Innovations in aged care: study tours for Japanese health professionals—sharing insights

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Abstract

With Australian health care management is becoming of increasing interest to Asian organisations, and there have been many advances made in the conduct of informative tours. This article presents a summary of key points to be considered when planning and implementing study tours for health professionals from Japan, especially in the context of aged care. By providing an outline of Japanese culture and traditions, is provided and the mostly anecdotal experience will serve to inform readers about how to conduct such tours so that to meet the learners’ needs are met while also preserving the dignity of the aged persons involved. The key issues to be addressed are described using the mnemonic of S.T.U.D.Y. T.O.U.R.S. – where the key letters stand for Specifications, Translation, Understanding culture, Delivery of education, Yen, Timing, Organisation, Unique needs, Residents’ values and Safety.

The intent of the article is to encapsulate the many factors to be planned and implemented to achieve the outcomes required by the Japanese visitors and to ensure both the necessary professional and financial rewards for the Australian hosts.

Australia is a recognised venue for study tours

While there is plenty of information about Japanese culture, the literature regarding the conduct of study tours in Australia for Japanese health professionals is very limited. This article draws on the experience of the author, who has conducted numerous study tours for more than 2000 Japanese health professionals and has visited Japan often. Within Japan, the pressure to deal with, and support, its rapidly ageing population necessitates looking at other models of aged care. Australia is well placed as a venue to explore and exchange ideas regarding the management of increasing numbers of aged persons. The small time difference, a favourable exchange rate and, importantly, a model of care that has federal and state government support all attract health professionals who wish to explore alternative models that depart from a reliance on family care. Japanese people have long recognised Australia as a venue for their traditional one-week holidays; this ability to be able to take only a week’s leave also translates positively when organising a study tour.

Cultural differences

Before addressing the specific components that need to be considered when structuring a study tour, it is important to first have a basic understanding of Japanese culture, particularly its differences when compared to that of Australia and other western societies.
Much of the available literature focuses on the Japanese as a tourist rather than the visiting professional seeking to understand another country’s organisations and procedures. One of the most useful sources discusses differences perceived by the Japanese using specific headings relating to the cultural dimensions of power distance, uncertainty avoidance, individualism and collectivism, and masculinity and femininity (Reisinger & Turner 1999). When considering these areas more specifically, many people would have a perception of the “inscrutable” nature of the stereotypical Japanese businessman/executive. The Japanese prefer to take their time making decisions and view Westerners’ rapid approach towards achieving specific goals with distaste. The slow pace of Japanese decision-making can prompt Western negotiators to make hurried repetitions and on-the-spot revisions, or compromises based on a perception that the Japanese need further convincing of the merits of a proposal (Lafayette de Mente 2000a).

Japanese society has a very formal culture and people behave according to strict social rules focusing on indirect and implicit communication, and where silence is regarded as a symbol of power and strength. Some consider that the Japanese are more astute at interpreting non-verbal cues and the context of a discussion, whereas Westerners tend to focus mostly on the content. The Japanese are also often reluctant to say no directly and quickly when they are not interested in a proposal (Hasegawa 1998), but with increased exposure to Western influence this is very slowly changing. One author refers to the “divide and complicate syndrome”, considered one of the great frustrations when negotiating deals with Japanese (Lafayette de Mente 2000b). The practice of dividing various functions into their smallest parts and requiring that each one be done by someone different can contribute to the slow decision-making process. Individuals wanting to make swift decisions regarding the planning of study tours will need to consider this closely and try to curb the natural desire to finalise promptly.

The Japanese also tend to prefer structure and order in their environment and dislike uncertainty. There is a general preference to avoid conflict, competition and risk-taking and to focus on preserving social harmony. It is important that the Japanese avoid threatening situations in which they have to deal with strangers or that are characterised by a high degree of anti-conformity (Reisinger & Turner 1999). This can translate to a need to know intricate details and definite timetabling of events, schedules for lectures, accommodation and transport — requiring study tour planners to ensure careful planning and organisation and the provision of clear documentation.

