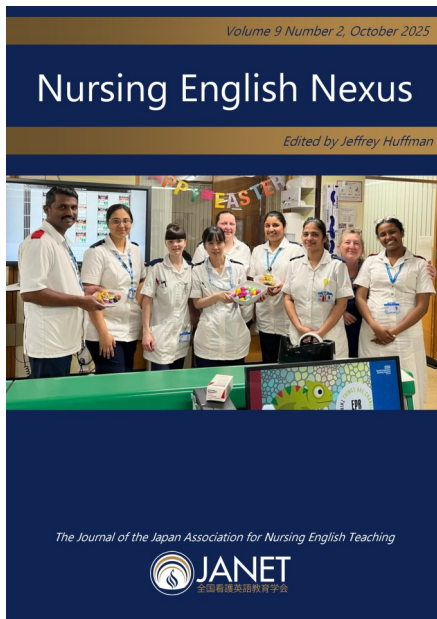


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Preparing Nursing Students for Providing Home Care Nursing for Foreign Residents in Japan: Insights from Practitioners

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Abstract: Demand for home care nursing services in Japan has been steadily increasing. Moreover, with increasing numbers of foreigners settling permanently in Japan, many patients receiving home care nursing services in the future will be people whose first language is not Japanese. This report presents the accounts of three nurses with varying degrees of experience about providing home care nursing services to foreign residents. The novice nurse noted that her intercultural communicative experiences in high school (exposure to non-Japanese classmates) and in university (healthcare-related intercultural communication presentations) helped to prepare her for potential communicative barriers with foreign patients in home care nursing settings. The two more experienced nurses indicated that they had not received any formal training in intercultural communication—they had effectively learned such skills on the job through contact with primarily East Asian (Chinese and Korean) home care nursing patients. The insights gained from all three home care nurses revealed that more should be done to prepare Japanese nurses for providing home care nursing services to foreign patients. In their role as conduits of intercultural communicative competence, nursing English teachers should devote more attention to activities that focus on intercultural differences relating to home and family dynamics and healthcare practices.

Keywords: home care nursing, intercultural communication, nursing English education

About the Authors: Paul Mathieson is a professor and the head of the Department of Basic Medical English at Nara Medical University, where he teaches both medical students and nursing students. His primary areas of research are English for specific purposes (ESP), academic vocabulary learning, and ESP/English for academic purposes materials development.

Yuka Sakai works in the Recovery Phase Rehabilitation Ward at Wakakusa Tatsuma Rehabilitation Hospital. Since her student days, Yuka has been interested in using English as a tool for connecting with people from different countries and cultures. She is considering becoming a full-time home care nurse in the future.

Home care nursing—that is, nursing care provided within the confines of a household—has a long and diverse history. Indeed, its origins go back to the founder of modern nursing, Florence Nightingale, who regarded the maintenance of a healthy home environment as an essential element in nursing care (Nightingale, 1860). The Japanese government supports the provision of home care nursing services through the Long-Term Care Insurance (LTCI) initiative, which was launched in 2000 (meaning home care nursing is covered under the national health insurance system). Most home care nursing services in Japan are provided via Home-Visit Nursing Stations (HVNSs). These HVNSs typically employ a range of nursing professionals (public health

nurses, midwives, and so on), and there are currently over 15,000 HVNSs in operation across Japan (Japan Visiting Nursing Foundation, 2021).

The increasing number of elderly citizens in Japan is expected to place further demands on home care nursing services in the future (Morioka & Kashiwagi, 2021). Over 25% of Japan's population was over the age of 65 at the time of the last national census (Statistics Bureau of Japan, n.d.). Furthermore, given that the percentage of the overall population in Japan who are foreigners is predicted to reach 10% by 2070 (Nakamura, 2023), a considerable proportion of the elderly population who will be using home care nursing services in Japan in the future are likely to be non-Japanese.

Accordingly, preparing Japanese nursing students to provide culturally-sensitive (and communicatively effective) nursing care to foreign patients within their home environments is something that nursing English teachers ought to consider. This paper is a report based upon a nursing English teaching and practice-focused presentation given by a recently-graduated Japanese nurse and an experienced nursing English educator at the 2024 Japan Association for Nursing English Teaching (JANET) Conference (Mathieson & Sakai, 2024). After briefly examining the nature and scope of home care nursing in Japan, this paper will consider the issue of providing home care nursing services for foreign patients in Japan based on perspectives from three Japanese home care nurses. In the final discussion section, these practitioners' insights are used to outline various measures that nursing English teachers can take to prepare nursing students for interacting with foreign patients in home care nursing settings.

