

A classic surplus-shortage of nurses in Indonesia

Joko Gunawan^{1*} and Yupin Aungsuroch²

¹ Belitung Raya Foundation, Indonesia

² Faculty of Nursing, Chulalongkorn University, Thailand



Abstract

This article aims to describe the current context of the surplus-shortage of nurses in Indonesia. Some concerns are raised, and recommendations are provided. The data provided in this paper may be helpful to policymakers, human resource managers, hospital managers, and nurse managers in solving the problems.

Keywords

Nurses; surplus; shortage; Indonesia

Background

Nursing surplus-shortage in Indonesia is not a new phenomenon. But unfortunately, to this day, this is still the case. A nursing surplus occurs when the number of nurses produced exceeds the need, but a nursing shortage occurs when the demand for nurses exceeds the number of nurses produced. Indeed, if thinking about it, Indonesia should not have a nursing shortage because of the excess production of nurses every year, of which approximately more than 100,000 new nurses graduate annually (Ministry of Health, 2019). This number is very high compared to 2008, when only 34,000 nurses were produced per year. Furthermore, it is because the number of nursing schools increased, from 409 schools in 2004 to 826 in 2019 (352 bachelor's nursing and 474 diploma III nursing

* Correspondence:

Joko Gunawan, PhD

Belitung Raya Foundation, Komplek Perumahan Guru, Dusun Urisan Jaya, Desa Padang, Kabupaten Belitung Timur, Manggar, Bangka Belitung, Indonesia 33512

Email: jokogunawan@belitungraya.org

Article info

Received: 10 January 2022 | Revised: 20 February 2022 | Accepted: 3 April 2022

This is an Open Access article distributed under the terms of the [Creative Commons Attribution-NonCommercial 4.0 International License](https://creativecommons.org/licenses/by-nc/4.0/), which allows others to remix, tweak, and build upon the work non-commercially as long as the original work is properly cited. The new creations are not necessarily licensed under the identical terms.

programs). However, this number is more than an ideal number to serve the community in Indonesia.

Unfortunately, the absorption of the domestic labor market in Indonesia is low (Efendi et al., 2021; Kurniati et al., 2017). More than half of Indonesian nurses work in non-governmental sectors (Ministry of Health, 2019), while some nurses may remain unemployed or take up non-nursing jobs (Efendi & Gunawan, 2022). According to the Ministry of Manpower's (MOM) 2018 report, of the 695,248 available, only 446,428 are employed, while 248,820 are not working or are looking for work (Aurizki, 2021). Even though during the COVID-19 pandemic, many nurses were employed, the ideal ratio has not yet been satisfied to absorb all available nurses. According to MOM, Indonesia needs an additional 584 hospitals to absorb all nurses (Aurizki, 2021). So, what has the government done at this time apart from being required to add more hospitals?

Concerns and Recommendations

To balance the supply and demand for nurses in Indonesia, the government has made several policies.

First, the government has a 2011-2025 Human Resource for Health (HRH) Development Plan to reduce the admission quota of students, suspend the substandard nursing program, and withhold permission to establish a new program (Efendi et al., 2022). In 2019, the government revoked the permits of 130 private universities that did not meet the accreditation requirements to reduce the opening of nursing study programs in Indonesia (Aurizki, 2021). In addition, The Directorate General of Higher Education (DGHE) of the Minister of Education and Culture informs that the moratorium on establishing the new nursing or midwifery program (diploma and bachelor levels) is still valid, except for the establishment of bachelor and professional nursing programs at universities that have Diploma III nursing program with accreditation status B (very good level) (Efendi et al., 2022), or for universities located in areas with severe nursing shortages, the opening of nursing study programs can be continued. However, today, it can be said that this policy has not been appropriately implemented. Many campuses are continuing the substandard nursing study program of their own accord (Aurizki, 2021) and continue to increase the admission quota for nursing students so that the nurse surplus will continue. In this case, government firmness is needed, and cooperation from university owners is a necessity, especially to think about their output, not just think of a nurse production business.

Second, the government has made efforts to reduce the unequal distribution of nurses to all regions of Indonesia with several appointments/assignments: (1)

as civil servants (government employees); (2) as government officers based on the contract; and (3) special assignments (Efendi et al., 2022). For special assignments, the government deployed 1319 individual-based and 762 team-based nurses in 30 provinces across Indonesia between 2015 and 2019 under the Special Assignment of Team-Based Health Workers to Support Nusantara Sehat (literally Healthy Archipelago) Program (Efendi et al., 2022). In addition, this issue is also related to the lack of interest of nurses in migrating to remote or rural areas, especially for nurses who are not from these areas. Otherwise, students from underserved regions have more intentions to work in those areas (Efendi et al., 2022). Therefore, through the National Medium-term Development Plan (RPJMN), the nursing academies and health polytechnics are established in the remote or rural areas, which aims to provide students in those areas easy access and direct application to their known community. In addition, scholarships are planned to be provided for the students in the underserved regions. In other words, this solution can be good enough to reduce the shortage of nurses in remote or rural areas. However, this may not be satisfactory enough for maldistribution in urban areas.

