

*The Influences of Social Support and Social Skills on the Cross-Cultural Adjustment of Foreign Care Workers in Japan*

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The Asian Conference on Psychology & the Behavioral Sciences 2015  
Official Conference Proceedings

**Abstract**

**Purpose:** The purpose of this study was to assess the effects of social support on the cross-cultural adjustment of foreign care workers in Japan. Foreign care workers are immigrating to Japan from other Asian countries in response to the opening provided by economic partnership agreements between Japan and its Asian partners. However, the quality of care that they provide is degraded by a lack of cultural understanding, which may relate to low social support and poor social skills.

**Methods:** The study employed a sample of Indonesian and Filipino foreign care workers who entered Japan via these agreements and were working at medical or elder care facilities ( $n = 106$ ). Survey data were used and data on (1) social support, (2) social skills, and (3) cross-cultural adjustment were analyzed using factor analytical techniques and analysis of covariance.

**Results:** Social support positively related to psychological and sociocultural adjustments in two dimensions: support from other foreigners and support from Japanese people. Social support was directly related and indirectly related through social skills to aspects of cross-cultural adjustment.

**Conclusion:** Social support promotes adjustment that, in turn, may facilitate the quality of care provided by foreign care workers. Social skills facilitate cross-cultural adjustment directly and, in addition, enhance the positive effects of social support on adjustment.

**Keywords:** Foreign care workers, cross-cultural adjustment, social support, social skills

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## Introduction

The shortage of Japanese nurses and care workers is a serious problem for the increasingly aging Japanese population. In 2008, the Economic Partnership Agreement (EPA) was signed by Japan, Indonesia, and the Philippines, allowing foreign care workers to enter Japan. By 2013, there were 1,048 Indonesian and 821 Filipino foreign care workers in Japan through the EPA (Japanese Ministry of Health, Labour and Welfare, 2014). In addition, an EPA with Vietnam was signed and 21 nurses and 117 care workers came to Japan from Vietnam in 2014 (*ibid.*), with greater numbers expected in the future.

Since the introduction of foreign care workers for the medical and physical care of the elderly, problems among foreign care workers, Japanese staff, and care recipients have been reported because foreign care workers lack an appropriate model and demand for their services has been unexpectedly high (Hirano, Ogawa, Kawaguchi, & Ohno, 2010). Setyowati, Susanti, Yetti, Hirano, and Kawaguchi (2010) found that foreign care workers experience work stress and sociocultural difficulties, including a sense of isolation while living in Japan, difficulties understanding nursing records and communicating with elderly persons, and uneasy feelings about the national examination. Inoue (2007) suggested that foreign care workers face difficulties stemming from their cultural differences and that a coordinator should be available to help them with cultural misunderstandings. He pointed out that, "Support from the surroundings would help the understanding and adaptation of foreign care workers, and encourage them to grow as professional care workers" (p. 43). Therefore, promoting interaction between foreign care workers and Japanese staff seems imperative to the former's cross-cultural adjustment and would contribute to their growth as care workers in Japan.

Foreign care workers bring high levels of care knowledge to Japan that they obtained in their countries of origin (Tsukada, 2010). However, in their new surroundings, their co-workers and patients are Japanese, which means that when they are providing care, problems may arise in a number of areas because of cultural differences. These problems include aspects of communication, understanding of job responsibilities, general workplace culture (such as work hours and appropriate interaction with colleagues), selection of care methods, and basic cultural differences between Japan and the countries of origin. Consequently, adjustment of the work environment to promote interaction among foreign care workers, Japanese staff, and care recipients has become very important. Moreover, improved cross-cultural adjustment of foreign care workers may influence their professional growth and improve the quality of care that they provide. However, although there are studies on the cross-cultural adjustment of international students, studies of foreign care workers in Japan have not focused on their adjustment.

Hatanaka and Tanaka (2014) proposed a three-dimensional structural model of adjustment of foreign care workers in Japan: psychological, sociocultural, and self-realization. Their results suggested that affinity relations in sociocultural adjustment (i.e., their cultural practices or building relationships with the Japanese) are important to their cross-cultural adjustment, particularly with respect to improved professional development.

