

Part 2-CHAPTER 3

A New Era for Policies for Care Workers in Japan: Current Status and Future Directions

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CHAPTER 3

A New Era for Policies for Care Workers in Japan: Current Status and Future Directions*

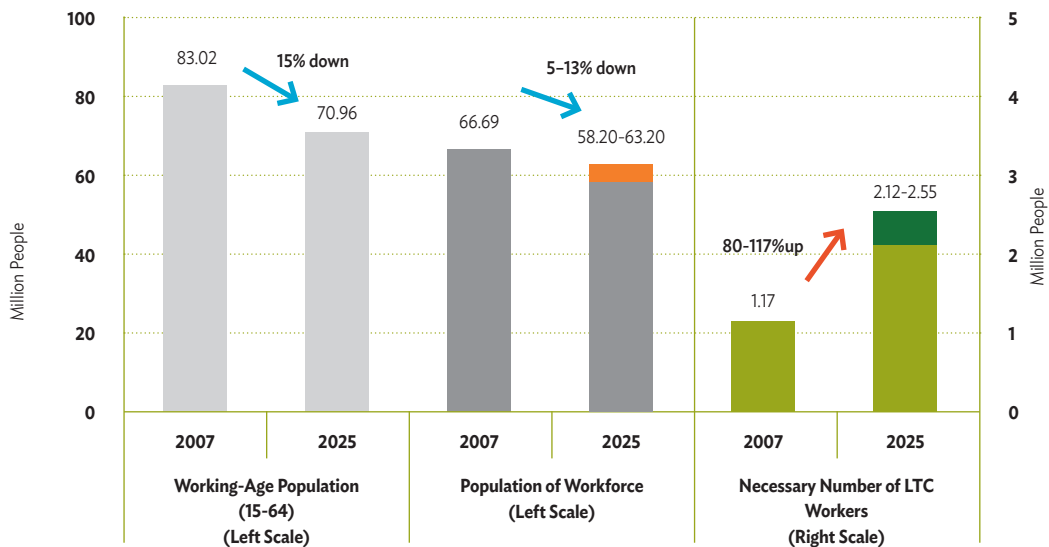
Noriko Tsukada

This paper briefly introduces the status of the care workforce in Japan, then reports on new policies on foreign care workers. It presents outcomes from nationwide interview research in 2009–2011 and a mail survey in 2014.* Finally, it discusses future directions for care workers.

Status of Care Workers in Japan

With its continuously declining fertility rate, which was 1.36 in 2019 and far below the population replacement level of 2.1, Japan is quickly becoming the world's fastest and oldest ageing society. The proportion of older adults amongst the total population was 28.7% on September 2020. Long-term care (LTC) services are required to help older citizens.

Figure 3.1. Working Age Population (15–64), Workforce, and Number of Care Workers Needed, 2007 and 2025



LTC= long-term care.

Source: Ministry of Health, Labour and Welfare (2010)

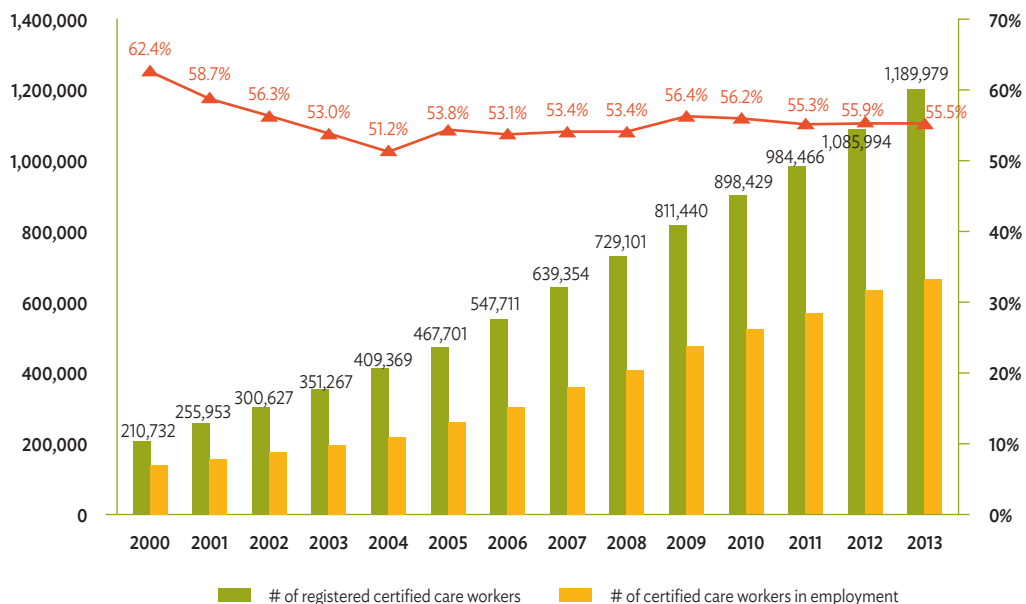
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Japan launched a public LTC insurance program in 2000. Not surprisingly, the number of persons certified as requiring and using LTC services under the program has been steadily increasing since then, which means that Japan needs more care workers.

