

ORIGINAL RESEARCH

Return migration of Indonesian nurses from Japan: Where should they go?

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Abstract

Introduction: Indonesia has a vast resource of nursing workforce for supplying the world demand. Nationally, there is growing concern at the current flows of nurse migration, particularly from Indonesia to Japan. Indonesia Japan Economic Partnership Agreement (IJEPA) has opened the gate for movement of natural persons, not exempted of nurses. Through this program, the flow of skilled migrants from Indonesia to Japan has been facilitated by government of both countries. Furthermore, advanced health care facility and aging society in Japan has demanded more foreign nurses which are lead to nursing migration. This paper focuses on the challenges and opportunities specifically talking about the issue of return.

Method: Mixed method was employed, in the first quantitative section, data was collected by questionnaire. In the qualitative section, semi-structured interviews were conducted. The interviews were analysed with qualitative thematic content analysis. Data were obtained from twenty nurses, self reporting questionnaire and five nurses participated voluntarily in interview section.

Result: The results showed that 18 out of 20 skilled migrants were unemployed and sought a new job. Meanwhile, two returnee continue studying to a higher degree. Evidence from the interviews revealed that it seems it is very challenging for them to live in a home country and struggle with a real life. They were seeking vacancies and looking for the best one which is matched with their qualification.

Conclusion: Return migration would be very challenging and create difficulty for returning nurses to look for a new position and enhance their career. Facilitating return migration through specific program should be built. Making return attractive can increase the transfer of knowledge within a country and lessen the negative impact of brain drain.

Key words

Return migration, Indonesian nurses

1 Introduction

Indonesia has a great resource as a source for migrants including health migrants specifically nurses. Having more than 240 million of population with 655 study program ^[1] in nursing has created high production of nurses within a country.

This situation contributed to the flow of migration particularly to the developed country. After working in a destination country, and getting back to the home country, a new issue begins to emerge. Upon return, Indonesian nurses have to face a complex problem: Where should they go? Who should be responsible? What is the role of government? How can the ex-hirer country help?

Return migration is part of the migration process and refers to the act of going back to a place of origin or a habitual residence ^[2]. This return could be voluntarily or involuntarily. Japan and Indonesia formally began negotiations on a respective agreement in the year 2005. The implementation of this program was commenced in 2008. A number of Indonesian nurses and care givers are permitted into Japan to work impermanently under the program, only if they pass the national Kangoshi exam ^[3].

Temporary surplus of nurses

Even stated by WHO as one of 57 countries which suffered of critical shortages of health workers ^[4], and according to The WHO Global Code of Practice on International Recruitment of Health Personnel the active recruitment from those countries to the developed countries is not recommended ^[5]. Indonesia has an exception particularly in nursing workforce. The number of Diploma and Bachelor degree graduates in nursing year 2008 were 25,517 nurses and has increased to 27,909 nurses in year 2009. Ministry of Health (MoH) is projecting that the need of nursing personnel is 387,785 nurses in year 2014. Compare to the current number of available nurses, it is estimated there will be a nurse surplus around 57,172 ^[6]. This projection is in line with other statement that 15,000 nurses per year in Indonesia do not get proper placement ^[7]. Other researcher also stated that the number of nurses in Indonesia Recent data from one province in Indonesia, East Java province, shows that there are 55 nursing study programmes (diploma level) and 53 nursing study programmes (bachelor degree) which produce around 12,000 nurses per year ^[8]. This number will become a great potencial as a large exporter of nurses worldwide if it is managed proportionally. One of the solutions for this situation is sending nurses to foreign countries. Sending Indonesia nurses abroad aims to encourage Indonesian nurses to be able to transfer and to implement their knowledge and technology after they return to work in Indonesia ^[9]. To support this program, MoH of Indonesia through Center of Planning and Management of Human Resources for Health looks for government to government scheme to run a smooth placement. The Center is also developing a new concept to promote a brain circulation scheme in managing health workforce migration. This scheme expects health workforce to return to Indonesia after working abroad with advanced knowledge and experience.