Previous studies have found that learning skills, culture, and social support are necessary for cross-cultural adaptation to the host society (Chavajay, 2013; Furnham & Bochner, 1986). Regarding international students in Japan, social support provided by Japanese individuals encouraged them to learn culturally specific social skills and to successfully adjust (Okunishi & Tanaka, 2011). In addition, a social support network in which there is contact with members of the host country leads to higher quality of socio-cultural adaptation (Tanaka, Takai, Koyhama, & Fujihara, 1994; Ward, Bochner, & Furnham, 2001) and more satisfaction with the work (De Jonge & Schaufeli, 1998).

This study examines the effects of social support on the cross-cultural adjustment of foreign care workers in Japan. Previous research suggests that social support has a direct effect and an indirect effect through social skills. It offers suggestions for foreign care workers' improved growth as professionals and how consistent employment could be obtained.

## **Methods**

### **Participants**

The theoretical sample consisted of foreign care workers ( $n = 126$ ) from Indonesia and the Philippines who came to Japan via the EPA and worked at a medical ( $n = 32$ ) or elder care ( $n = 72$ ) facility. Individuals who were in Japan for personal study or through a non-EPA system were not included in this study. In addition, 20 cases were dropped due to missing data. Ultimately, there were 70 Indonesians and 36 Filipinos, of which there were 88 women, 15 men, and 3 of unknown gender, totaling 106 participants. The participants' ages were distributed as follows: 20-29 (55.7%), 30-39 (39.6%), and 40-49 (3.8%). The mean age was 30.6 years ( $SD = 4.9$ ). Most of the participants entered Japan in 2009 (8.1%), 7.5% came in 2010, and 6.6% came to Japan in 2008. About 34.0% of the sample was nurses and about 63.2% was caregivers. The questionnaires were translated into Indonesian, Tagalog, and English for the foreign care workers.

### **Measures**

The participants completed a questionnaire that asked them about social support, social skills, and cross-cultural adjustment. The participants were asked to rate each item on a 5-point Likert scale, where 1 = *not at all* and 5 = *very much*. The item scores were totaled for each point on the scale.

### **Dependent Variables**

Based on the results of previous studies, cross-cultural adjustment was conceptualized as a multi-dimensional concept consisting of three types of adjustment: psychological adjustment, sociocultural adjustment, and self-realization adjustment (Hatanaka & Tanaka, 2014).

## **Psychological Adjustment**

Studies of psychological adjustment have focused on the extent to which emotional or mood disorders occur during a period of cross-cultural adaptation (Ward et al., 2001). The items for the scale used in this study were developed from previous research (Hatanaka, Tanaka, & Mistuyoshi, 2010; Ward et al., 2001) and are intended to measure the state of physical and mental health of foreign care workers in Japan.

The four items are categorized under two factors. The first factor comprised two items under the heading “vitality” ( $\alpha = .80$ ), which includes feeling energetic and peaceful. The second factor comprised two items under the heading “psychological health” ( $\alpha = .62$ ), which included feeling depressed and tired.

## **Sociocultural Adjustment**

Sociocultural adjustment is concerned with cultural learning, adaptation to the host culture, and establishment of relationships with the host (Ward & Kennedy, 1992). The items in the scale used in this study were developed from the Sociocultural Adjustment Scale (Ward & Kennedy, 1999). These items intend to measure foreign care workers’ adjustment to the new cultural and work environments in Japan.

It consisted of 13 items of four factors. The first factor compromised three items categorized under “empathetic care” ( $\alpha = .76$ ), which refers to providing care in a manner related to the culture of origin, and offer care that suits the needs of Japanese patients. The second factor compromised four items categorized under “job performance” ( $\alpha = .65$ ), which refers to managing work independently and writing and speaking in medical terms. The third factor compromised three items categorized under “affinity relations” ( $\alpha = .66$ ), which is about creating personal relationships with the Japanese staff and patients and following behavior patterns like Japanese people do. The fourth factor compromised three items categorized under “workplace adaptation” ( $\alpha = .60$ ), which refers to adjusting to the Japanese work environment and following work patterns that the Japanese people follow.

