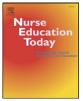
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An investigation of the basic education of Japanese nurses: Comparison of competency with European nurses

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SUMMARY

Background: A few studies have compared nursing education systems of Japan and Europe, particularly focusing on competency.

Objective: We evaluated the competency of registered Japanese nurses by comparing it with that of European nurses; the implications of evaluation for the education of nurses are discussed.

Design and participants: Subjects were 468 European graduate nurses and 100 Japanese nurses. Study used data from the Graduates in Knowledge Society (REFLEX) survey in Europe and the Japanese language version of REFLEX (2006) used in a survey of Japanese nurses.

Methods: The questionnaire referred to the survey items of REFLEX modified for use in Japan. Items common to the Japanese and European surveys were

- ⁽¹⁾ The importance placed on university course elements while at university
- ⁽²⁾ Nineteen items of competency: for the abilities acquired in the present job ('Acquired skills') and those considered necessary to perform the job ('Required abilities on the job')
- ⁽³⁾ Usefulness of subject matter taught at university to the current job

Results:

- ⁽¹⁾ The important course elements in Europe were 'Internship, work placement' and 'Lecture' while those in Japan were 'Theories and paradigms' and 'Lecture'.
- (2) The mean values for 'Acquired skills' were 5.06 for Europe and 3.73 for Japan and those for 'Required abilities on the job' were 4.86 for Europe and 5.16 for Japan. In Europe, no significant gap was observed between the above two scores, but in Japan, a big gap was found, particularly in relation to 'Ability to assert your authority'.
- ⁽³⁾ In terms of the usefulness of university-learned nursing education, Japan scored significantly lower on all five items.

Conclusions: The content of basic university education for nursing is directly linked to the workplace in Europe but not in Japan. A comparison of competencies shows that in Japan, self-evaluation scores are low and expectations are high.

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Introduction

The training of nurses in Japan after WWII began, as in many other fields, with a directive of the General Headquarters (GHQ) of the occupying US Forces. The GHQ urged Japanese that they should focus on the development of training facilities (Sakaki, 1998; Hirao, 1999; Yoshimoto, 1996). It was as late as in the latter half of the 1990s, universities came to play a central role in the basic education

of nurses in Japan. The availability of nursing courses on the university level has grown in recent years in response to societal needs; in 1990, the country had only ten universities offering nursing-related programs, but in 2010, 190 universities were offering such courses.

Aconcomitant shift took place in nurse training in post-war Japan, where Florence Nightingale's *Memories of the Crimea* had almost been regarded as sacrosanct, when *The Nature of Nursing* by Virginia Henderson from the US came to serve as the basic frame of reference in the education and training of nurses. The Henderson work deals with the realities of nursing in the US (OECD, 2004, 2005; Takahashi and Mikami, 2000; Murakami, 2002).

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In Europe a new system of mutual diploma accreditation was introduced in 2007 based on EU directives (at least 2005/36/EC): a diploma earned in an EU member state, regardless of the academic discipline, is to be treated as its equivalent in any other member state. This system, presupposing that a diploma requires at least three years of academic training provided on essentially the same level throughout the Union, is really one of mutual trust (Inoue, 2011; European Commission, 2005).

Background

Few studies have been conducted in which the nurse education system of Japan is compared with that of Europe. Part of the reason for this is that the Japanese system is modeled on the American system. Nor has there been research comparing Japan and Europe in terms of competency in nursing, though some studies have compared Japan with the US and Australia in this respect (Tateishi, 2008). Historically in Japan, competency in nursing has focused mainly on the management of nursing personnel, and it has been construed as an element in employee evaluation (Maruhashi, 2001; Hirai, 2002). Competency has been defined in Japan as 'a nurse's capability that is measurable against a standard set on a selection of abilities and behavioral traits expected/required of a competent nurse which would routinely help her to achieve a high level of performance. Competency is meant to be a quantitative measure, and as such, it does not take into account her experience as a nurse, which is presumably reflected in her overall score in competency' (Watanabe, 2003).

As a measure of enhancement of nurses' competency, some research has attempted to relate it to the clinical ladder concept (Asakura, 2005). Sandar V. Dunn, e.g., analyzed competency qualitatively by participatory observations. Roger Watson and others compiled a report on the published results regarding competency, in which they concluded that, depending on the degree of clarity to which the competencies were defined and stated, they were able to measure the performance of the nurses (Watson et al., 2002). And Ritta Meretoja and her team developed a 72-point self-estimation scale to measure competency (Meretoja et al., 2004), and they investigated the capabilities required of nurses from the perspective of career development.