One of the most obvious differences between Japanese and Western society relates to the collectivist culture evident in Japan as and its contrasting with the focus on individualism focus in countries such as Australia. While Western cultures value independence and the achievements of individuals, the Japanese focus more on developing strong groups, considering the needs of the group, and focusing on group consensus and group goals (Reisinger & Turner 1999). The Japanese can tend to see the individualistic focus of Westerners as being selfish, resulting in friction, and disharmony. The strongly masculine focus of Japanese society, their more linear culture focusing on social succession, hierarchy and submission to elders and superiors could be a little uncomfortable for women when negotiating with the Japanese. The development of mutual respect, the importance of trust, and fostering relationships assists this problem and promotes a deeper understanding of the culture.

**Aged care support in Japan**

In Japan, those over 65 years of age are predicted to form 27% of the total population by 2020 compared with Australia’s 17% (% (Australia/Japan Partnership 2000). Such a rapid increase in the proportion requiring aged care has stimulated much debate about strategies appropriate to many new considerations about how such care may be implemented in Japanese society. There comparative populations of these countries are 127 million people in Japan compared with 19 million in Australia in 1999 (Australia/Japan Partnership 2000).

The role of nurses in Japan is also markedly different to that within Western societies. Nurses are perceived as being educated and caring but ultimately subservient to physicians. Their role encompasses caring for the sick, or disabled, and women after childbirth; and to assisting physicians with examinations and treatments (Primomo 2000).
As in most countries there are many levels of nursing staff, but however licenses to practise nursing are issued for life and renewals are not needed. This contrasts markedly with Western societies, which require annual renewals or statements of competency. Statistics data from 1997 indicates that most Japanese nurses have diplomas (64.4%) and only about 1% have a Bachelor of Nursing degree (Primomo 2000).

About 2.9% of nurses are male, 63% are married, and 87% of those who are married have children. Nurses account for about 4.4% of the total female employment (Primomo 2000). Minami (1991) highlighted that, while professional socialisation tends to be dominated by western views and values such as individualism and autonomy, confusion is often created for nurses faced with contrasting Japanese traditions and values, —such as group and family loyalty.

The social security system in Japan supports those affected by poverty, unemployment, sickness and injury, and the aged. A nationwide universal social health system ensures that all Japanese citizens are covered by compulsory government or employee insurance covers all Japanese citizens (Primomo 2000). The system relies on co-payments for services and with premiums are based on income levels so that the wealthy subsidise those needing assistance, such as the elderly and disadvantaged (Naoki 2000). With increased exposure to Western values, materialism and prosperity have become increasingly valued in Japan while compassion, caring and spiritual values appear to have been reduced. Thus As a result, the ageing of the Japanese population has resulted in a reduction in the compassion for the poor, elderly, and disabled.

Healthcare expenditure in Japan has doubled in the past 15 years and in the 1990s the growth rate for healthcare expenses outpaced exceeded the growth in national income due to a slow Japanese economy. This is predicted to continue. The average length of stay in hospitals (36.2 days in 1992) is significantly higher in Japan than other countries (Primomo 2000). The emphasis on health, the implicit duty to care for family members, and the collective nature of Japanese society underline the country's effort to provide comprehensive healthcare and value for services.

Since the 1960s, Japanese society has been building its infrastructure to care for its rapidly increasing elderly population.

In 1991, a home visiting nursing care system was added to provide community-based home-care to assist people to remain as independent as possible. In 1997, a long-term care insurance (also called Nursing Care Insurance) Act was passed and came into force in April 2000. It was implemented in April 2000. The system reduces the reliance on people's own families (usually the women) to provide the majority of nursing care for bedridden elderly persons (Higuchi 2001).