In previous studies, work adjustment was independent of sociocultural and psychological adjustment (Aycan, 1997). In this study, however, work related items that are included in sociocultural adjustment, such as learning culture and developing a relationship with the host, are necessary for providing appropriate care. Therefore, in this study, “job performance” and “workplace adaptation” are considered as work adjustments.

## **Self-Realization Adjustment Questionnaire**

Self-realization refers to the professional or life goals of foreigners in Japan (Hatanaka, *et al.*, 2010). Two items under one factor on the scale were used in this study. This factor is called “sense of meaningful life” ( $\alpha = .73$ ), and relates to making life beneficial. These items measure foreign care workers’ degree of making efforts to be successful in their work or having a meaningful life in Japan.

## **Independent Variables**

### **Social Support**

Based on previous studies by Tanaka (2000) and Okunishi and Tanaka (2008), the analysis used responses to nine questions about the social support that foreign care workers received from Japanese people and from other foreigners. The items concerned social support regarding: (1) Japanese language, (2) Japanese culture and customs, (3) study, (4) work, (5) counseling and encouragement, (6) going out, (7) goods and money, (8) life information, and (9) job information. The scales measured the extent of the social support that foreign care workers reported receiving in Japan. There were two variables: one measuring the extent of support received from Japanese people, and the other measuring the extent of support received from other foreigners. A factor analysis for the support from Japanese people and from other foreigners was separately conducted.

Social support from Japanese people consisted of two factors. The first factor comprised four items categorized under “work support” ( $\alpha = .76$ ), and included language support, work information, culture and customs, consultation, and encouragement. The second factor comprised three items categorized under “daily life support” ( $\alpha = .74$ ), and included going out, goods and money, and life information. Social support from other foreigners consisted of two factors. The first factor comprised four items categorized under “work and daily life support” ( $\alpha = .81$ ), and included general work information, money, method of work, and life information. The second factor comprised of three items categorized under “cultural support” ( $\alpha = .86$ ), and included language support, study, culture, and customs.

### **Social Skills**

Based on previous research on the social skills of foreign care workers in Japan (Hatanaka, 2014), responses to nine questions about social skills necessary in Japan were created. These skills are (1) discussing cross-cultural conflict, (2) explain cultural differences with Japanese people, (3) courtesy, (4) social relationships with Japanese people, (5) expression of gratitude, (6) active involvement in Japanese society, (7) explanation of the participant’s foreign culture, (8) inferred behavior, (9) making appropriate replies. These items intend to measure foreign care workers’ degree of interpersonal skill in their relationships with Japanese people.

### **Statistical Analysis Procedures**

The factor analyses were performed using SPSS 21.0. A series of analyses of covariance were performed to test the relationship of social support to the measures of the dimensions of cross-cultural adaptation through social skills using SPSS AMOS 21.0.

## Results

### Analysis of Covariance

To examine the relationship of social support received by foreign care workers on their cross-cultural adjustment through their social skills, a covariance structural analysis was performed for each of the cross-cultural adjustment.

Figure 1 presents a structural model showing the coefficients of the relationships of dimensions of social support on the vitality dimension of psychological adjustment through social skills. Neither social support nor social skills were statistically significant predictors of the psychological health dimension of psychological adjustment. Work support from Japanese people and work and daily life support from foreigners had significant positive effects on social skills ( $\beta = .30$ ,  $p < .01$  and  $\beta = .21$ ,  $p < .05$ , respectively), which, in turn, had a positive effect on vitality ( $\beta = .37$ ,  $p < .001$ ). Neither variable had a direct effect on vitality. On the other hand, cultural support from foreigners had a direct positive effect on vitality ( $\beta = .32$ ,  $p < .001$ ), but no significant effect on social skills.