Table 1. Number of Indonesian Nurses, coming to Japan based on IJEPA

Year Arrived	Total	Number Who Passed National Exam	Number Who Extended Stay in Japan	Number Who Returned to Indonesia	Quota
2008	104	24	27	63	200
2009	173	24	60	89	200
2010	39	3	ND	ND	200
2011	47	ND	ND	ND	200
Total	363	51	87	152	800

Note. ND=No data

Based on table 1, Japan government consistently offers quota of 200 nurses per year. Through IJEPA scheme, 363 nurses have been sent to Japan hospitals and clinics. This scheme started in year 2008 with total 104 nurses joined this program. 51 nurses out of 363 nurses have passed the national exam during their stay in Japan. During 2008 to 2011, there is a declining number of accepted nurses and applicants due to many reasons, for instance economy crisis and tsunami disaster in Japan. To date, there are 152 nurses going back to Indonesia for numerous reason, this number may be higher with regard to the complexity of migration.

Return migration is now known to be significant as more and more Indonesia Japan Economic Partnership Agreement (IJEPA) nurses who failed the national board examination for registered nurse in Japan, have to return to Indonesia. In the coming future, this situation may create jobless among high skilled workers, and negatively may affect Indonesia's health system. To utilize those ex-IJEPA nurses, the government of Indonesia and the government of Japan conducted a job fair twice last year. The job fair brought together the ex-IJEPA nurses with prospective employers such as Japan companies in Indonesia and some hospitals.

Return migration has received a little attention in a policy and research. This article focuses on the solution of managing return migration according the voices of ex-IJEPA nurses.

2 Subjects and methods

2.1 Subjects

Survey participants were recruited from ex-IJEPA nurses who attended the job fair on November 2012. Participants return for two reasons, either has completed the contract or failed to pass registered nurse exam in Japan. Twenty nurses who returned from Japan participated voluntarily in this study. Nonprobability convenience sampling was used. Prior to survey, participant reviewed the informed consent and signed for the agreement. Non-probability convenience sampling was used to recruit for the semi-structured interviews. Participants provided contact number information and according to the private communication, five nurses agreed to be interviewed. Interviews conducted in person or by telephone, were digitally audio recorded and lasted approximately 20 min.

2.2 Methods

Mixed method was deployed to explore nurse's life when emigrate. In the first quantitative section of the study, data was collected by a self-report survey (questionnaire). In the qualitative phase, semi-structured interviews were conducted to address findings arising from the questionnaire. Questionnaire and interview forms were developed by researcher and Center of Planning and Management of Human Resources for Health, Ministry of Health of Indonesia. A self administered questionnaire consisting of demographic data and open ended question related to live in Japan. Semi-structured interviews were conducted to address findings arising from the survey. Ex-IJEPA nurses were asked the following question. What is your reason for returning? What were the most influencing factors affecting your decision to return? What is your current position in Indonesia? Do you have any difficulty to find a new job in Indonesia? Please explain? Do you have any intention to go back to Japan? Do you interested to work as civil servant? Please elaborate? Do you have any other insights related to return migration? In this study, the interviews were analysed with qualitative thematic content analysis. The main focus was on describing, summarising and interpreting the manifest content. The analysis was mainly based on Graneheim and Lundman^[10]. The unit of analysis was the interview text about motivation of return. Everything in the text concerning experiences of return was included. The interviews were read through several times to obtain a sense of the whole. The text was sorted into two emerging content areas: decision of return and civil servant attraction.

3 Results

3.1 Quantitative findings

The response rate to the survey was 48.7% (n = 20) out of 41 nurses. The participants included a total of 20 ex-IJEPA nurses, 11 females (55%) and 9 males (45%) with an age range 28-39 years (mean age=33, SD=2.77). All participants from ex-IJEPA nurses batch 1 year 2008 and batch 2 year 2009. All of the nurses (100%) have been working in Japan almost three years, meaning that they have accomplished their contract. The respondent's salary ranging from 1200USD to 2000USD. In Japan, they were hired as a nurse assistant and the main role was given the human basic need. When they

were in Japan, they received different facilities from their hospital. Some got free apartment, insurance, leave duty, incentives and some did not. It depends on their workplace policy. In this research, participants return for various reasons. 11 out of 20 nurses decided to emigrate back home as they had accomplished their contract, 7 nurses return because of the family reason (pilgrimage, planning to marry, raising a child, safety), and the rest continuing their degree to the higher level.

3.2 Qualitative findings

Five nurses have been interviewed which is consisted of 3 female and 2 male. All participants voiced they have not got any job in Indonesia. The majority were applying the vacancy and waiting for the call. They voiced optimistic with the job market which they perceived as favor them "I have applied to several hospital and company, given my experience I believe they will hire me". Some voiced frustration with job market "it seems exceptionally difficult to find a job in highly competitive market, I am thinking to be an entrepreneur if they decline my application". To get a new job, they identified the need to actively pursue job opportunities. "That's why I came to the job fair, great hope some of the recruiter interested and hire me as their staff". The factors that influenced decision making in choice of return yielded two sub-themes: family and accomplishment of the contract.