Figure 3.1 shows that the working-age population and workforce are projected to decrease while the number of care workers needed is projected to increase. Yet, the number of training schools for care workers in Japan has been decreasing and so has the number of admission slots for students. There were more than 450 training schools in 2005 but only 378 in 2013. Not only has the number of admission slots in training schools decreased but only 70% are filled, suggesting that younger people able and willing to care for frail and dependent older adults have been decreasing, worsening already existing workforce shortages.

Figure 3.2 shows trends in numbers of registered certified care workers (*kaigo-fukushi-shi*) and proportions of certified care workers who are working as care workers. Figure 3.2 shows that only about 56% of certified care workers are working as care workers. Why might this be?

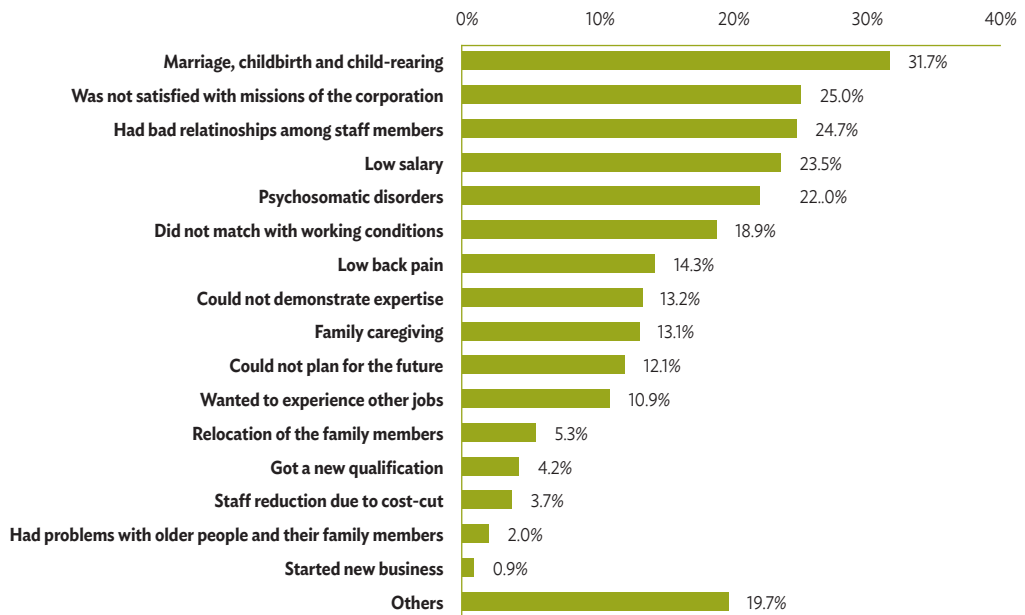
Figure 3.2. Registered Certified Care Workers (*Kaigo-Fukushi-Shi*) and Certified Care Workers Working as Care Workers



Source: Ministry of Health, Labour and Welfare (2015), p.5.

