

## Integrating Foreign Healthcare Workers into the Japanese Healthcare System: An Overview

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**Abstract** : Japan, facing an ageing population and a shortage of healthcare professionals, is increasingly attempting to rely on foreign nurses to address these challenges. This overview examines the role of foreign nurses in Japan's healthcare sector and the Economic Partnership Agreements (EPAs). EPAs have played a significant role in facilitating the entry of foreign nurses into Japan's healthcare system, promoting international cooperation, and addressing labour shortages. This report delves into the impact of EPAs on the recruitment of foreign nurses. It also discusses the issues associated with retaining those nurses in the long term.

**Key words**: Japanese healthcare, foreign workers

### Introduction

Japan's ageing population is putting pressure on its healthcare system. To combat the challenges posed by this demographic shift, Japan is attempting to increase the number of foreign nurses employed, partly through Economic Partnership Agreements (EPAs).

The ageing population, along with a declining birth rate, has resulted in a severe shortage of healthcare workers, particularly nurses. This shortage has strained the healthcare system, affecting the quality of care and increasing the workload on existing nurses. In some areas of Japanese society foreign nurses have become to be viewed as an essential resource to address this crisis. These nurses can bring diverse skills and experiences, enriching the healthcare environment and promoting cultural exchange. They have the potential to contribute to the delivery of high-quality care while also supporting Japanese nurses in their roles.

However, the introduction and integration of non-Japanese workers into the healthcare system has not been without issues. The Japanese government started moving

towards an increase in foreign workers in 1999, with the Cabinet's plan to actively promote their acceptance in order to support the country's economy and society (Ogawa, 2005). It began easing visa restrictions on healthcare workers with an EPA signed with the Philippines in 2006 (Yagi et al, 2014). The government initially framed the increase as a way of transferring Japanese medical skills and knowledge to the countries participating in the EPA. Japan has also entered into Economic Partnership Agreements with Indonesia and Vietnam.

These EPAs facilitate trade and economic cooperation while also addressing the labour shortage in key sectors, including healthcare. Under these agreements, Japan has created specific programs and pathways for foreign nurses and caregivers to work in the country. This includes language training and cultural orientation to ensure that they can effectively communicate with patients and integrate into the healthcare system. These initiatives aim to bridge the gap between Japan's demand for healthcare workers and the availability of foreign workers. However, as will be seen later, the uptake in these initiatives has been slow, with only a few thousand healthcare workers coming to Japan in the years since they started. Of even more concern, a large number of those who have come have since returned to their home countries.

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In this overview I will review some of the previous research that has been produced on this topic. I will then look at some of the available data to try and ascertain the degree to which these programs have been successful. Finally, I will discuss some issues regarding the integration of the foreign workers and possible ways in which the programs and assimilation efforts can be improved in order to increase the retention of these recruits.

## Literature Review

There have been surprisingly few studies carried out in this area. Perhaps the reasons for the dearth of research are the difficulties in tracking the foreign workers once they enter the workforce, and accessing up-to-date data regarding their success or failure in passing the necessary licensing exams.

Yagi and colleagues took a pessimistic view of the effects of the EPA that Japan concluded with the Philippines (Yagi et al, 2014). They noted that at the time of writing only seven percent of the candidates had passed the program's requirements since its inception. They pointed out that in both 2010 and 2011 only one Filipino passed the national examination, out of 53 applicants in 2010 and 113 in 2011, compared to a passing rate of over ninety percent for Japanese applicants. In response to these exceedingly low pass rates the Japanese government eased the language requirements on the tests, However, even after the amendments the passing rate was still under ten percent.

Yagi and her colleagues also discussed the 'brain waste' created by having nurses who had already qualified in their native countries performing menial tasks while they waited to take the licensing exam in Japan. This was also related to lobbying by the Japan Nursing Association against the mutual recognition of licenses between the two countries. Finally, they suggested changes to the system where the foreign nurses would be trained in their own countries and need to pass language requirement tests before becoming eligible. This would help to ensure patient safety, whilst also decreasing the training costs and increasing the pass rates of those who did progress on to take the licensing exams.

Ogawa's report of public opinion in the time period between the government's announcement of their intent to increase the number of foreign healthcare workers and the start of the EPAs was also quite gloomy (Ogawa, 2005). He reported that although the Japanese public was cognisant of the shortages in labour for many parts of the economy, they held a negative attitude towards the acceptance of foreign

workers. However, it should be noted that attitudes are likely to have shifted in the years since this study.