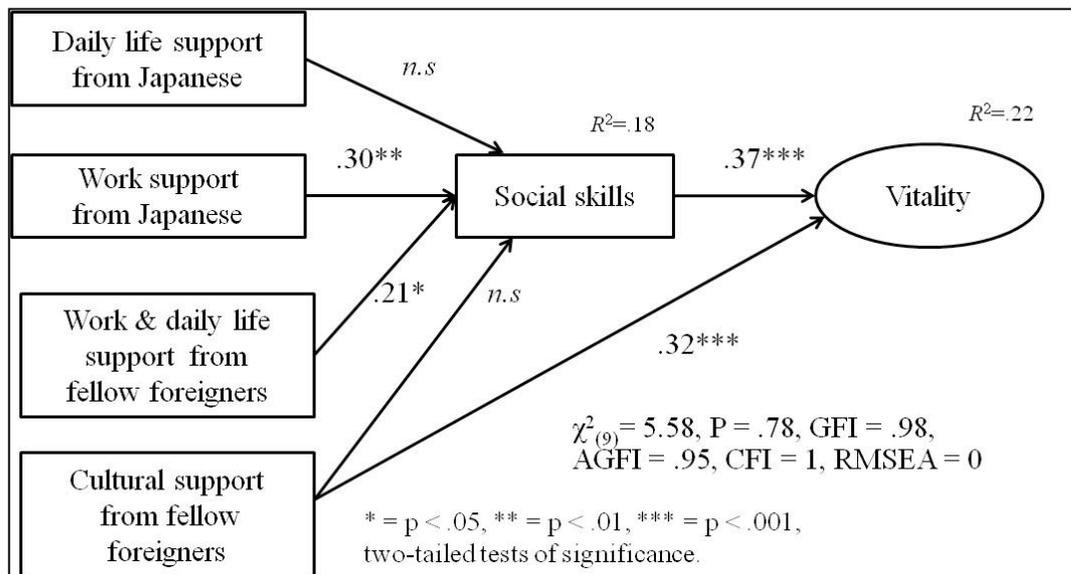


Figure 1. The effects of social support and social skills on cross-cultural adjustment

Figure 2 shows the effects of social support on the four dimensions of sociocultural adjustment via social skills.

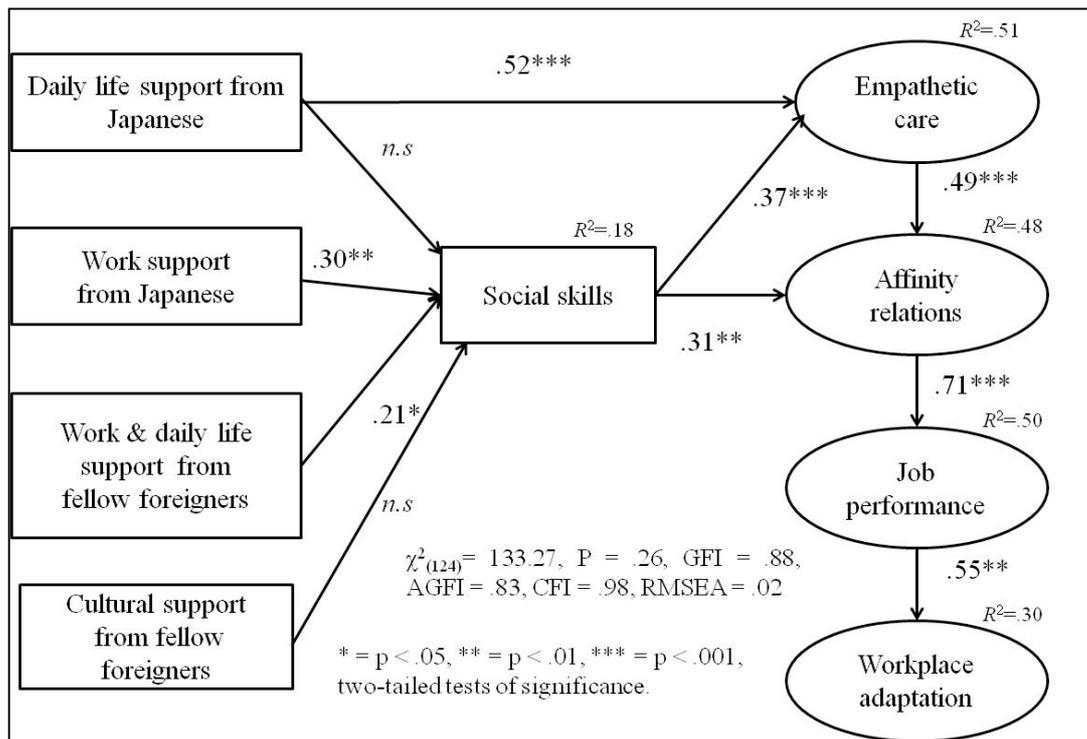


Figure 2. The effects of social support and social skills on sociocultural adjustment