Figure 3.3 presents many reasons why certified care workers quit their care worker jobs. The most cited one was ‘marriage, childbirth, and child-rearing (31.7%),’ followed by ‘not satisfied with missions of the corporation (25%),’ ‘bad relationship among staff members (24.7%),’ and ‘low salary (23.5%).’ After a family role change, the top three reasons were management issues, all of which can be solved to improve working conditions and encourage continued employment.

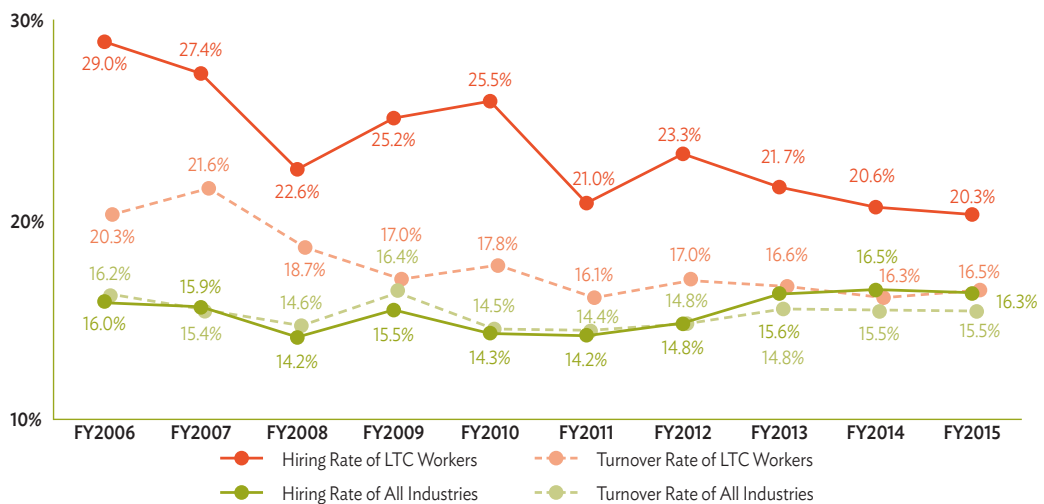
Figure 3.3. Reasons Why Certified Care Workers Quit Previous Care Worker Jobs



Source: Ministry of Health, Labour and Welfare (2015), p.20.

Figure 3.4 shows that hiring and turnover rates for care workers are higher than for all industries although the gap between them has been decreasing. As of fiscal year 2015, the turnover rate for care workers (16.5%) was close to that for all industries (15.5%). In 2015, the Ministry of Health, Labour and Welfare estimated the gap between care worker supply and demand at 0.37 million by 2025.

Figure 3.4. Hiring and Turnover Rates for Care Workers and Workers in All Industries



LTC= long-term care.

Source: Medical, LTC and Welfare Policy Research Forum (2017), p.6.

New Policies on Foreign Care Workers

The government of Japan adopted four drastic policy options on foreign care workers to increase the supply of care workers overall. The first involved recruiting certified care worker candidates based on the Economic Partnership Agreement (EPA) with Indonesia in 2008, followed by the Philippines (2009), and Viet Nam (2014). The EPA aims to strengthen economic relationships, not to cope with shortages of care workers. The Ministry of Health, Labour and Welfare (2016a) reported that 2,106 EPA-certified care worker candidates had entered Japan under a status of residence, *tokutei katsudou* (designated activities), since 2008 as of 1 January 2016. Who are they? They are well educated. Indonesian care workers, for example, graduates of higher education institutions (3 years) AND certified as nursing care workers by the Government of Indonesia, or graduates of nursing schools (3 years) or of university nursing schools. After 3 years of working in Japan, they can take the national qualification examination to become a certified care worker. The government ensures that they earn as much as Japanese care workers with the same qualifications.

The second option was the creation of a new status of residence-*kaigo* (nursing care) enacted in September 2017, which now allows foreigners to work as LTC workers if they meet Japan's standards for care workers. The government also added a category of *kaigo* (nursing care) to an already existing status of residence, *ginou-jissyu* (technical intern training) program, which encompassed 77 job categories when the policy was enacted in November 2017. It allows foreigners with Japanese language proficiency test (JLPT) level 4 to work in Japan for up to 5 years and to learn Japanese LTC skills for the purpose of technology transfer. If they pass a national qualification exam for care workers, they can stay and work as care workers under a status of residence, *kaigo* (nursing care), mentioned above.

