

EDITORIAL

“THIS IS 2019! BUT I STILL NEED TO WORK DOUBLE SHIFTS AND HAVE MULTIPLE JOBS TO KEEP ME ALIVE”: A PHENOMENON AMONG NURSES IN INDONESIA

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Visiting hospitals in Indonesia is one of my hobbies to observe and explore situations related to hospital services and management, especially about nursing care quality, care delivery, personnel management, and leadership, which give me the insights about the current phenomena and the gaps that need to be filled up. In addition, I will never forget to ask every nurse about his/her progress and complaint. Surprisingly, salary is still becoming the biggest concern among nurses in 2019, like three nurses said, *“there is nothing change about our salary since 5 years ago, but we are demanded to work harder”*, *“I am not happy with my salary because we paid higher to get diploma degree, but our pay may be the same with cleaning service pay”*, and *“this is 2019! we will never be rich if we just become a nurse in our beloved country, I still need to have double shifts or multiple jobs to keep me alive. But our salary may be a bit higher than the other nurses in the other provinces. Do you think 30 USD per month is a good salary for nurses?”* ([Arifin et al., 2019](#)).

Actually, nurse salary in Indonesia can be discussed among government and non-government employees. For nurses who are government employees, their salaries are based on a regional minimum wage in Indonesia, which is enough for nurses to live their families. However, the main issue among them is about a functional position, which is grouped into low classification (I/a-d) to high classification (IV/a-d), which influences salary they get ([The Audit Board of the Republic Indonesia, 2019](#)). In other words, the higher classification, the higher salary will be. At this point, nurses who hold a Diploma and Bachelor degree are

treated the same when they become a civil servant, which is similarly classified at III/a level. This makes those who hold a higher degree feel less appreciated because they spend more time and money than those with a Diploma level. In addition, those with a Bachelor degree is often called as a first-professional degree that should have higher salary than those with a Diploma degree that is called as a technical degree ([President of Indonesia, 2014](#)). Therefore, it is expected for the government to reconsider about this regulation.

For those who are not government employees, such as contract nurses, the main issue is about the low salary under a regional minimum wage in all public health sectors in all regions in Indonesia. In fact, the issue of having salary 5-30 USD per month also still remains, even some new nurses are working voluntarily ([Arifin et al., 2019](#); [Jibril, 2019](#)). Thus, majority of contract nurses are struggling to be a civil servant, or prefer to work in private health sectors which usually provides better compensation than public health sectors. This phenomenon leads to the next questions: *“Will Indonesian nurses stay longer in their profession? What has the Government of Indonesia been doing to improve the welfare of the nurses?”*

Does salary really matter for nurses?

Discussing about salary or a fixed amount of money is very subjective among individuals. Some people may said that salary cannot buy happiness, or lifestyle matters more than salary, while some may argue that salary is so important, especially for nurses who do not have such a good lifestyle, which they need

to work in a shift taking care for 20-30 patients per day with changeable living and sleeping time. Thus, giving enough or more salary for them is one form of appreciations of their works, regardless of their status (government or non-government employees) in both public and private sectors. Salary is one of the basic needs, which is well written by the famous theorist, Abraham Maslow, said that it is hard for employees to survive or to be motivated if the lowest level needs are inadequate ([Maslow & Lewis, 1987](#)). Thus, the government should pay more attention about this issue, as nurses are the key front of health care system.

Overview of Indonesian Nurses

Indonesia consists of multiple background of nurses, such as Diploma III, Diploma IV, Bachelor degree, Master degree/specialist, and Doctoral degree. Diploma III refers to a three year nursing program at college/university level. Diploma IV is one-year diploma program (after Diploma III) that focuses on one of clinical areas of nursing. Bachelor/Ners degree refers to a five-year program that consists of 3.5 years of academic program, and 1.5 years of profession program. Master degree refers to a two-year nursing academic program, followed by one-year specialty program in nursing based on area of interest of each nurse. Doctoral degree refers to a three-year nursing program that is more likely to focus on research ([President of Indonesia, 2014](#)). However, there is another degree established currently, namely "SMK Kesehatan", a senior high school with specialty in nursing, which is lower than a Diploma level. In addition, the government also has the idea to establish a Diploma for caregiver, which has unclear philosophy underpinning. Caregivers are not nurses. In fact, caring is the basic core of being a nurse.

