EPA (Economic Partnership Agreement) Role in Preparing Health Worker to Japan

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A B S T R A C T

Under the Japan-Indonesian Economic Partnership Agreement (EPA), many Indonesian nurses have come to Japan for working since 2008. The number of elderly people in Japan is increasing, but number of productive age for human resources is declining. Therefore Japanese government is accepting foreign nurses and caregiver. In order to work as a nurse or a caregiver in Japan, it is necessary to have responsibility. For that reason, Japanese government made one critical condition that the nurses from foreign countries have to pass the national board examination for registered nurses or certified caregiver. Many nurses must go home because they did not pass the national board exam. Japan Asia Medical Nurse Association (JAMNA) has supported 25 nurses (2013-2017) to learn for the exam and provide accommodation funds to take the exam in Japan. It’s said that they couldn’t pass the exam because Japanese language is very difficult. Of course ability of speaking Japanese is important, but beyond that, the role of nurses and nursing concept are little bit different between Indonesia and Japan. The role of nurses and caregiver is to find innovation to help the elderly do their daily activities independently and to have a healthy lifestyle.

I. INTRODUCTION

Economic Partnership Agreement (EPA) program for nurse and caregiver candidates has been established since 2008 in Indonesia. Subsequently, other countries such as Philippines and Vietnam also joined this EPA program. In 2018, twelve batches have registered this EPA program.

Japan is one of the countries with majority of elderly citizen. The average life expectancy in Japan for male is 80 years, while 87 years for female.

People aged 65 and older in Japan make up a quarter of its total population. Most patients in the hospital are elderly. Sometimes there are elderly who are still able to work as farmers until the age of 90 or 100 years old but they need support in their daily activities so they would live healthier.

The number of elderly people in Japan is increasing, but the number of productive age for human resources is declining. Therefore, Japan government is accepting foreign caregiver, one of which is from Indonesia. Up to 2017, there are 622 nurse candidates and 1494 caregiver candidates who have been sent to Japan by the EPA program. (Ministry of Health, Labour and Welfare online, 2017)

II. METHOD

Online registration is organized by BNP2TKI. The registration is open until 31 March every year. The next step is interview and Medical Check Up. In September, matching process will be done with the hospital or nursing home in Japan. After signing the contract, six months of Japanese language training course will be given in Indonesia which usually starts on December to May. The candidates will go to Japan if only his communication skill is at least N5 (Japanese language proficiency Test) after taking the course. In Japan, there is another language training course for 6
months which starts on June to November. After finishing the course, candidates will be assigned in the hospital or Nursing home in December. (BNP2TKI online, 2018)

Indonesian and Philippines candidates are allowed to go to Japan is they achieve N5 level, but Vietnamese candidates have to achieved N3 level. Because of this difference, the passing rate for national board nursing exam for Vietnam is higher than candidates from Philippines and Indonesia.

III. RESULTS AND DISCUSSION

The requirement for nurse candidate and caregiver candidate is different. To be a nurse candidate, it is required to have 2 years of working experience since the certificate of competency is issued. Candidate is allowed to stay for 3 years in Japan and eligible to take the national board nursing exam which held yearly.

Before passing the national board nursing exam, candidate does not have nursing license in Japan. Therefore, nurse candidate will work as a nurse assistant. Some of the candidates are not satisfied because they are not allowed to do any nursing procedure such as infusion, injection, inserting NGT, or any medical procedure. Although they are not allowed to the medical procedure, there are many things to do such as learn about nursing care in elderly in Japan.

Caregiver candidate is allowed to stay in Japan for 4 years. To be eligible for national board caregiver exam, the candidate must have 3 years of working experience in nursing home. Therefore, the candidate is able to take the national board exam at 4th year. Candidate is only allowed to take the exam once (JICWELS online, 2018)

Japan national board nursing exam result

Up to now, there are 130 people who passed the national board nursing exam and 330 people who passed the national board caregiver exam in Japan. Unfortunately, thirty percent of nurse and caregiver have decided to go back to Indonesia even though they passed the exam. (Ministry of Health, Labour and Welfare online, 2017)

The reasons why they decided to go back to Indonesia are family expectancy, marriage, illness in the family, etc. There are also people who is willing to stay and work in Japan but unfortunately, they must go home because they did not pass the national board exam. For this instance, they might be hopeless.

In EPA program, candidate is allowed to take several times of national board exam after going back to Indonesia. It will take many expenses to go to Japan with their own funds. There are people who are hopeless due to this matter.

Role of Japan Asia Medical Nurse Association (JAMNA)

JAMNA is a foundation founded in 2013, aiming for raising the standard of medicine in Asian region. Because there are people who have problem with funds for travelling to Japan to take the exam, JAMNA provide accommodation funds for the EPA nurse candidate. JAMNA also helps candidate to learn for the national board nursing exam for those who have difficulty in self learning.