Some issues have remained unsolved in the *ginou-jissyu* (technical intern training) program. The biggest one includes 'an assurance of fundamental human rights of foreign trainees' (e.g., protection against exploitation or confiscation of passports). The program should be continuously and rigorously monitored. Another concern is whether JLPT level 4 is high enough for care workers.

The fourth option was enforced on 1 April 2019. The government amended the immigration law on 8 December 2018 and created a new status of residence, *tokutei ginou ichi gou* (specified skilled worker (i)). This policy aims to increase the workforce in 14 areas such as construction, fishery, food service, building cleaning, accommodation industry, aviation industry, agriculture, *kaigo* (nursing care), amongst others, where workforce shortages are serious. Foreign LTC workers under *tokutei ginou ichi gou* (specified skilled worker (i)) are allowed to start working as care workers if they meet certain criteria for specific LTC skills and language proficiency (JLPT level 4) and to stay for up to 5 years. As of 2018, up to 60,000 foreign LTC workers were planned to be accepted over the next 5 years (Ministry of Health, Labour and Welfare, 2018).

Outcome of Nationwide Interview Research of 2009–2011 and Mail Survey of 2014

1) Nationwide Interview Research of 2009–2011

The study aimed to find out how administrators of LTC institutions for older adults that accepted EPA certified care worker candidates viewed their experience and to determine what problems they encountered. Although eight major questions were asked, responses to the second question, ‘Did you see or feel the following four types of concerns about the EPA certified care worker candidates who are deployed in your institution?’ are introduced here (Tsukada, 2014, 2017).

Four concerns were whether the candidate (i) could write case records and work records in Japanese, (ii) could communicate with their colleagues efficiently or leave and receive instructions about case work, (iii) could communicate efficiently with nursing care clients in Japanese, and (iv) would encounter prejudice from clients.

The typical response for each concern is shown below:

- (i) ‘After 1 year, they still find it difficult to write nursing care records by themselves, and we therefore have them read (instead of asking them to write) the records.’
- (ii) ‘In the beginning, they were “hesitant to communicate” or “did not know what to say.” But they improved gradually and after 6 months or so, they got to a point where they “were able to manage simple communication,” and “were able to understand what was said, somehow,” by Japanese personnel speaking slowly and using easier words.’
- (iii) ‘Many residents have dementia-related problems. But candidates have a good reputation here because they tend to speak clearly and slowly by using polite and easy words. It is true that their “gentleness” can be understood by people who are around them.’
- (iv) ‘No problems.’ ‘These EPA certified care worker candidates from overseas were well-liked, encouraged, and given many compliments about their work by the facility residents they had served.’

Of course, some institutions had difficulties dealing with EPA certified care worker candidates such those who (i) would not study the Japanese language seriously, saying ‘I am not smart, so I cannot understand Japanese. Will you let me work instead?’ (ii) asked for longer vacation periods to go home; (iii) asked for higher salary and bonuses; and (iv) sent lots of money to their home countries, leaving them with little to live on in Japan.

