

Mobility of Indonesian Migrant Health Workers to Taiwan and Japan: Perspectives from the Sending Country

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Introduction

Indonesia has a long history of labor migration driven by various socio-economic factors [1]. Over the decades, the country has established itself as a major supplier of migrant workers, with significant movements to the Middle East, East Asia, and other parts of the world. In recent years, the healthcare sector, particularly nursing, has emerged as a critical area of focus [2].

The migration of Indonesian health workers, especially nurses and caregivers, to shortage countries, such as Taiwan and Japan, has become a significant component of Indonesia's human resources for health (HRH) strategy. This movement has been influenced by several economic, social, and political factors that exert influence both within Indonesia and in the destination countries. While migration provides opportunities for individual health workers to improve their economic status and gain international experience, it also presents substantial challenges for the management of the domestic health labor market. This paper examines the current state of the nursing labor market in Indonesia and identifies the factors driving migration, migration experience in Taiwan and Japan, and the challenges faced by Indonesia as a sending country.

Nursing labor market in Indonesia

The nursing labor market in Indonesia is characterized by an oversupply of graduates in certain sectors [3] and a concurrent shortage of employment opportunities [4]. Despite the growing number of nursing schools and graduates [5,6], the local healthcare sector remains limited in its capacity to absorb all trained nurses, leading to under-employment and unemployment [4]. This surplus has been a significant push factor driving the migration of Indonesian nurses to countries with a greater demand for healthcare professionals [7], such as Taiwan and Japan. Currently, Indonesia has approximately 1,170 nursing schools, 38 of which are under the Ministry of Health [8]. These nursing schools produce approximately 50,000 nurses each year [8] and are expected to meet overseas demand. Based on the projected target demand for nurses, Indonesia experienced a surplus of 176,470 nurses in 2021, and this number is expected to increase to 695,217 nurses by 2025 [4]. In pre-service training, some nursing schools, especially those under the Ministry of Health, have established international classes to prepare nursing graduates to work overseas [9].

Factors driving migration

By 2023, 4,870 Indonesian caregivers were working in long-term care facilities in Taiwan, most of whom have a nursing background in Indonesia [10]. Overall, Indonesia has sent 7,568 healthcare workers to 14 countries through various migration channels in 2019–2023, out of which 3,638 nurses have been deployed to Japan [2]. Indonesian health workers are motivated to migrate to Taiwan and Japan mainly for economic but also non-economic reasons [7,11,12]. The wage differences between Indonesia and these destination countries are significant, with

nurses in Taiwan and Japan earning several times more than their Indonesian counterparts [13]. Economic disparity is a powerful motivator that has drawn Indonesian health workers abroad to seek better livelihoods [14]. The promise of personal and professional growth presents a strong incentive for migration despite the challenges migrants face abroad [15].

Migration experience in Taiwan and Japan

From a macroeconomic perspective, the migration of health workers generates significant remittances, which contribute to the Indonesian economy [15]. These remittances support the livelihoods of families back home, alleviate poverty, and stimulate local economies, particularly in rural areas, where many of these workers originate. Viewed from another perspective, the migration of health workers is a strategic response to the oversupply of health professionals in Indonesia. The Indonesian government has facilitated the international mobility of nurses and caregivers, thereby providing a supply of skilled workers overseas. This migration also reduces pressure on the local job market and can be integrated into the broader HRH strategy of managing workforce imbalances.

However, a study we conducted in both Taiwan and Japan found that Indonesian health workers faced more challenges in Taiwan than in Japan in terms of professional career development and job opportunities [11,16]. The Japanese healthcare market enables nurses to occupy positions commensurate to their qualifications, especially for Indonesian nurses who have passed the Japanese National Nursing Examination exam. However, in Taiwan, the opportunity to shift to registered nurses' positions is limited.

Table 1. Differences between the lived experiences of Indonesian nurses based in Taiwan and Japan [11,16]

Aspect	Taiwan	Japan
Motivations for Migration	Primarily driven by financial reasons and supporting families. Secondary motivation includes gaining new life experiences.	Financial reasons are significant, but a strong focus on professional development opportunities is also reported.
Professional Identity and Roles	Experienced a loss of professional identity as they work as care workers instead of as registered nurses.	Faced challenges with professional identity, but roles are more aligned with their qualifications, especially under Japan Indonesia Economic Partnership Agreement (JIEPA).
Language and Communication Barriers	Significant language barriers hinder effective communication with patients and colleagues, leading to increased stress.	Language barriers are challenging but are mitigated by extensive training. Passing the JLPT is a stringent requirement.
Support Systems	Support from employers and recruitment agencies is available	More robust support systems with comprehensive orientation and

Aspect	Taiwan	Japan
	but often insufficient to fully address their needs.	integration programs provided by the government and employers.
Career Path and Professional Development	Limited career advancement opportunities, leading to concerns about the deterioration of professional skills.	Better opportunities for career development, especially for those who meet language and professional requirements.
Cultural Adaptation	Difficulties in cultural adaptation, particularly in understanding healthcare practices and social norms. The lack of professional recognition exacerbates these challenges.	Challenging but supported by structured programs and pre-departure training, facilitating the effective navigation of cultural differences.
Impact on Professional Skills	Professional skills are underutilized, with a risk of skill atrophy due to the limited scope of work.	More opportunities to maintain and enhance professional skills, especially with successful integration into the healthcare system.

The contrasts in the lived experiences between Indonesian nurses in Taiwan and Japan reveal the distinct differences shaped by each country's healthcare system, language requirements, and support systems (Table 1). In Taiwan, nurses are primarily motivated by financial reasons but face significant challenges, including a loss of professional identity since they work as care workers rather than as registered nurses; substantial language barriers that increase stress; and limited career advancement opportunities that raise concerns about skill atrophy. Cultural adaptation is difficult, and although some support is available, it is often insufficient to meet the nurses' needs. In contrast, Indonesian nurses in Japan, while also driven by financial incentives, have greater opportunities for professional development. The language barrier is mitigated by comprehensive training, and support systems are more robust, offering better career advancement prospects and opportunities to maintain and enhance nurses' professional skills. Despite the challenges, Japan provides a more structured environment that better supports effective cultural adaptation and professional growth [11,16].

Challenges

Indonesian migrant health workers face many challenges at different stages of their migration journey [17]. Before migration, they often struggle with language barriers, a lack of understanding of their job positions, and limited knowledge of the destination countries. These challenges can affect their ability to adequately prepare for working abroad. During migration, challenges intensify as nurses deal with ongoing language difficulties, deskilling where their qualifications may not be fully utilized, and mental health issues that arise from stress and isolation. They also face unclear career paths, the need to adapt culturally, a lack of access to religious services, and homesickness. Upon returning to Indonesia, healthcare workers often

experience further deskilling and may end up working in non-health sectors, which creates “brain waste.” Furthermore, better government facilitation is needed to help overseas workers reintegrate into the local workforce and leverage their international experience through a brain-circulation platform. These challenges highlight the need for comprehensive support systems throughout the entire migration process to ensure that the migration experience is beneficial for both returning workers and the Indonesian healthcare system.

The Indonesian government must address these challenges by implementing comprehensive policies that support the welfare of migrant health workers while maximizing the benefits of their migration.

Conclusion

The mobility of Indonesian healthcare workers to Taiwan and Japan represents a complex interplay of opportunities and challenges for Indonesia as a sending country. While economic benefits are substantial, the risks associated with the welfare of migrant workers cannot be overlooked. A balanced approach that upholds the interests of both workers and the nation’s healthcare system is essential to ensure that the migration of health workers contributes positively to Indonesia’s development.

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