The concept of competency as proposed by While in 1994 became widely known to Japanese nurses through Ibe's, 2002 translation: 'knowledge, techniques and abilities', which is in contrast to competence as 'what people are able to do rather than what they know' (While, 1994; Ibe, 1992, 2002).

This study compares university-educated nurses in Japan and those in various European countries in terms of their basic education program in nursing and a certain number of competency elements. All nurses analyzed in the study, Japanese or European, were trained in essentially the same Western framework of nursing with negligible differences. (The reader is reminded of the mutual diploma accreditation system in the EU member states.) More specifically, we compared and tried to evaluate nurse education programs on the university level in Japan and Europe, and also how competent nurses are measured to be, as well as how competency is understood, in both regions. Also examined was whether differences found in some competency elements represented differences in the evaluation of university education.

This study is directly tied to a major study called 'The Flexible Professional in the Knowledge Society—New Demands on Higher Education in Europe' (REFLEX) that was undertaken to compare Japanese and European university education and its relationship to their careers after graduation. This 2004 survey, led by Rolf van der Velden (Professor at Maastricht University in the Netherlands), explored the university education of 30,000 students who had graduated from high school in the year 2000 and its relevance to the first five years of their careers after graduation. A total of fifteen countries participated in this joint project: Austria, Belgium, the Czech Republic, Estonia, Finland, France, Germany, Italy, Japan, the Netherlands, Norway, Portugal, Spain, Switzerland and the UK. The survey was completed either by post or on the web, resulting in a sample of 33,587 persons. With the exception of Portugal and Switzerland, the breakdown in the thirteen remaining countries was 19,023 primary graduates and 14,564 master's graduates (Jim and Rolf, 2007).

The Japanese Ministry of Education and Science used part of this REFLEX survey in Japanese Basic Research (A) 'Japanese–European Joint Research in Relation to Spot Checks and Evaluation of the University Education by Corporations and Graduates' (Research Representative, Keiichi Yoshimoto), a survey done between March 2006 and March 2007. The subjects of this research had graduated in March 2001 (the end of the Japanese academic year) from eighty-two departments and research labs in sixty universities across Japan. With the cooperation of the universities in question, the survey questionnaires were either completed and returned by post or completed on the web by 2501 persons (2279 primary graduates and 222 post-graduate respondents), representing a successful recovery sample of 18.1% (Yoshimoto, 2009).

Methods

This research uses data from three sources: REFLEX data from Europe, Japanese-version REFLEX data from Yoshimoto, and data from a new Japanese survey of university-trained nurses which Tateishi and others conducted at about the same time as Yoshimoto's. A comparison was made on the results of university education in Europe and Japan, its characteristics and the abilities acquired from it. Table 1 details nursing education systems in the countries with the five greatest numbers of participants in this analysis: the Netherlands, Norway, France, Italy and Japan (Nomura, 2008). The differences in the number of participants from the four European countries, which may be a potential weakness of this research, are ignored because we can assume that we are dealing with qualitatively homogeneous samples assured by the mutual diploma accreditation system mentioned above.

Outline of the Data Used

The European data from REFLEX included 19,023 graduates from thirteen countries (excluding Portugal and Switzerland) and 468 persons currently working as registered nurses in these countries, hereafter collectively referred to as EUNs (Table 2). Data on Japanese registered nurses was randomly selected from a survey conducted in February 2006 by Tateishi and others at 26 general hospitals with more than 300 beds in the Kanto and Kyushu regions of Japan; they consented to the authors' request to participate. The subjects were nursing graduates with at least five years of experience. Of the 345 respondents (recovery ratio of 58%), 100 individuals were used in this study as JPNs.

Content of the Survey

The content of the survey questionnaire referred to the survey items of REFLEX and was modified for use in Japan before implementation. We selected items of competency defined as 'knowledge, techniques and abilities' with modification of the original of Jim and Rolf (Jim et al, 2007). The common items in the Japanese and European surveys were as follows:

- 1. Evaluation of the university education program (refer to Table 3)
- 2. Nineteen items relating to competency (refer to Table 4): abilities acquired in the present job (Acquired skills) and those considered necessary to perform the present job (Required abilities on the job)
- 3. Usefulness of university subject matter in the current job (refer to Table 5)

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