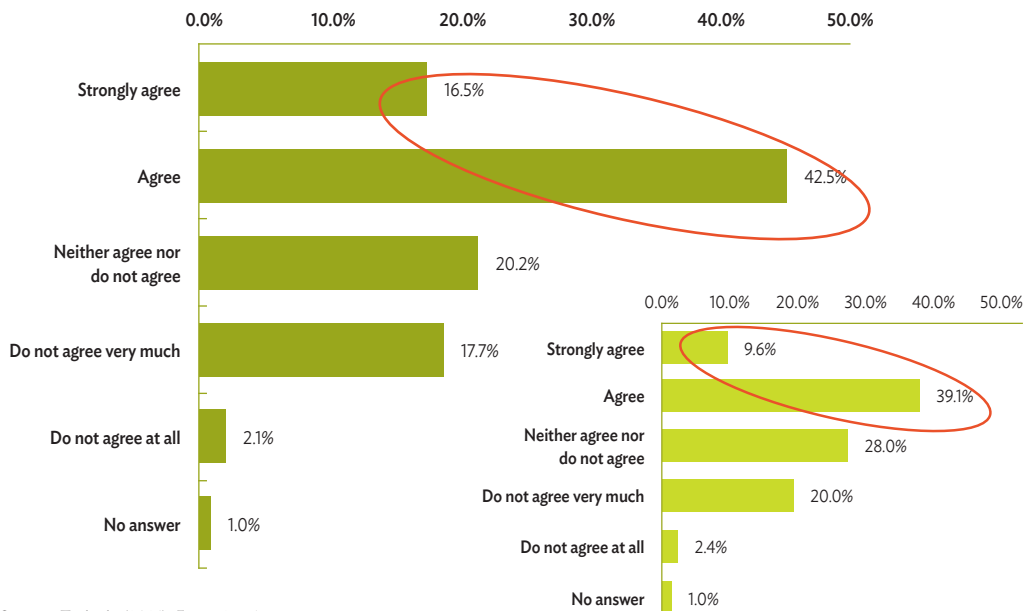
Administrators had many concerns before the arrival of EPA certified care worker candidates, but most were groundless or were exaggerated. Administrators came to feel there was a lot to learn from EPA certified care worker candidates such as smiling, sincerity towards nursing care clients, fundamentals of social welfare, humour, and gentleness. Administrators liked to help them study for the national certification exam. It is safe to say that the vast majority of candidates were performing very well.

2) Nationwide Mail Survey of 2014

The purpose of the mail survey was to explore LTC institution administrators' views on foreign care worker policy options, including recruiting EPA candidates, creating a new status of residence, *kaigo* (nursing care), and adding a new *kaigo* (nursing care) category to *ginou-jissyu* (technical intern training) program. A stratified random sampling was employed. Structured questionnaires were sent to randomly selected 3,932 LTC institutions for older adults from September to October 2014. Response rates were 18.4% for administrators (N=722) and 14.9% for care workers (N=586).

Figure 3.5 shows administrators' views on accepting foreign care workers. The care workers' response to the same question is in the lower right corner. About 60% of administrators agreed 'this would be a good idea.' The proportion of the response to the same question was lower for care workers (about 49%), showing they were a little more reluctant than administrators to work with foreign care workers.

Figure 3.5. Administrators' Views on Accepting Foreign Care Workers (N=722)



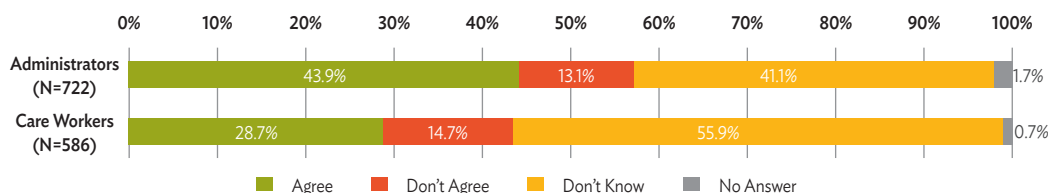
Source: Tsukada (2016), Figure 2, p.67.

(Care workers (N=586))

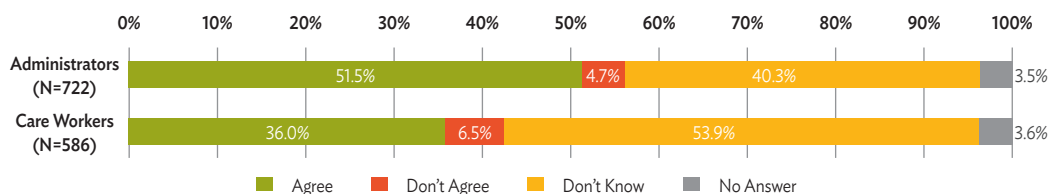
Figure 3.6 shows views on three foreign care worker policy options. Administrators indicated they were in the greatest agreement about ‘creating a new status of residence, *kaigo* (51.5%),’ followed by ‘adding *kaigo* area to *ginou-jissyu* (48%),’ and ‘increasing the number of EPA candidates (43.9%).’ Amongst care workers, only 36%, 38.6%, and 28.7% agreed.

