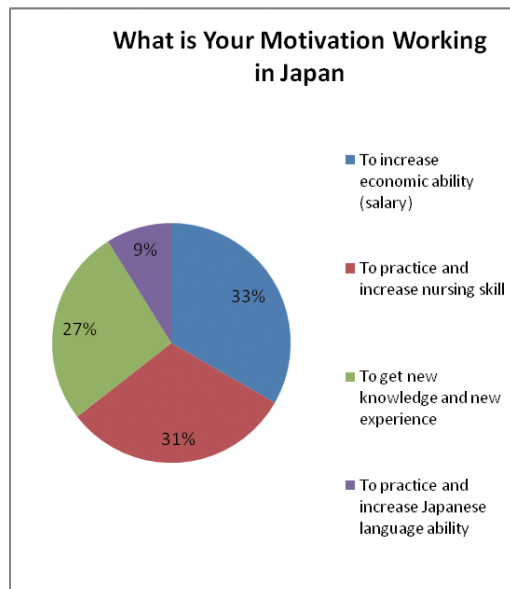
Figure 5. Maslow’s Hierarchy of Need



Source: Miller, Vandome & McBrewster 2009, p. 19.

Related to their motivation, the respondents of this study said that their motivations for working in Japan were to increase economic ability (33%) and to practice and increase nursing skills (31%), followed by acquiring new knowledge and new experience (27%). 9 % of them gave as motivation their desire to practice and increase Japanese language ability (see Figure 6).

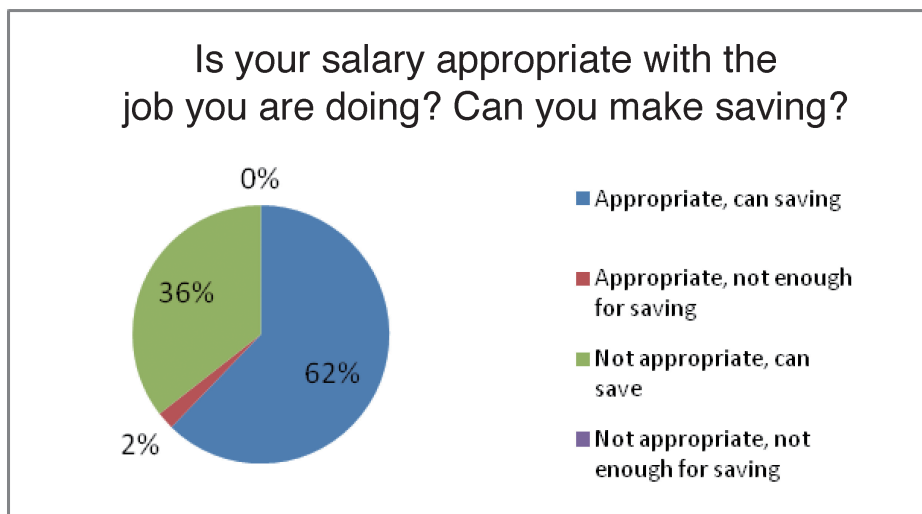
Figure 6



Based on Maslow's hierarchy of needs, the motivation of respondents working in Japan can be classified and analyzed as follows:

1. The motivation to increase economic ability is related with the effort to fulfill the "safety needs," of which economic security needs are paramount. Based on the questionnaire data, more than half of the respondents felt that their salaries were appropriate for the job they were doing, and they

Figure 7





could also save money from their salaries (see Figure 7).

2. The motivation to practice and increase nursing skills, and the motivation to acquire new knowledge and new experience, and also the motivation to practice and increase Japanese language ability are related with the effort to fulfill “self actualization needs.”

The respondent motivations and hopes to practice and increase their nursing skills by working in Japan might be very difficult to realize within 3 years of their employment contract. This is because they have to pass the Japan nurse national exams before they can perform medical tasks; till then, they can only work as nurse assistants. These rules are written into the Japan Medical Manpower, Maternity Nurse and Nurse Law (Hokenshi josanshi kangoshi hō).

#### Medical Manpower, Maternity Nurse and Nurse Law

(Article 1: General Rules), section 5: In this law, (registered) nurse means persons who hold a license from the Ministry of Health, Labor and Welfare, and engage in providing nursing care to, or assisting in, the medical treatment of persons with injuries and/or illnesses.

(Article 2: License), section 7. 3: The persons who want to work as a (registered) nurse must pass the annual government examination, and obtain a license from the Minister of Health, Labor and Welfare.

(Article 4: Duties), section 31: The person who is not a (registered) nurse is prohibited to engage in operations defined in the article 1, section 5 unless under instruction from medical doctor, dentist.

In addition, Indonesian nurses who work as care workers in Japan also find it difficult to increase their nursing skills because their job activities in care institutions are not related to medical activities (see Table 5). This means that respondents (Indonesian nurses and care workers) cannot fulfill their “esteem needs,” such as building confidence (in practicing their skills), achievement (the confession to their skills) and they also cannot fulfill their “self actualization needs.”