It also allows users to choose the context of care services they want to receive: —whether to be admitted to an institution, or stay at home, and the type of in-home care they prefer. Another effect from the implementation of this long-term care insurance is the introduction of the principle of competition, with the introduction of 'for-profit' businesses and competition between various levels of 'for-profit' healthcare providers. This competition is expected to enhance the quality of services and to integrate medical and welfare services, with both being financed paid for by the long-term care insurance as determined by a care manager (Naoki 2000).

As with any new system involving proposing to make radically changes to the provision of way healthcare for the aged, is provided there have been a number of problems requiring an urgent need to seek further information from countries more familiar with providing this form of aged care. From an early initial reliance on institutional care, Australia now is moving towards increasing emphasis on the provision of care in the community. This has resulted in a rapid growth for of community care services and lower-level institutional care — hostels and personal care. Of the nearly 17 million people over 65 years of age in Japan in 1995, about one million were in institutions while 140,000 received some form of long-term care at home. There has been increasing interest in hospice programs but this is slow, in part due to institutional and cultural barriers (Primomo 2000).
Tour planning

Having briefly addressed some of the key differences between the two cultures generally and specifically in relation to the structure of their aged care system, these concepts will now be applied to the organisation of study tours that foster exchange of information regarding aged care.

Specifications

As previously discussed the Japanese are very keen to know the intricate details regarding tour planning, who they will meet, what is the status of these contacts, the size of the institution etc. A visit to a Japanese health facility will see you emerge with extensive information regarding bed numbers, staff ratios and like. This information is also highly sought-after by Japanese visitors, often before a visit to a hospital or aged care facility. Traditionally in Australia, this level of insight is not readily available in the printed form. The suggestion is to provide a copy of an annual general report, if available, and suggest that detailed questions can be addressed as part of the tour of the facility.

Specifications for the study tour are best provided in the form of a grid detailing time, places, and events. Figure 1 shows an example is provided in such a grid Figure 1.

Paradoxically, it may be difficult to elicit the same amount of details about your potential guests regarding numbers to be anticipated and health professional ranking. However, it is best to pursue this information as in study tours a host needs to know at what level to deliver any presentation regarding aged care needs to be delivered. A potential calamity in the conduct of study tours is the mismatch between the expectations of the client and the standard of the study tour. Some study tours are combined with either holidays or entertainment; while others are very much have a heavy emphasis focused on the acquisition of knowledge and detailed exploration of the Australian system.

Translation

A common misunderstanding is that interpretation made of the Japanese is that they all speak and understand English. It is correct to assume that English is taught as part of the educational processes, but however very little English is spoken in Japan and the use of English letters in signage is uncommon except in international hotels in the largest of cities. Therefore, if one is required to deliver a lecture, it is important that to show some Japanese text, for example on an overhead giving the main points of a lecture, can be shown to keep the Japanese audience focused while making the presentation is given in English.

The translation from Japanese to English and vice versa is not a complex task. The expense of simultaneous translation is often prohibitive so therefore a more common approach is consecutive interpretation of the delivery of a small amount of information in English.

A formula that has proved successful is the use of the most qualified interpreters for lectures and a lesser (student), for hospital visits. The use of Japanese exchange students is to be avoided as the level of interpretation required is often beyond their experience and can lead to tension and no return visit to your establishment by other groups. Japanese level of interpretation can be determined by standards such as those prescribed by the National...
Accreditation Authority for Translators and Interpreters. It is valuable to use native Japanese speakers who are familiar with the cultural nuances of the Japanese communication style, as they may be able to differentiate between words spoken and their true meanings and how to understand the real intentions of the Japanese.

Understanding culture

These cultural preferences have a significant impact upon the design and conduct of study tours. Statements that demonstrate that you realise the cultural differences are highly appropriate, as it indicates to the Japanese that you have made the effort to make an initial study or understanding of cultural mores and nuances. Another suggestion if you are organising study a tour is to provide the agencies visited regularly with a summary of key Japanese cultural mores to the agencies to be visited regularly. This can facilitate a degree of comfort and understanding.