Tsukada's more recent study showed a positive attitude among healthcare administrators and co-workers towards foreign care workers (Tsukada, 2021). A nationwide mail survey showed that almost sixty percent of administrators and nearly fifty percent of Japanese care workers thought accepting foreign care workers was a good idea. In comparison, under twenty percent of administrators and just over twenty percent of Japanese care workers were opposed.

Sumi and colleagues reported on the EPA programs from the perspective of the 344 foreign nurses who had managed to pass the certification process in the years from the start of the programs to 2018 (Sumi et al, 2020). A self-reported questionnaire was used and in total 74 out of the 344 nurses who had passed the certification participated. Most startling was that over thirty percent of the participants were no longer employed as nurses in Japan. The report also showed that the foreign nurses overwhelmingly viewed the workload as being high, and that freedom of movement to other institutions was low. The researchers concluded that freedom of movement, rent subsidies, and support from colleagues and institutions were the key factors in the nurses remaining employed.

## Discussion

While EPAs have been touted as a viable solution to helping to alleviate Japan's healthcare labour shortage, many challenges persist and need to be overcome if they are to have a noticeable effect. There are also factors affecting the retention of foreign workers after they have entered the workforce that need to be addressed. Many of these issues revolve around government policy and larger macro concerns. However, there are also locally and institutionally-based aspects that can be addressed to meet these challenges, in particular those relating to the retention of foreign healthcare workers.

The charts below show the progress of the efforts to bring foreign workers into the Japanese healthcare system with data obtained from the Japanese Ministry of Health, Labour and Welfare (MHLW). The first chart (Figure 1) shows the number of candidates coming to Japan with the aim of becoming nurses. As can be seen below, Indonesian candidates began arriving in 2008, Filipino candidates in 2009, and Vietnamese candidates in 2014. Although in the first two years there were over two hundred candidates from Indonesia, that

rapidly tailed off, and there have only been around one hundred candidates from all three countries combined over the last five years. In the years since they commenced until 2022, there were 738 candidates from Indonesia, 667 from the Philippines, and 239 from Vietnam. Clearly these levels will not be adequate for filling the large number of positions required to adequately staff Japanese healthcare institutions going forward.

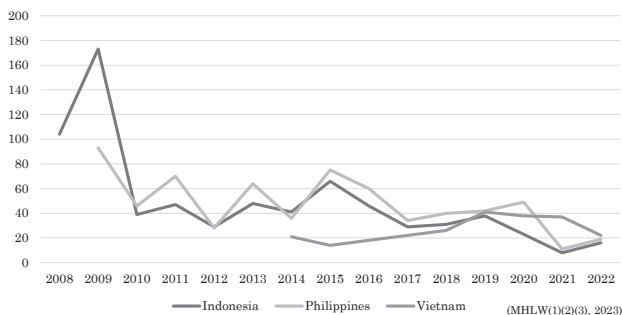


Figure 1  
Number of candidates (nursing)

The second chart (Figure 2) shows the number of candidates hoping to become certified care workers in Japan. The start years for the three countries are the same as for nurses. However, in contrast to the data for nursing candidates shown above, the number of care worker candidates has shown some growth. This can be attributed to a change in the regulations for the acceptance of foreign care workers. In 2017 the Japanese government began allowing foreign candidates who had graduated from a certified training school in Japan to remain here indefinitely (“Foreign Care Workers”, 2023). This seems to have had a noticeably positive effect on the levels of foreign care workers attempting to enter the Japanese healthcare system.