Indonesia has 733 nursing schools ([Aipni-Ainec, 2018](#)), and they produce more than 100,000 nurses per year, which needs bigger capacities to absorb all nurses in both public and private health sectors. In fact, until today, Indonesia is only able to absorb 6,000 – 10,000 nurses per year ([Gunawan, 2016](#); [Gunawan & Aunguroch, 2015a](#)). And the others do not get better placement, some nurses work in clinics, administrations, supermarkets, banks, salons, etc.

Concerns and questions

There are five points are raised for consideration that may solve the problem of nurses salary in Indonesia. First, it is suggested to the Indonesian National Nurses Association (PPNI) to keep negotiating with the government to increase the total absorptive capacity of nurses although previous efforts such as demonstration and strike work just resulted in promises only.

Second, it is suggested to the government to stop giving a license to businessmen to open nursing schools without considering the placement of their products. Failure at this point may result in the increase of jobless nurses in Indonesia.

Third, the government should completely stop establishing senior high school level for nursing specialty and diploma for caregivers. Indonesia has nurse surplus already, which can be placed in both urban and rural areas in Indonesia. Having more

different levels of nurses, which are lower than a Diploma, will not cope the problem, but adds more numbers of jobless in Indonesia. This phenomenon, however, brings a speculation if the government prefers to pay caregivers or senior high school nurses than pay Diploma nurses to reduce the health spending of the country, rather than to improve the quality of care.

Fourth, Indonesian nurses are suggested to find an alternative way by highly considering about the concept of entrepreneurship. Nurses, according to nursing act, are able to establish Independent nursing practice to serve community by giving nursing care ([President of Indonesia, 2014](#)). This definitely fits with the today's era where there is a transition from hospital-based service to community/home-based service, with nurses frequently visiting patients in their homes and interacting with the community as a whole ([McLaughlin, 2017](#)). The technology is more likely to influence nursing practice, which is simply by one click service. So, nurses have job opportunities in more places.

Fifth, working overseas is one of the options. The whole world today needs nurses, and the receiving countries can pay higher and give more incentives. Today, India and the Philippines are the sending countries of the nurses with a lot of job opportunities and higher wages ([Gunawan & Aunguroch, 2015a](#)), and their governments encourage them to work abroad, even there is a magic word among millennial nursing students in the Philippines, such as "*You are not competent enough if you are not working abroad*", which motivate them to go out of their country. But, the question is "*can Indonesian nurses do that?*" Although there are some records that some nurses go to Japan, Saudi Arabia, Kuwait, USA, Canada and other countries ([Gunawan & Aunguroch, 2015b](#)), however, this does not reduce the number of jobless nurses in Indonesia. Many nurses are still not able to take this opportunity because of the language barrier and family matter.

Conclusion

To sum up, these five points are to increase the awareness of Indonesian nurses about the phenomena in Indonesia, which can be affecting a decision-making of their lives. In addition, these points are also the subjects for further discussion among nurses, health professionals, and policy makers. However, the author emphasizes that being a nurse is not necessarily about money, but caring is the core of this profession to help others with compassion, skill and dedication.

It is also noteworthy that a nurse is also a human being that is similar with everyone else that is motivated by their basic needs such as salary to motivate and improve their performance. It is expected that for the next years the salary issue will not be the top concern among Indonesian nurses as we are now living in the fourth industrial revolution that everyone thinks creatively how to provide high quality care in simple, faster, and better way, rather than thinking of how to get paid. There should be no longer phenomena related to the basic needs among nurses in Indonesia. Like Abraham Maslow said, what is necessary change a person is to change his awareness of himself, if you deliberately plan on being less than you are capable of being,

you will probably be unhappy for the rest of your life (Maslow & Lewis, 1987).

Declaration of Conflicting Interest

None declared.

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Author Contribution

This is the original work of the corresponding author.

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