Study tours for Japanese health professionals need to reflect their specific cultural expectations, particularly in regard to timing and aesthetics, building relationships, deferring to seniority and respect for others’ positions. It is important to foster trusting relationships, expressing thanks and appreciation by re-establishing relationships before moving on to specific project-related matters.

Delivery of education

In a highly masculine-oriented Japanese culture, the intellectual achievements and professional competence of individuals are extremely important. Japanese society values training and education, which are seen as preparation for life. When study tours involve predominantly female groups, such as nursing students, the delivery of education needs to recognise their usual cultural perception of the role of teachers and students. Teachers in Japan are called sensei and are revered and respected.

Traditional Japanese education is not one that promotes questioning but rather accepting the word of the teacher. It becomes a challenge for those conducting study tours to foster the exchange of information by promoting an environment where such students can feel comfortable asking questions of the teacher. This can be done by reminding visitors that you understand their relationship with teachers. However, in Australia it is expected and accepted that questions are asked, particularly as participants have travelled far to acquire the knowledge so need to take the opportunity. Do not be surprised that your Japanese colleagues take photographs of your overheads, rather than write down the information. Another cultural aspect of Japanese is their delight in playing games which, to Western eyes, may seem trivial. A good catalyst to overcome this strong cultural difference is the rewarding of participants with gifts for asking the first question. It has been found to be a good catalyst to overcome this strong cultural difference.

Yen

Given the rapid rate of change within currency comparisons, it is important to consider the exchange rate when calculating the costs of study tours for Japanese visitors. The GST also needs to be incorporated where applicable. Where visits to various healthcare or aged care venues form part of the study tour, it is worthwhile to structure payment for such visits as a donation to avoid excess fees. The Japanese are very sensitive to value for money and about making suitable deals for the study tour.

It is not unusual to have there are often multiple requests for change of structure and numbers of attendees once the study tour has been agreed to. This needs to be considered when formalising arrangements to ensure that the study tour operator is not disadvantaged by last-minute changes from their Japanese counterparts. There needs to be a finite position needs to be taken and study tour operators need to be encouraged to defend it. An approach to costs is to establish a range of fees for a study tour so that one can tailor a cost within this range, for example $75-$150 per person per day, depending on specifications.

Timing

In the predominantly Japanese masculine society punctuality is seen not only as a sign of good manners and respect for others but also an indicator of professionalism and performance. It is very important to provide that lectures, tours, meals, and transport are provided at the predetermined time and, if unexpected delays are encountered, then explain alternative strategies must be explained to the Japanese visitors. This also considers the Japanese collectivist culture and their preference to avoid uncertainty. When planning timetabling, the
organiser needs to consider any necessity to incorporate any translation in the delivery of educational sessions. A general rule is to present only half as much as one could possibly present in the time allowed, but however this can be enhanced by the standard of interpretation.

**Organisation**

The hallmark of an effective study tour is inextricably linked to the organisational ability of the study tour provider. Efficient organisation that recognises the individual needs of the Japanese people and provides them with a time efficient and cost efficient study tour will be greatly rewarded with future study tour visits. Clear delineation of what is, and what is not, included within study tour funding proposals will ensure that both parties understand their responsibilities. The following guide in (Figure 1) has been found to be most effective in study tours conducted by the author to date, and it also makes very clear the limits in commitments for which you will assume responsibility. If one is providing more or less services then they need to be added or deleted as required.

**Unique needs**

There are a number of unique expectations of the Japanese that many Westerners may find uncomfortable or superfluous, but which are essential to incorporate into a study tour to promote valuable relationships. The giving of gifts is an important component of such relationships and the type and manner in which gifts are given are particularly significant. Exchanging gifts is an expected tradition between visiting cultures and there are specific expectations the study tour organiser needs to be aware – such as the choice and presentation of such gifts, and the time they should be time of opening of same specific expectations about which the study tour organiser needs to be aware. Gifts need only be small items but they need to be stylishly packaged, be of a suitable quality, and are exchanged on either greeting or departing but are not opened at the time of the exchange.