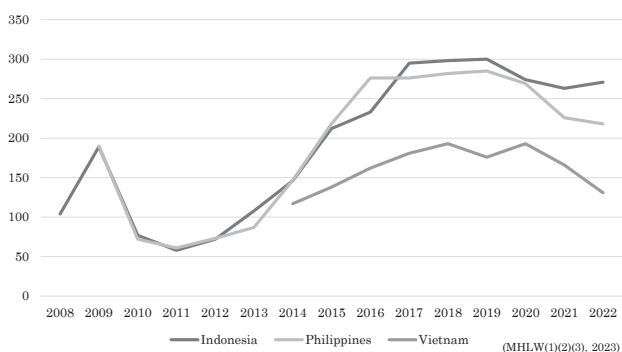


Figure 2  
Number of candidates (care workers)

Countries worldwide are facing a shortage of healthcare workers. Therefore, the financial aspects of the recruitment and retainment of foreign healthcare workers

should also be noted. In addition to needing to appeal to workers from the countries Japan has signed EPAs with, Japan needs to compete with other countries also looking to immigration as a way to solve their healthcare worker shortages. As can be seen in the chart below (Figure 3), although the average salary for nurses in Japan is considerably higher than in the EPA countries, it is only slightly higher than South Korea, and much lower than the United States.

It can therefore be suggested that Japan’s continuing low economic growth, in conjunction with the weak value of the yen, is likely to reduce the attractiveness of Japan as a country for healthcare workers looking to relocate.

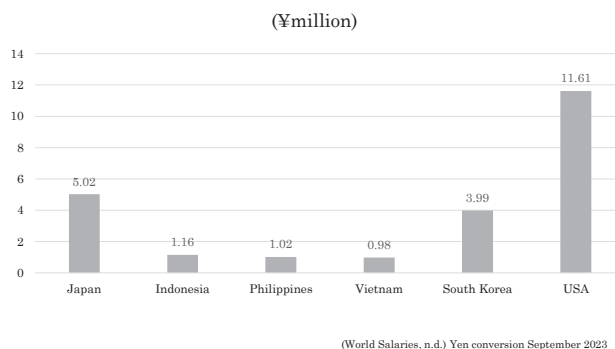


Figure 3  
Nurses Average Salary

The chart below (Figure 4) compares the average salaries of care workers in the same six countries as above. Whilst the average salary in Japan is much greater than those of the EPA countries, similarly to the nurses data above, the average care worker salary in Japan is less than half that of the United States’ average. South Korea also has an average salary that is comparable to Japan’s. It can be therefore be surmised that Japan faces tough competition in attracting care workers through immigration.

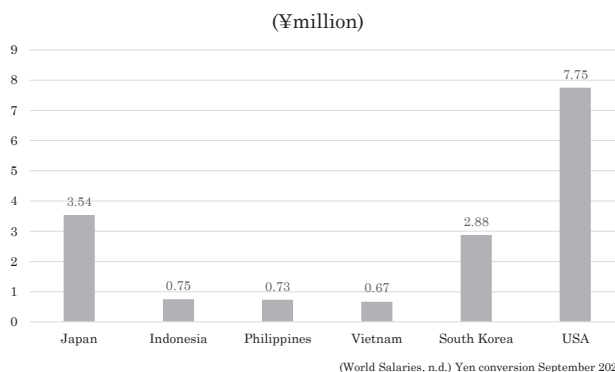


Figure 4  
Care Worker Average Salary

As previous research has shown (Sumi et al, 2020),

even when foreign candidates have completed all the training and passed the certification exams, they often struggle to thrive in the Japanese healthcare system. In the next section I will consider some of the reasons for this.

The language barrier is often suggested as a reason why non-Japanese workers struggle to adapt. Although there are language training programs, language issues are often cited as a reason why foreign workers find it difficult to provide optimal care. In addition, to day-to-day linguistic requirements, adapting to a new healthcare culture and different patient expectations can be demanding for foreign nurses. Achieving proficiency in Japanese is also often a time-consuming and challenging process. Effective communication with patients and colleagues is essential in healthcare, and language limitations can lead to misunderstandings, reduced job satisfaction, and potential errors in patient care.

Cultural differences pose another significant challenge for foreign nurses. Japan has a unique healthcare culture with distinct norms, practices, and patient expectations. Adapting to this culture can be emotionally taxing and can impact the nurse's confidence and ability to provide culturally sensitive care. The need to navigate Japanese cultural nuances adds a layer of complexity to an already demanding profession. To address these challenges, ongoing support and training for foreign nurses are crucial. Additionally, enhancing cultural sensitivity and inclusivity within the healthcare system can further facilitate their integration.

Another issue is that foreign nurses need to meet specific licensing and certification requirements in Japan, which can differ from their home countries. These requirements may include passing Japanese nursing exams and completing additional coursework. Navigating these bureaucratic processes can be time-consuming and frustrating, delaying their ability to work in their chosen profession.