The Development of Home Care Nursing in Japan

Home care nursing programmes began to appear as far back as the nineteenth century in the United States, Europe, and elsewhere (Rice, 2006). The provision of care for ill or dependent family members—particularly older adults—by other family members in the home environment has long been a core tenet of Japanese culture (Asahara et al., 1999; Elliot & Campbell, 1993; Maeda, 2004; Traphagan, 2006). This may have influenced the comparatively later development of a formalised home care nursing system in Japan—starting in the late 1970s and early 1980s, and being incorporated into the LTCI system in 2000 (Japan Visiting Nursing Foundation, 2021; Murashima et al., 2002).

Although there is perhaps a perception that home care nursing primarily involves nursing care for the elderly, home care nursing in Japan is, in

fact, provided to patients in a range of different contexts. These include care for patients with psychiatric problems (Setoya et al., 2008; Setoya et al., 2023), patients wishing to receive palliative care at home (Teruya et al., 2019), child patients with chronic conditions (Horino et al., 2021), and psychiatric care for foreign patients (Okazaki & Yano, 2017).

Yet despite the growing demand for home care nursing services in Japan during the past few decades, home care nursing service providers face numerous difficulties in meeting that demand. A large proportion of home care nursing agencies or departments are small, which has created myriad challenges in providing efficient and effective home care nursing services for those patients who need it (Morioka et al., 2019). In terms of the provision of home care nursing services to foreign residents in Japan, this problem is exacerbated by linguistic and cultural barriers, as well as the lack of undergraduate-level and in-service training in intercultural communication in Japan (Chiu et al., 2019; Nagamine & Joboshi, 2024).

Home Care Nursing for Foreign Patients in Japan: Three Practitioner Perspectives

Given the abovementioned issues regarding the provision of home care nursing services for foreign patients in Japan, it is important to obtain insights from nurses who provide such services. This section of our report focuses on Japanese home care nurse views about providing home care nursing services to foreign patients in Japan. Input from three Japanese nurses who have experience in providing home care nursing services was collected for this report. The data was collected in the form of semi-structured interviews conducted by the first author in Japanese (the three participants' first language). Prior to conducting the interviews, the purpose for which the data was being collected was outlined to the participants. In addition, consent was obtained from all three participants to use their

(anonymised) interview data in the first and second author's research.

The three practitioners have varying levels of experience working as home care nurses, as is shown in Table 1.

Table 1
Participants' Home Care Nursing Experience

Name*	Gender	Home Care Nursing Experience
Haruka	Female	Less than 1 year
Azusa	Female	Less than 5 years
Naoko	Female	Over 15 years

Note: * Pseudonyms have been used to maintain participants' anonymity.

All three participants undertook their undergraduate nursing training in Japan. Yet despite their all having received English language training as part of their nursing studies, the extent of their intercultural communicative training varied considerably. Haruka's compulsory English courses at university included some practice in intercultural communication—most notably, preparing and giving English presentations about cultural topics that impact on the provision of healthcare in Japan for selected (non-Japanese) ethnicities in her second-year nursing English course. In addition, Haruka also took several elective (non-credit) advanced English courses throughout her four years as a nursing student. These included areas as diverse as clinical communication, medical and nursing ethics, and English discussion and debate. However, despite also taking compulsory English courses during their undergraduate nursing studies, neither Azusa nor Naoko reported receiving any intercultural communicative training in either their undergraduate or postgraduate studies.

Haruka's core nursing training during her undergraduate studies also entailed home care nursing visits within Nara Prefecture. These visits involved nursing students in small groups (typically two students) visiting a patient at home with an experienced home care nurse. During such

visits, Haruka not only had numerous opportunities to observe the provision of home care nursing interventions (administering medication, bathing, stool removal, and so on), but she was also able to both witness and participate in communication with home care nursing patients. This included some interactions with non-Japanese patients. For example, Haruka was involved in the provision of home care nursing services for an elderly Chinese patient who is a long-term resident in Japan. Although he was able to communicate reasonably fluently in Japanese, Haruka observed that his strong Chinese accent limited the extent to which he could be clearly understood. However, Haruka noted that she did not experience much difficulty in understanding what the patient said, which she attributes to her exposure to non-native Japanese through her Chinese and Korean friends in high school. In addition, having some understanding of Chinese culture (specifically, regarding beliefs about healthcare) through her second-year nursing English course also helped to provide some contextual information regarding the patient's situation.