Daily life support from Japanese people directly influenced empathetic care ( $\beta = .52$ ,  $p < .001$ ), but that was its only statistically significant relationship to adjustment and it had no significant effect on social skills. Work support from Japanese people ( $\beta = .30$ ,  $p < .01$ ) and work and daily life support from foreigners ( $\beta = .21$ ,  $p < .05$ ) positively influenced social skills, which, in turn, influenced empathetic care ( $\beta = .37$ ,  $p < .001$ ) and affinity relations ( $\beta = .31$ ,  $p < .01$ ), but there were no statistically significant direct effects on sociocultural adjustment. Cultural support from other foreigners had no significant effect on either social skills or sociocultural adjustment. Empathetic care positively influenced job performance and workplace adaptation, which is considered as work adjustment via affinity relations.

Finally, the relationships of the four factors of social support to self-realization adjustment, measured as a single factor, termed “sense of meaningful life,” was tested. The results found no statistically significant relationships. Furthermore, there were no statistically significant relationship between the measures of social support and social skills.

## Discussion

This study examined the relationship of social support received by foreign care workers in Japan to their cross-cultural adjustment via their social skills. The results suggest that some dimensions of social support and social skills have positive effects on some aspects of the cross-cultural adjustment of the participants to life in Japan.

In previous studies of adjustment by international students in Japan (Okunishi & Tanaka, 2011), learning interpersonal social skills specific to the Japanese culture was

facilitated by social support, which, in turn related to higher levels of adjustment. In the within study of foreign care workers, work support from Japanese people and work and daily life support from foreigners influenced the extent of the participants' vitality (a dimension of the psychological aspect of cross-cultural adjustment). On the other hand, cultural support from foreigners regarding culture, language, and Japanese customs was important to the participants' vitality and life support from Japanese people was directly important to empathetic care without the mediation of social skills. Unlike international students, foreign health professionals' interpersonal skills are most likely obtained in the workplace. Moreover, empathetic care positively related to work adjustment (workplace adaptation and job performance) via affinity relations based on social support and social skills. This suggests that work adjustment does not precede itself. Acquiring the social skills to make a relationship with Japanese people, which enables foreigners to learn Japanese culture and customs, is necessary. This makes possible the gradual process of sociocultural adjustment to grow as health professionals.

Social support and social skills did not have statistically significant effects on the psychological health dimension of psychological adjustment or on the sense of a meaningful life as the measure of self-realization adjustment. Previous research found that psychological health and a sense of a meaningful life is considered as achievement level of adjustment through sociocultural adjustment (Hatanaka & Tanaka, 2014). This suggests that the effect of social support and social skills is exemplified at the beginning of the adjustment period, when foreigners begin work in Japan.

## **Conclusion**

This study considered social support and social skills factors that influence cross-cultural adjustment of the growing number of foreign care workers in Japan. Social skills that are acquired through social support encourage cross-cultural adjustment. Moreover, professional growth as health care providers can be achieved for foreigners through the skills they gain in their interpersonal relationships with Japanese people. Foreigners cannot easily or quickly obtain social skills without help. Therefore, they should seek to gain social skills specific to the Japanese cultural context in relationships with foreigners and Japanese people. The higher quality of cross-cultural adjustment of foreign care workers can be improved if workplaces provide them with enough support regarding their work and adequate opportunities to relate with Japanese staff and foreigners.

## **Acknowledgments**

This research was supported by a grant from Mitsui Sumitomo Insurance Welfare Foundation, and also a part of study was supported by a grant (Grant –in – Aid for Scientific Research B: 15H03456) from the Japan Society for the Promotion of Science.

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