Participants voiced a preference to stay close to family "I truly miss my family and would like to stay close with them". Other said "My family asked me to get back and go to Makah for pilgrimage". Raising a child also becomes an issue to attract homecoming "my first son graduate from the elementary school, for sure he need me beside him".

The contract of working in Japan is three years and can be prolonged for one year if they obtain a good grade (almost reach the minimum passing grade) in Kangoshi exam. Otherwise they have to go back to Indonesia with special condition, they can reapply to join the national Kangoshi exam in the next round. One of the most significant findings was the expiration of the contract. "I certainly would have to say that I have to go back as I did not prolong the contract". Other said that "My contract was expired and they will send me to the home country". For Indonesian, speaking and reading in Japanese language become an immense challenge, even though they have undergone 6 months training in Japanese language and also living in Japanese society for more than a year. It is not a guarantee for them to pass the Kangoshi exam in Japanese.

4 Discussion

4.1 Factors affecting decision to return

This research explored the antecedent factors influencing the decision of return. The finding support the hypothesis that family or life cycle related to their role in society become a pull factor. King (2000) stated that return migration is usually driven by a complex mixture of economic, social, family and political factors^[11]. Family or life cycle factors such as having one's children educated at home, planning to marry often become consideration to emigrate.

The basic causes of return are varied such as, economic, social, family or life cycle, and event political factors^[12]. Other recent data from International Labour Organization (ILO) described that the decision of return of skilled migrants from Phillipine were varied, such as personal illness, family related matter, deportation and others^[13]. It may be varied across the country as the motives also different. Around 50% of skilled migrants return to their countries of origin commonly after 5 years^[14]. In this case, ex-IJEP nurses have a special agreement with Japan government. They have to pass the Kangoshi exam within 3 years, otherwise they have to go back to home country. All of the respondents (100%) having at least 3 years working experience. The contract expiration (non-economic factor) could be considered as a push factor which generally having less influence to return than do pull factors. What is evident in this study was the fact that the return to Indonesia was a choice freely made by almost all the workers. They were aware that if they have finished their contract or they failed to pass the Kangoshi exam they had to fly back to Indonesia. This finding contrast with the original motive to migrate to Japan, economic motive having more influence for them to join the IJEP program^[15].

Nevertheless, Japan is always fascinating for Indonesian nurses, 15 nurses expressed that they would want to continue working in Japan if there were any chances. A 27 year old woman, an unmarried nurse is planning to continue studying in the current year for bachelor degree. She said that if she would have an opportunity, she still wanted to go back to Japan.

4.2 Return migration and civil servant

As return migration is the positive counterpart of brain drain^[16] and may strengthen the health system, the process of return should be facilitated by the government. According to the returnees answered, the majority (90% nurses) expect and prefer to be a government employee. Their voiced “Yes, I am very interested to be government employee to serve my experience to the nation”. Others prefer to be a civil servant as “I am willing to be civil servant as civil servant get many privileges from the government”. The magnet of becoming a civil servant has attracted thousands applicants to compete in a small number positions. Data showed that in 2012 in MoH formation, there were 41,921 applicants sending the documents to compete for 1416 positions^[17]. The benefit of becoming civil servant is health insurance, pension, remuneration in some departments, local government allowance in some provinces, and other benefits. The rest were not interested to be a civil servant as the salary is too low. “I am not interested in this time, I think the salary is not enough to suit my life”.

With the current moratorium policy on civil servants, it is unlikely for the Ministry of Health to request Ministry of State Apparatus to provide a privilege for the ex-IJEPA nurses or returnees to be recruited as the government employees. The job fair as an alternative solution was considered by ex-IJEPA nurses to be useful to help them in finding the most suitable job.

5 Conclusion

In conclusion, given the increase of return migration in the coming future, there should be a specific regulation to manage this migration. Since Indonesia and Japan have had a bilateral agreement, the point of returning nurses may be discussed in a higher level. Return migration may be facilitated through specific programmes, job databanks, job fair, and others. It is recommended that Indonesia should have a mechanism for systematically collecting data on returning nurses. Further research related to the characteristics of returnees and the circumstances under which they returned may revealed a new phenomenon on return migration.

6 Limitations

Since the study focused on ex-IJEPA nurses which is facilitated by G to G program, the findings may not be generalizable to other populations. Further research targeted nurse migrants other than Japan may be considered.

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