Figure 3.6. Results for Views on 3 Policy Options

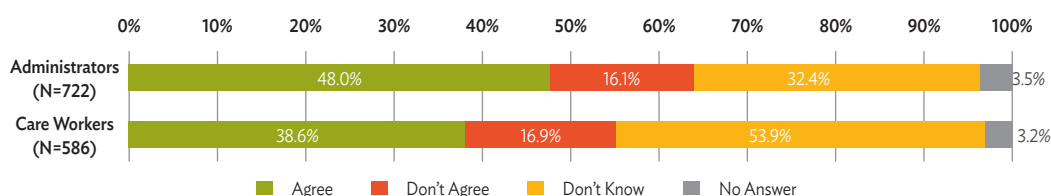
(1) Increasing the number of Economic Partnership Agreement candidates



(2) Creating a new status of residence, *kaigo* (nursing care)



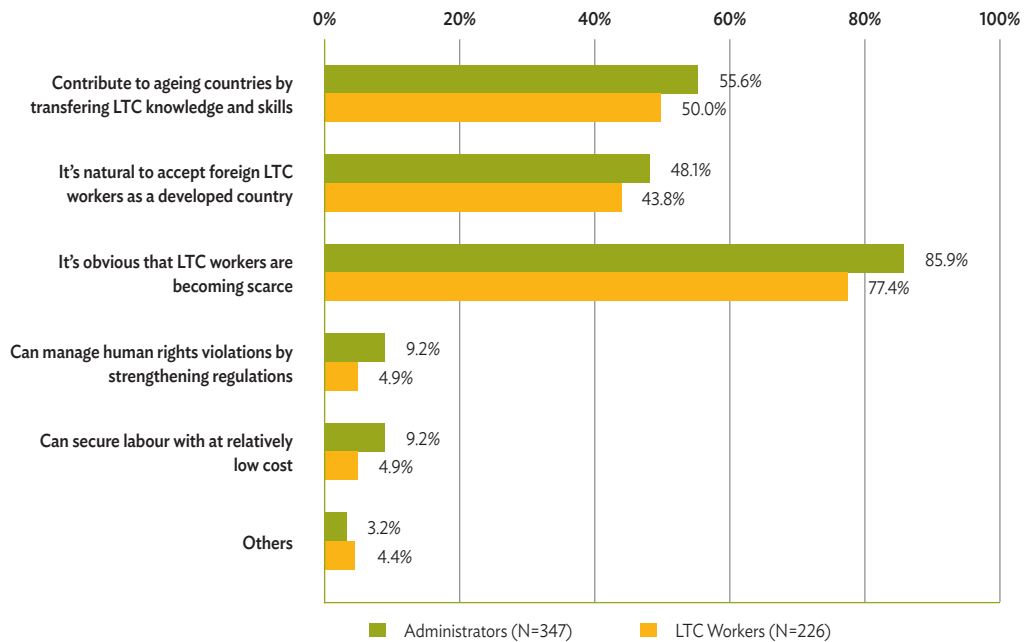
(3) Adding *kaigo* (nursing care) to *ginou-jissyu* (technical intern training) program



Source: Tsukada (2016), Figures 3–5, p.70.

Figure 3.7 shows why respondents agreed with the third policy option. Figure 3.7 shows that the most cited reason amongst administrators was ‘It’s obvious that LTC workers are becoming scarce (85.9%),’ followed by ‘Contribute to ageing countries by transferring LTC knowledge and skills (55.6%),’ and ‘It’s natural to accept foreign LTC workers as a developed country (48.1%).’ Care workers’ answers were similar to administrators’.

Figure 3.7. Reasons Why Respondents Agreed with ‘adding *kaigo* to *ginou-jissyu* program’



Source: Tsukada (2015), Figure 4, p.79.