Third, the government still encourages Indonesian nurses to find jobs or develop careers abroad. But, although international migration among Indonesian healthcare workers began in 1969 (Nugraha et al., 2021) to abroad, such as Taiwan, Japan, Singapore, Malaysia, Kuwait, Saudi Arabia, the United Arab Emirates, and other countries (Efendi et al., 2021), the number is still considered small. From 2015 to 2020, 6393 nurses were placed overseas for nurse and care worker positions (Efendi et al., 2021; Efendi et al., 2017). Unlike the Philippines, Indonesia does not put its goal as “exporting nurses” because the government expects that all nurses can be absorbed in the labor market. The exceeding number of nurses today is just considered a temporary surplus. In addition, the international success of this migration is not only from the government; the willingness and competence of nurses is also a determinant. Although the government provides avenues for cooperation in recruiting nurses abroad, many nurses do not want to go overseas because of their family, language, competence, and other barriers (Efendi & Gunawan, 2022).

Unfortunately, nurses’ competency tests in Indonesia cannot be equated with RN competency tests such as the National Council of State Boards of Nursing (NCLEX-RN) or Prometric Tests. There are still too many pros and cons related to this competency test. By only using the National competency test, many have not passed; approximately 30.2% of diploma graduates and 44.6% of professional graduates did not pass the nursing competency examination between 2015 and 2020 (Efendi et al., 2022). Can you imagine how many will pass NCLEX-RN? In addition, the competency test implementation time is quite long, about three

months after graduation (Efendi et al., 2022), which makes nurses who have just graduated have to wait, find it difficult to find work, and their future is not yet clear. Of course, this can be input for the existing standards or quality assurance system in nursing education and the competency test of nurses in Indonesia.

Conclusion

The harmonization of supply and demand for nurses still needs to be done. The government's efforts may not be sufficient to overcome the problem of surplus and shortage in Indonesia. The nursing labor market, government policies, and stakeholders (production and employment) must go hand in hand. It may be suggested that those who would like to open new nursing programs must have their own hospitals absorb their graduates. There should not be unemployed nurses from their universities. In addition, a quality assurance system should be highly achieved to create quality competent nurses. Also, it is suggested that the government develop or create a competency test for nurses in Indonesia adjusted to the NCLEX exam so that nurses in Indonesia are recognized by the world and are able to work anywhere they want to.

Declaration of Conflicting Interest

None.

Funding

None.

Acknowledgment

None.

Authors' Contributions

All authors contributed equally in developing this article.

Authors' Biographies

Joko Gunawan, PhD, RN is Director of Belitung Raya Foundation, Indonesia.

Yupin Aungsuroch, PhD, RN is Associate Professor at the Faculty of Nursing, Chulalongkorn University, Thailand.

Data Availability Statement

Not applicable.

References

- Aurizki, G. E. (2021). The surplus – shortage paradox of nurses in Indonesia. *Stratsea*. <https://stratsea.com/the-surplus-shortage-paradox-of-nurses-in-indonesia/>
- Efendi, F., Aurizki, G. E., Auwalin, I., Kurniati, A., Astari, L. D., Puspitasari, I. T., & Chong, M. C. (2022). The paradox of surplus and shortage: A policy analysis of nursing labor markets in Indonesia. *Journal of Multidisciplinary Healthcare*, 15, 627. <https://doi.org/10.2147%2FJMDH.S354400>
- Efendi, F., & Gunawan, J. (2022). Lived experiences of Indonesian nurses' migration to Japan: A narrative review. In Y. Tsujita (Ed.), *International Migration and Career Development of Nurses and Care Workers: The Case of Asia* (pp. 50-60). Bangkok Research Center, JETRO Bangkok / IDE-JETRO.
- Efendi, F., Haryanto, J., Indarwati, R., Kuswanto, H., Ulfiana, E., Has, E. M. M. a., & Chong, M.-C. (2021). Going global: Insights of Indonesian policymakers on international migration of nurses. *Journal of Multidisciplinary Healthcare*, 14, 3285. <https://dx.doi.org/10.2147%2FJMDH.S327962>
- Efendi, F., Mackey, T. K., Huang, M.-C., & Chen, C.-M. (2017). IJEPA: Gray area for health policy and international nurse migration. *Nursing Ethics*, 24(3), 313-328. <https://doi.org/10.1177/0969733015602052>

- Kurniati, A., Chen, C. M., Efendi, F., & Ogawa, R. (2017). A deskilling and challenging journey: The lived experience of Indonesian nurse returnees. *International Nursing Review*, 64(4), 494-501. <https://doi.org/10.1111/inr.12352>
- Ministry of Health. (2019). *Human resources for health country profiles: Indonesia*. Jakarta: Kementerian Kesehatan Republik Indonesia.
- Nugraha, S., Raharjo, T. W., & Hirano, Y. (2021). Migration of the Indonesian care workforce in response to the ageing population, and future challenges. In O. Komazawa & Y. Saito (Eds.), *Coping with Rapid Population Ageing in Asia* (pp. 78-84). ERIA.

How to Cite This Article

Gunawan, J., & Aunguroch, Y. (2022). A classic surplus-shortage of nurses in Indonesia. *Journal of Healthcare Administration*, 1(1), 5-9. <https://doi.org/10.33546/joha.2174>