The provision of food supplies at mealtimes for Japanese visitors needs to incorporate their specific preferences and to consider the characteristics of the study tour cohort, presentation, and packaging. The previously discussed importance of punctuality is also relevant when dealing with meals. The Japanese have extremely high expectations of service and are particularly keen on details, aesthetics, quality and service.

Usually a final, departing party, provided by the Japanese visitors, forms part of the study tour and there is a distinct protocol associated with the departure of guests from such an event. Where Australians are used to partying until they have had enough, if an event organised by the Japanese visitors indicates a finishing time of 10pm then that is the time that the guests must leave, because no one else can leave until the guests have departed.

The wearing of name badges, and exchange of business cards is a very useful strategy to increase the comfort level of the Japanese as such items allow them to determine the status and seniority of the person to whom they are introduced. This provides comfort in the subsequent relation-building strategies and it can be particularly beneficial to have some Japanese translation of the name and title of the individual on the business card. This assists with formal introductions and helps the Japanese to determine social positions of the introduced persons.

Australian hosts should also consider Japanese culture during introductions by becoming aware of how they should respond this person; bowing instead of handshaking, referring to the Japanese by their second names, and using official titles or functions instead of first names. It also fosters politeness as the ideology of the Japanese formal culture emphasises being polite, courteous and adhering to rules of social etiquette. In Japan politeness is an expression of good manners, rather than kindness or respect, with the rules of politeness are designed to prevent conflict, damage of reputation, and to preserve social harmony (Reisinger & Turner 1999).

**Residents’ values**

The primary aim of study tours in recent times has been for the Japanese to gain insight and experience in the way that Australia organises and implements aged care. The author’s own experience has been with arranging tours of nursing homes, hostels, and hospices. These venues are the homes of the elderly people and there needs to be consideration and respect given before outside visitors are brought into their environment. It is also important to also recognise that some aged persons still have strong feelings regarding
the Japanese and their involvement in the war. Providing an adequate briefing for the staff in the venues can ensure that residents have the opportunity to participate or to refuse to be part of the study tour. 

Try not to over-use the same venues and to monitor the use of each venue. The author has found it valuable to use only groups of 20 divided into two separate cohorts with one group on tour and another group attending an educational session in the venue. This ensures that residents are not overwhelmed with large groups of enthusiastic and curious Japanese visitors. It can be valuable to familiarise the venue with the Japanese enthusiasm for taking of photographs and to gain prior approval by the residents. For an effective study tour, it is also essential to consider an appropriate time for a visit in relation to the activities of the centre.

Safety
As previously discussed, the Japanese prefer to avoid any possible risk associated with travel or tour arrangements and will usually require the newest coaches, Japanese-owned and operated hotels, and environments supporting a collectivist culture. Study tour organisers need to consider the safety aspect when planning arrangements. The author has found, however, that many study tours arrange with separate organisations for the educational component and the more “domestic” arrangements such as travel, accommodation, and party.

Conclusion
The conduct of study tours for Japanese health professionals has the potential to bring rewards to the hosting organisation and all individuals. Paramount in the delivery of these events is a deep understanding of Japanese culture and the similarities and differences between Japanese and Western cultures. An understanding of healthcare systems, especially in relationship to the delivery of aged care, provides a link between the participants and organisers. Relationships established as a result because of successful study tours can potentially produce long-lasting relationships allowing the exchange of information and visits to explore common issues and different approaches, as Japan also has many strategies that Australia could examine and potentially adopt. Study tours do not just happen and the adoption of a formula to cover essential aspects will ensure a mutually rewarding experience.

References


