REPORT ON STATUS OF
NURSING PERSONNEL

Japanese Nursing Association
Survey & Research Section
Development & Promotion
Department

1. OUTLINE OF STUDY

The purpose of the study is to obtain information on the characteristics, working conditions and the service conditions of the members of Japanese Nursing Association, thereby providing the organization the basic data on which the association's future activities should be based. In view of the urgent need for reviewing nursing manpower planning and of the increasing social concern for nursing shortage, the focus of the study was placed on the question why did nurses choose or leave their place of employment.

7,500 members were chosen at random as the study subject from the population of 318,822 members of JNA. The data was collected and analyzed as of October 1, 1989. The valid reply was 3,504 (46.7%). Japanese Nursing Association has been conducting study on the actual status of its members every four years since 1965, and this study was the seventh of its series.

2. CHARACTERISTICS OF RESPONDENTS

The following characteristics of JNA member at large and consequently of the respondents of the study should be taken into consideration when utilizing or interpreting the findings of the study.

Membership composition of Japanese Nursing Association represents higher ratio of RN members and lower ratio of assistant nurse members as compared to RN and assistant nurse ratio of nursing personnel all over the country. Majority of the JNA members are employed by hospitals, and those employed by clinics are small in number. Of those employed by hospitals, the majority
work with hospitals run by the central or local governments, the Japanese Red Cross, or the social health insurance organizations.

Most of the assistant nurse members are the senior staff of public hospitals. Therefore the data obtained by this study with regard to assistant nurses should not be considered as reflecting the real situation of practicing assistant nurses.

The average age of the respondents was 35.6, and 35.2 if limited to hospital employees. The average age tended to lower with employees of hospitals with more than 500 beds. 63.4% of the respondents were or had once been married. The ratio was found to keep increasing ever since the study was started in 1965. This was the result of the improved working conditions and the increase of nurses who chose nursing as a career. Now at this point the increase ratio was seen to become flat or even slightly lowering. It can be said that it is becoming difficult to retain or recruit more married nurses to work unless marked improvements are made in working conditions.

The ratio of respondents in their twenties and married was found to keep decreasing during the 80’s. The study revealed that 41.5% of the respondents in their latter twenties were or had once been married, which turned out to be the lowest figure among the recent three studies. The finding coincided with the late marriage tendency observed with women population at large.

87.0% of married or once married employees had children (84.3% in the previous study). Average number of children was 2.0, remaining the same as in the previous study. Of these, 41.4% had children of pre-school age, which represented 22.4% of the total respondents.

35.4% of the respondents were the graduates of three-years' diploma nursing school, followed by 24.8% of those who became registered nurses through two years' additional training after assistant nurse training. Nurses graduated from the baccalaureate programmes were 0.7% of the total respondents. 25% of them were nurse educators, and 75% were employed as public health nurses, midwives and nurses. The number of nurses graduated from junior college of nursing was on the increase. 9.2% of the respondents between the ages 20 to 29 were junior college graduates.

The average years of nursing experience was 13.2, and the average years as JNA member was 10.5 in total.

3. WORKING CONDITIONS

The average working hours of permanent employees was 43 hours 8 minutes per week. Those whose working hours was less than 40 hours per week were only 24.9% of the respondents, remaining almost the same as that of 1985. In contrast, the average working hours of workers of all industries in 1989 was 41 hours 12 minutes, and those whose working hours was less than 40 hours per week was 54.1% of all workers.

The study found some improvements in working days per week. 41.6% of the respondents reported their institutions adapted five working days every other week or twice a month basis. Those who reported five working days every week were only 2.7%, mainly those working in
industries or in hospitals run by private companies. In order to attain shorter working hours by 1992, the government has partially introduced five working days a week for the government employees. As of October 1990, however, the government did not have any plan to introduce it into the government hospitals. It will be still some time before nursing personnel can have shorter working hours and five-days work a week.

When asked "Did you work overtime during the month of September 1989, and if yes, how many hours?", 81.1% of the respondents replied "yes", and the average overtime work was 13 hours 20 minutes, exceeding 12 hours 42 minutes of the previous study in 1985. Those who reported more than 24 hours of overtime were 15.6% of hospital employees and 27.6% of nurse educators. There should be cases which violate the Labour Standard Law which provides overtime work should not exceed 12 hours in two weeks.

The average annual paid leave of a permanent employee was 17.9 days. The actual days of paid leave taken was 9.4 days (52.5%).

The types of shift of hospital staffs (permanent) were the regular three shifts –66.2%, the irregular three shifts –7.9%, and on call in hospital –8.7%. 9.1% of the respondents were not on shift duty at the time of the study.

The average frequency of night shift (including evening shift) reported during the month of September 1989 was 9.0. 46.2% of shift workers reported they worked less than 9 days of evening and night shifts (43.5% in 1985). Those who worked more than 11 days in evening and night shifts amounted to 17.2%. There has been no improvement found with the average frequency of night shift since 1973 when the study showed the average of 9.2 days of night shift a month.

The average shift allowance for nurses is 2,422 yen for evening, and 3,175 yen for midnight.

The average monthly salary before tax of October 1989 was 209,084 yen, and 275,663 yen including allowances, for a typical nurse aged 34.4, 12.1 years of experience and 9.3 years of continued service as a permanent employee.