Table 5. Indonesian Nurses Job Activity at Hospital and Care Workers Job Activity at Care Institution in Japan

Indonesian nurses job activity at hospital in Japan	Indonesian care workers job activity at care institution in Japan
<ol style="list-style-type: none"> <li>1. Help patients (majority is aging) to fulfill their basic needs such as giving food, helping in toileting activity, etc.</li> <li>2. Take care of patients and help Japanese nurse such as cleaning the patient room, checking health equipment, bringing patients to the check up room, etc.</li> </ol>	<ol style="list-style-type: none"> <li>1. Help patients doing daily activity such as giving food (feeding), toileting activity, changing diaper and cloth, etc.</li> <li>2. Cleaning and making the patient room neat.</li> <li>3. Accompany patients on recreation.</li> <li>4. Help patient mobility.</li> </ol>

Related to their jobs in Japan, 58% of respondents said that their working conditions were not sufficiently appropriate, and not appropriate for what they had imagined before arriving in Japan (see Figure 8). 27% of respondents, who previously had worked as nurses in Indonesia, said that their skills had decreased while working in Japan (see Figure 9).

Figure 8

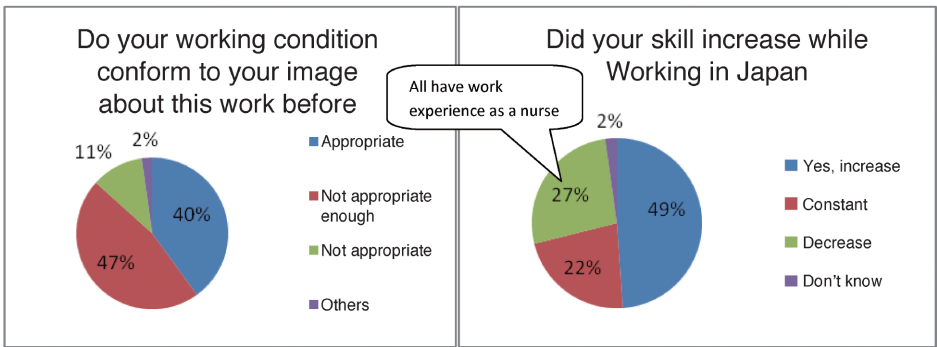
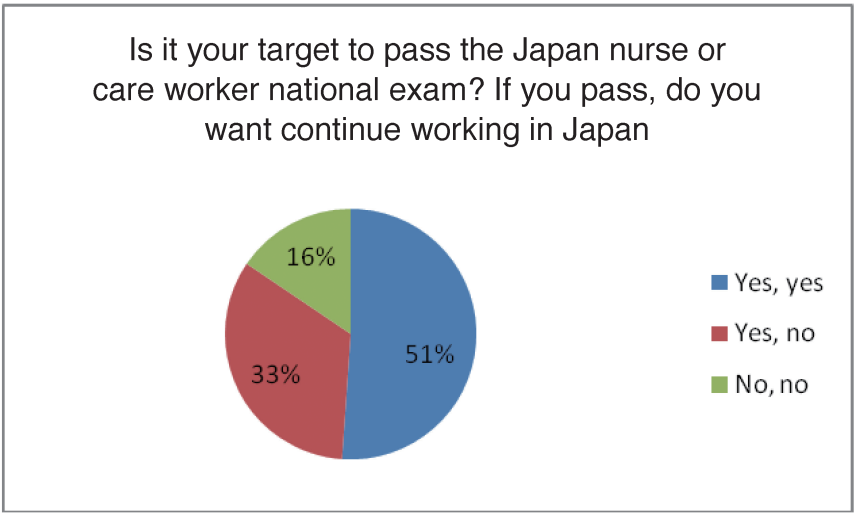


Figure 9

3. Actually the respondent's unfulfilled "esteem needs" also exert an influence on their target of passing the Japan nurse or care worker national exams. 84% of respondents set the target of passing the Japanedse nurse or care worker national exam, in order to fulfill their "esteem needs." In addition, the respondents' unfulfilled "esteem needs" and "self actualization needs" also exerted an influence on their decision as to whether to continue working in Japan or not, if they pass the national exam. According to Maslow: "As lower level needs become reasonably satisfied, successively higher needs become more influential in motivating human behavior (Maslow 2000, p.2). It has been observed that an individual may permanently lose the higher wants in hierarchy—self actualization—under social conditions" (p. 4). It can see in Figure 10 that 49% of respondents decided not to continue working in Japan, even though they passed the national exams. This might be because they lost their motivation to fulfill their "self actualization needs."

Figure 10



#### IV. Conclusion

From the above analysis, it can be concluded that the factors which influenced Indonesian nurses and care workers to migrate to Japan are basically related to the economy. It was a chance to get a better economic life. Next, the motivation of nurses and care workers for working in Japan was related with the effort to fulfill their “economic safety needs,” “esteem needs” and “self actualization needs.” In this study, the motivations of respondents to fulfill their needs (physiological safety, social, esteem, self actualization) do not follow the Maslow hierarchy of needs. Nonetheless, the classification of need that Maslow made was of great help to this author in analyzing the motivation of Indonesian nurses and care workers working in Japan.

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