Both Azusa and Naoko reported having had some contact with non-Japanese patients in home care nursing settings. However, these encounters were all with either Chinese or Korean patients. Interestingly, much like Haruka's comment about her experience with a Chinese home care nursing patient, Azusa and Naoko noted the fluency with which their non-Japanese home care nursing patients were able to communicate in Japanese. In this respect, Naoko commented thus: “言葉壁より異文化壁 [kotoba kabe yori ibunka kabe]”, which translates as “rather than a language barrier, there is an intercultural barrier [with non-Japanese patients]”. Both Azusa and Naoko noted that home care nursing encounters with non-Japanese patients revealed cultural differences regarding matters such as familial hierarchies, bathing customs, and healthcare treatment

practices. This is somewhat problematic considering that neither Azusa nor Naoko reported having received any formal intercultural communicative training as part of their nursing studies or whilst working as nurses.

Discussion

Having some understanding of and exposure to different cultures during their nursing education and early-career training can provide Japanese nurses with some of the tools that are necessary for providing home care nursing services to foreign patients. Naoko stated that the lack of intercultural communicative training during her undergraduate and postgraduate studies left her somewhat unprepared for her home care nursing interactions with foreign (predominantly Korean) patients. Nevertheless, Haruka commented that developing a broad understanding of the customs, practices, and beliefs among different cultures—while clearly being important—does not always translate into intercultural communicative success when providing home care nursing services to non-Japanese patients. She highlights that it is important not to essentialise non-Japanese patients by automatically assuming that they conform to practices or beliefs that are typical of the patient's culture. Rather, through clear and structured communication about the patient's healthcare, and through open and continuous dialogue with patients themselves, the home care nurse can consider what are appropriate responses and actions for individual patients—irrespective of whether they are Japanese or non-Japanese.

Given that the demand for home care nursing services is only set to increase due to Japan's ageing society (Morioka & Kashiwagi, 2021), and given also that the number of non-Japanese residents in Japan seems likely to grow considerably in the coming years (Nakamura, 2023), there is clearly a need for Japanese nurses to be better prepared for providing appropriate

home care nursing services for foreign patients. Moreover, rather than placing the onus for doing so on already stretched hospital nursing departments, it is perhaps better to address this problem during nursing students' pre-service training—in particular, drawing upon ESL teachers' "acculturator" role (Farrell, 2011, p. 58). Many nursing English programmes in Japan already incorporate teaching intercultural communicative competence as part of their courses. Examples include healthcare-related intercultural communication poster presentations (see Blodgett et al., 2022), collaborative online exchanges between nursing students in different countries (Casenove, 2023; Niitsu et al., 2023), intercultural classroom exchanges between Japanese nursing students and international students (Nagamine & Joboshi, 2024), and multimodal intercultural communication workshops (Chiu et al., 2019). Clearly, however, more needs to be done at the course administrator and institutional levels to implement more comprehensive intercultural communicative training for Japanese nursing students.

In terms of specifically preparing Japanese nursing students for providing home care nursing services to foreign patients in Japan, there could be more targeted intercultural training. For example, current demographic data for foreign residents in Japan could be used for presentations or role-plays focusing on cultural/linguistic groups that Japanese nursing students are most likely to encounter (Blodgett et al., 2022). In addition, for role-plays or discussion activities, specific attention could be directed to aspects of the home environment that differ or that are likely to differ between the Japanese culture and other cultures. This could involve matters such as household dynamics (living/sleeping arrangements, family hierarchy, and so on), as well as cultural attitudes towards and practices surrounding issues such as nutrition, pain relief, and death and dying.

Conclusion

Home care nursing is becoming an increasingly crucial and widespread part of the healthcare landscape in Japan. The dual impact of the accelerated demand for home care nursing services in Japan (due to its ageing population) and the rapidly increasing number of non-Japanese residents who may require home care nursing services in the future means that nursing English educators ought to be preparing Japan's future nurses for interacting with foreign patients in their home environments. This paper has identified gaps in nursing training that may currently hinder Japanese nurses from providing quality home care nursing services to non-Japanese residents. It is our hope that in the coming years, nursing English educators across Japan will dedicate more time and energy to some of the activities that were discussed in this paper (such as interculturality-themed poster presentations, role-plays, and classroom exchanges). Through such initiatives, Japan's future nurses can aspire to provide effective, efficient, and empathetic home care nursing services to all patients in Japan, regardless of the patient's cultural or linguistic background.

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