One unfortunate issue connected with this topic is that discrimination and bias can be experienced by foreign nurses in Japan. This can manifest as differential treatment in the workplace, a lack of acceptance among Japanese colleagues, or even prejudice from patients due to language or cultural differences. Such experiences can affect foreign nurses' mental health, job satisfaction, and overall well-being. Previous research has shown that a lack of support can be detrimental to the retention of foreign nurses (Sumi et al, 2020). Clearly in cases where the non-Japanese workers are the victims of discrimination and bias there is likely to be an even stronger negative effect.

Visa restrictions and residency issues can also pose challenges for foreign nurses. Some may face limitations on the duration of their stay or the ability to bring their families to Japan. Uncertainty about their immigration status can create stress and insecurity, affecting their ability to focus on their work.

An issue that stems from the very reason that brings many foreign nurses to Japan is that they may find themselves working in understaffed healthcare facilities. Japan's healthcare system faces chronic understaffing, which can lead to excessive workloads and burnout among nurses. Foreign nurses may be expected to fill these gaps, potentially affecting their work-life balance and job satisfaction.

Finally, despite their qualifications and expertise, foreign nurses may encounter limitations in terms of career advancement. Opportunities for professional growth and development can be limited due to language barriers and cultural differences. This can lead to frustration and a sense of stagnation in their careers.

Although there have undoubtedly been many issues in their implementation so far, the impact of EPAs on foreign nurses in Japan has been significant. First of all, the EPAs have improved accessibility by streamlining the visa application process, making it easier for foreign nurses to work in Japan. This has increased the accessibility of Japanese healthcare institutions to non-Japanese workers.

Secondly, the EPAs often include language and cultural training programs, helping foreign nurses adapt to the Japanese healthcare environment. This ensures effective communication with patients and colleagues.

Furthermore, EPAs typically guarantee foreign nurses equal rights and benefits, such as fair wages and working conditions, ensuring, in principle, that they are treated on par with their Japanese counterparts. However, it should be noted here that the steps involved in reaching that status can be daunting, or even onerous.

Another positive aspect of the EPAs is that foreign nurses in Japan can benefit from skill development and career advancement opportunities. This not only benefits the nurses themselves but also contributes to the overall quality of healthcare in Japan.

In order to increase the number of candidates, and more importantly increase the numbers passing the national certification exams, the following steps should be considered.

As other researchers have suggested (Yagi et al,

2014), moving some or all of the pre-certification training to the candidates' own countries would help to alleviate the high costs associated with the program. One report from 2012 claimed that at that time the costs to the tax payer of producing one successful applicant was as much as 80 million yen (Idei, 2012). Moving some of the training to the candidates own countries would have the dual benefits of increasing the pass rate of those candidates that make it to Japan, and also reducing some of the negative coverage and public opinion that these programs have attracted in the past (see Ogawa, 2005).

Additionally, reducing the linguistic demands upon the candidates in the certification phase of the process will likely increase the pass rate. One further step would be to move towards mutual recognition of nursing certifications from countries that Japan has concluded EPAs with.

Finally, in order to increase the retention of those foreign nurses that do become employed in Japan, it is necessary to support them financially in order to incentivise staying, increase their freedom of movement between institutions, and help them create social connections outside of the workspace.

## Conclusion

Foreign nurses can play an indispensable role in Japan's healthcare sector, alleviating the strain caused by its ageing population. Economic Partnership Agreements (EPAs) have been somewhat useful in facilitating their entry, addressing labour shortages, and promoting international cooperation. While challenges exist, ongoing support and cultural integration efforts will ensure the continued success of foreign nurses in Japan, benefitting both the healthcare sector and the country's economy as a whole. Previous research has also shown that the next generation of Japanese healthcare workers hold positive attitudes regarding working with foreign co-workers (Hoggard, 2021).

However, while EPAs have created valuable opportunities for foreign nurses in Japan and have helped address labour shortages in the healthcare sector, it is essential to recognize and address the challenges they face. Solutions should include continued language and cultural training, efforts to promote inclusivity and diversity in healthcare institutions, further streamlining licensing and certification processes, and providing support for mental health and well-

being. By addressing these issues, Japan can fully harness the potential of foreign nurses and ensure the sustainability of its healthcare system.

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