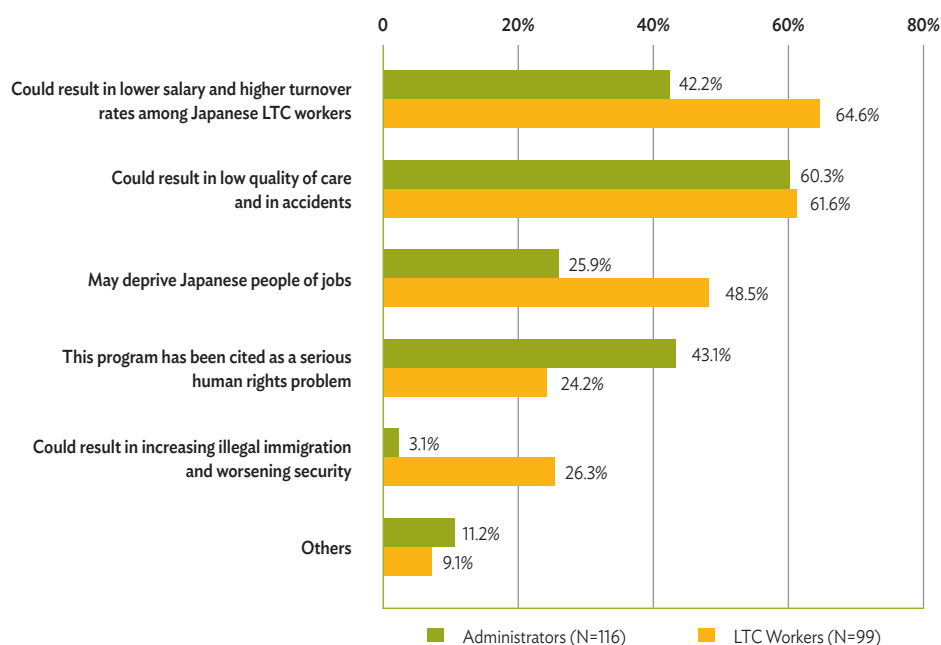
Figure 3.8 shows why respondents did not agree with the third policy option, ‘adding *kaigo* to *ginou-jissyu* program.’ The most cited reason amongst administrators was ‘It could result in low quality of care and in accidents (60.3%),’ followed by ‘This program has been cited as a serious human rights problem (43.1%),’ ‘It could result in lower salary and higher turnover rates amongst Japanese LTC workers (42.2%).’

However, care workers did not agree with the third policy option for different reasons. The most cited reasons was ‘It could result in lower salary and higher turnover rates among Japanese LTC workers (64.6%),’ followed by ‘It could result in low quality of care and in accident (61.6%)’ and ‘May deprive Japanese people of jobs (48.5%)’ and ‘Could result in increasing illegal immigration and worsening security (26.3%).’ Thus, care workers showed higher response rates than administrators, likely reflecting their feeling of insecurity.

(3) Future Directions

The Government of Japan has just started implementing new policies on accepting foreign care workers, hoping to increase the number of care workers. In 2016, however, foreigners made up only 1.9% of Japan’s total population and foreign workers made up only 1.6% of the total working population (JILPT, 2018). It is safe to say that the Japanese population is not accustomed to working with foreign workers.

Figure 3.8. Reasons Why Respondents Did not Agree with ‘adding kaigo to ginou- jissyu program’



Source: Tsukada (2015), Figure 4, p.79.

Japan is facing a substantial care workforce shortage. Options to solve this problem include increasing the number of EPA certified care worker candidates; attracting more older adults, women, and young people into the profession, including NEET (those not in education, employment or training) (about 0.26 million in 2015); calling inactive certified care workers (0.51 million) and home helpers back to the LTC field; and loosening status of residence requirements to accept foreign LTC workers.

The government set three goals: (i) call back displaced care workers; (ii) increase new entrants, including students and middle-aged and older Japanese citizens; and (iii) increase retention rates of care workers (Ministry of Health, Labour and Welfare, 2016b). To achieve these goals, however, working conditions should be improved, otherwise even foreign care workers will leave jobs that Japanese people do not want. Why? We are, after all, the same people.

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