When asked "Does your institution have any managerial positions for nurses?", there were not many "yes" replies from nurses working with clinics, local governments, industries and social welfare institutions. Even where there existed such positions, they were reported to be placed in lower positions compared to other managerial positions in administration. Many hospital nurses replied that nurses were in managerial positions in their institutions.

4. MATERNAL PROTECTION

With the enactment of the Equal Opportunity Law in 1986, the Labor Standard Law was partially amended. The amendment included extension of the paid leave after childbirth from the previous 6 weeks to 8 weeks, and this was a welcomed amendment. The amendment also abolished the paid menstruation leave, and partially relaxed the limitation on night work for female workers. As a result, those who took menstruation leave decreased in this study.
75.5% of the hospital staff replied that their hospitals provided child-care leave, showing little progress from the previous study. With those working with local health centers, the figure increased from the previous 39.9% to 62.6%.

Those who experienced pregnancy and/or childbirth since December 1986 were asked to reply concerning the maternal protection measures made available to them. Of this group, 51.8% of the hospital staffs reported exemption from night duty during pregnancy (41.5% in the previous study), 30.9% child-care leave (21.9% in the previous study). This hospital group took the total leave of 14.5 weeks following childbirth on an average (8.2 weeks of childbearing leave and 5.8 weeks of child-care leave). Of the health center group, 41.7% of them took child-care leave, which was a remarkable increase from 9.7% in the previous study. Their total leave after childbirth was 20.1 weeks on an average (8.6 weeks of childbearing leave and 11.3 weeks of child-care leave), which showed substantial increase from the total of 9.8 weeks in the previous study.

5. CHANGE OF PLACE OF EMPLOYMENT

The average length of continued service of the respondents in permanent employment with their current work place was 10.1 years with hospitals, 13.7 years with health centers, 10.1 years with local governments, and 9.9 years with nursing education institutions respectively.

The average length of continued service with the institution they were employed for the first time as qualified nurse was 6.6 years. This included those who continued to work with their first place of employment as qualified nurse. If limited to those who left their first place of employment, the average years of continued service was 3.9 years. Of the respondents in their twenties, 29.1% had left their first place of employment at the time of the study. Those who had left their first place of employment less than five years amounted to 75.4%, their average years of continued service being 2.6 years.

52.8% of the respondents replied they changed their place of employment in the past. With the increase of age and experience, the percentage of those who had changed their place of employment also increased; 58.5% with those in their thirties, and more than 70% with those in and over their forties. The average frequency of change of employment was 1.9.

Geographical mobility of the respondents were analyzed by dividing the whole country into nine areas. Nurses in the Kyushu Island (south), the northern mainland and the western mainland was found to be more mobile, that is, many of them worked in other areas at one time and then came back to their home area later. Nurses in Hokkaido (north) and the central mainland were found to be less mobile.

41.1% of those who experienced change of employment had a break between employers. Those who had a break less than three years was 41.1%, the average years being 4.6 years.

The reasons for choosing the current place of employment given by those who were still working with their first place of employment were: graduated from a nursing school affiliated with
the hospital 36.8%, recommended by the nursing school they graduated 19.0%, bounded by nursing scholarship 8.6%. The reasons given by those who experienced change of employment were: through friends and acquaintances 23.5%, through advertisements 12.9%, through direct invitation 11.6%.

The reasons given by hospital nurses for choosing the current employment (multiple reply) were: stable status 45.5%, easy access 44.9%, expectation for job satisfaction 32.1%, friends and acquaintances there 18.4%, felt suited to working there 17.5%. The reasons given by those who chose to work with other than hospital were stable status and no night duty.

The reasons for leaving the previous employment given by those who changed their place of employment during the five years (multiple reply) were: dissatisfaction with job 32.5%, interested in other areas 24.9%, interpersonal relationship 18.8%, long working hours 16.8%, got married 15.0%.

The study revealed that hospital nurses in their twenties and unmarried resigned because they were dissatisfied with job or were interested in other areas, and chose the current hospital because they hoped to find job satisfaction there and had easy access to the hospital.

6. NURSING AS A CAREER

Respondents indicated their intention to: continue to work as long as possible 80.4%, resign to get married or to have babies and return to work when children were old enough 10.4%, continue to work until getting married or having babies. Respondents in their twenties and unmarried indicated their intention to: continue to work as long as possible 51.8%, resign to get married or to have babies and return to work when children were old enough 25.7%, continue to work until getting married or having babies 21.2%. They were found to be better motivated to pursue nursing as a career as compared to other female workers in general.

When asked "What improvements should be made in working conditions to enable you to continue to work longer?" (multiple reply), most frequent replies were: increase of nursing personnel 70.7%, salary increase 55.7%, shorter working hours including five working days a week 46.5%, less frequent night duty 36.5%, better nursery system 22.8%.

Increase of nursing personnel was generally recognized as a prerequisite to realize shorter working hours, less frequent night duty and extensive utilization of child-care leave. It should be noted here that salary increase was ranked second, although it was not mentioned at all as a reason for choosing place of employment or for resignation. It was because the wage system for nursing personnel is almost uniform everywhere.

Nursing personnel currently in practice were highly motivated to pursue nursing as a career. It is recommended that employers take necessary measures so as to retain nursing personnel longer in practice.