JAMNA has supported 25 nurses (2013-2017)

1. Educational support (learning course for nurse)
2. Financial support (travel expenses, accommodation in Japan, and fees for learning materials)
Problems in EPA program for nurse candidate and caregiver candidate

1. Passing rate of the national board exam

   With one year of Japanese language course before they start working in the hospital or nursing home, they may not have difficulty for their daily life activities in Japan. The national board exam is very difficult for foreigners and the passing rate is low. For national board nursing exam is around 10 percent, while national board caregiver exam is around 40 percent. (Ministry of Health, Labour and Welfare online, 2017)

2. Different way of thought between EPA nurse candidate from Indonesia and Japanese supervisor

   The goal for many nurse candidates in EPA is to pass the national board exam. Passing the board exam is not a goal but actually it is an entrance way. After the exam, they can work and learn more in Japan. The experience of being a nurse candidate or caregiver would be different after they passed the exam. It is only training experience while they are still a candidate.

   In the workplace such as hospital or nursing home, there is an educational program for medical staff every year so they can update their skill and knowledge. Supervisor and staff in Japan health facilities have a lot of expectation in candidate. But there is a gap or different way of thinking between candidate and supervisor.

   Sometimes the candidates have difficult times in learning or working. In difficult times, they would like to go home and see their family in Indonesia. The candidates will say “if I passed the exam, I will go back to Indonesia. It’s been a long time in Japan”

   Japan supervisor wants the Indonesian nurse to work with them as a nurse or caregiver after they passed the exam. They believe Indonesian nurse would contribute to improve the nursing care for elderly in Indonesia after they worked in Japan. (Cooperation for Overseas of Welfare Services online, 2017)

3. Aim for learning in Japan

   Indonesian nurses think Japan is a country with advanced medical technology. They are aiming to learn about advanced medical knowledge in Japan. Nowadays, only few Japanese nurses work in the hospital with advanced technology. Most of the nurses work in the hospital which its patients are mostly elderly.

   Many Indonesian nurses work in a nursing home or unit whose most patients are elderly. The elderly sometimes is having severe dementia (not able to communicate, ambulate, eat, swallow food, go to the toilet, etc.). In Indonesia, few elderly citizens have severe dementia and they only stay in the hospital for short time. Indonesian nurses can learn about nursing care for elderly by self-learning.

   Indonesia is also a country with big population whom eventually will be an elderly citizen. Indonesian nurse can also work as a nurse in Indonesia after they went back from Japan. They had the skill and knowledge from Japan that can be used in the hospital in Indonesia.

4. Indonesian nurse choose to be a caregiver candidate

   There are 2 types of caregiver in Japan which are Kaigofukushishi and ordinary caregiver. Many caregivers work for elderly. Kaigofukushishi caregiver must have the Japan national certificate and also one of medical profession in Japan. Ordinary caregiver does not need the Japan national certificate.

   The training program for caregiver is different from nursing program. Caregiver does have a role to help the elderly doing their daily activities.

   In EPA program, caregiver candidates do not require to have nurse working experience in Indonesia. Unlike EPA program for nurse candidate, candidate must have at least 2 year of working experience as a nurse. Therefore, many Indonesian nurses apply the EPA program as a caregiver.

Characteristics of nursing care in Japan

1. Knowledge of prevention

National health insurance has regulation that 70% of medical expenses will be covered by the government. Therefore, if the number of illness increased, Japan government will have deficit in their budget. How to solve the problem? One way to solve the problem is by prevention not to be ill. Manage a healthy lifestyle pattern to prevent the disease is needed so that treatment is not needed.

2. Focus on the elderly opinion

Many Indonesian nurses focus with the family opinion when they do nursing care for elderly because elderly is taken care by the family. In Japan, it is important to listen to the family opinion, but the most important is patient’s opinion itself. For example, the elderly thinks how to do daily activities or what is the matter most for him. After knowing their way of thinking, we will support what they want. We focus on how to improve their self-concept.

We have to take notice the elderly patient’s occupation when they were young in order to improve their self-concept. The information about their job is very important. We also listen their story what made them proud. Even though they have dementia, they are still able to recall their memory in the past.

3. Improving the elderly self-concept

Sometimes, Indonesian nurses in Japan can also learn Japanese language from the elderly. The nurses ask for consultation from the elderly about daily difficulties in Japan or about problem in Japan. The elderly will think that they are very helpful and meaningful. Reciprocally, the Indonesian nurses will thank the elderly. This is very effective for the nurses and the elderly.

The Indonesian nurses will satisfy the elderly in the nursing home. The elderly also likes the Indonesian nurses and will look for them even they went back home already.

4. Help the elderly to be independent

If someone had stroke attack and couldn’t use his right hand, he would have difficulty to eat independently.

In Japan, there is a tool to help them eating. They make the grip/handle part of the spoon and fork curved and added belt or tied so it would be easier to be used by patient or elderly whom couldn’t move his hand while eating. There is also food with jelly based so they would swallow it safely.

It is not good to help all of the activities. They would try to make the elderly independent. This is very important. If they help all activity, the elderly might not willing to be independent. In order to aim the goal, we have to work sincerely. (Ogasawara,H. 2013, 2014, 2015)

IV. CONCLUSION

The role of nurse and caregiver is to find innovation to help the elderly do their daily activities independently and to have a healthy lifestyle. This is very valuable way of thinking in Japan

1. Disease prevention by manage a healthy lifestyle
2. Support the elderly to be independent in daily activities
3. Make the elderly to be meaningful
4. Focus on patient’s opinion in their daily activities
5. Help them to do daily activities independently with joy
6. Care for elderly individually by focus on patient’s life, culture, and background
V. REFERENCES


