

# Revitalizing the Japan-Indonesia Economic Partnership Agreement: The Role of English as an Intervention Language and E-Learning

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## Abstract

In 2008, Japan established an Economic Partnership Agreement (EPA) with Indonesia to recruit skilled caregiver as a means of addressing the problems associated with the rapid aging of Japan. However, Indonesian candidates who came on the program and trained in Japan as elderly caregivers were required to take the national examination in Japanese and exhibited a problematically low pass rate. This is arguably due to the fact that the examination was in Japanese. This pilot study sought to provide an alternative solution to increase the number of successful candidates. It examines whether a hybrid teaching method using English as an intervention language (one of the language of instructions) and e-learning can be an effective study strategy. The participants of the study were thirty randomly chosen fresh-graduate nurses who had just finished their three-year nursing course in Indonesia. Results show higher pass rate among Indonesian candidates when they took the test in English, rather than Japanese. English as an intervention language revealed that these candidates had sufficient expertise, knowledge and skills. Moreover, the use of English successfully helped both Indonesian candidates and Japanese trainers understand which parts of the field should be focused on for additional study. Typically, candidates were unable to score good marks in questions related to the social system in Japan and cultural issues. Furthermore, the use of information and communication technology (ICT) was proven to be helpful in managing the time and geographical differences between Indonesia and Japan.

## 1. Introduction

In many cases today, the problems confronting a specific country require collective measures that extend beyond that country's borders. Among such issues are those related to the environment, education, natural disasters, and public health. In recent

years, the aging of society has emerged as an especially critical problem and one that requires such joint efforts. According to the World Health Organization (WHO), the average lifespan of the top 36 countries is more than 80 years old. Japan, for example, is rapidly becoming an aging society with a falling birth rate. The average lifespan of Japanese women rose to 86.61 years old in 2013, up from 86.41 in 2012 (AFP, 2014; WHO, 2015). While the demand for medical treatment and nursing care services has been increasing in Japan, the manpower needed to provide such care has lagged behind. To address this, Japan established an Economic Partnership Agreement (EPA) with Indonesia in 2008. This agreement laid the groundwork for Japan accepting from Indonesia candidates to become a registered nurse and a licensed caregiver. Table 1 shows the acceptance rate of Indonesian candidates for registered nurses and licensed caregivers for the period of 2008-2012. As of 2013, a total of 1,048 candidates have come to Japan under this program.

In 2009, Japan also began recruiting from the Philippines candidates who could become licensed caregivers for the elderly. Another agreement was reached in 2001 that would allow Japan to accept candidates for registered nurses and licensed caregivers from Vietnam. In the following year, negotiations began to receive licensed caregivers from Thailand and registered nurses and licensed caregivers from India. This EPA program, which started with Indonesia, entered its eighth year in 2015. Through such cooperation between Japan and these countries, an easy, successful, and mutually beneficial situation seems to have been created (Yasui and Rydyanto, 2012; Hirano et al., 2012).

Table 1: Number of Indonesian Candidates from 2008 to 2012

Year	Registered Nurse Candidates	Licensed Caregiver Candidates	Total
2008	104	104 (3)	208 (3)
2009	173	189 (1)	362 (1)
2010	39	77 (2)	116 (2)
2011	47	58 (1)	105 (1)
2012	29	72	101
Total	392	500 (7)	892 (7)

(n) = candidates who did not need to take Japanese training because of a sufficient working command of the Japanese language (N2 level). (cf. Ministry of Health, Labour and Welfare, Japan)

However, one of the significant challenges to this program has been the language barrier. In February 2012, foreign candidates for licensed caregivers under the EPA program took the national examination for the first time. At that time, the examination

was taken by 94 candidates from Indonesia who had come to Japan in 2008 as the first group under this program. Candidates are required to have worked for an institution taking care of elderly people for more than three years before taking the national examination to get a license. Of these, 94 candidates, 35 passed the examination, with a success rate of 37.2%, in comparison to the overall pass rate of 63.9% for the Japanese (Table 2). In 2013, the examination was administered again. Of the 184 candidates from Indonesia who had arrived in 2009 and took this exam, 86 passed, with a success rate of 46.7%, in comparison to the overall pass rate for the Japanese of 64.4%. It is evident that the percentage of EPA program candidates having passed the examination was low. In the case of the registered nurses, the examination pass rate was not high either. According to Aoki (2010), this low pass rate can be attributed to the fact that examination is administered in Japanese. Candidates who fail to become licensed caregivers and registered nurses during the stay period are forced to leave Japan as a condition of their visa. However, those candidates who came to Japan between 2008 and 2009 are eligible to stay in Japan for one additional year pending results of the national examination and satisfaction of other criteria.

Table 2: National Examination for licensed Caregives: Analysis of Acceptance Rate  
(cf. Ministry of Health, Labor and Welfare, Japan)

	First batch arrived in 2008			Second batch arrived in 2009		
	24th national examination (2012)			25th national examination (2013)		
	test examinees	successful candidates	examination pass rate	test examinees	successful candidates	examination pass rate
Republic of Indonesia	94	35	37.2%	184	86	46.7%
Japanese	137,961	88,190	63.9%	136,375	87,797	64.4%

Contrary to Japanese expectations, the total annual number of caregiver candidates decreased to 58 in 2010. Although the examination pass rate has gradually increased, a great deal of effort by both the Indonesian candidates and the Japanese government has been wasted. According to Japan International Corporation of Welfare Services (JICWELS, 2013), a counterpart of this program in Japan, by July 2012, 113 out of 500 candidates already returned home prematurely for various reasons. This means that not only was the Japanese budget wasted, but so was the energy spent by candidates struggling to live, work, and study in a different culture was futile.

## 2. Method

### 2.1 Purposes and Theoretical Framework

In light of the above-mentioned issue, this research addressed the following question: which teaching methods are most effective and efficient in helping foreign candidates pass the national examination for licensed caregivers? This hypothesis was tested: a combination of teaching methodologies could successfully prepare candidates for the national examination administered in Japanese, a foreign language. Then, two methodologies were combined and used: one using English as an intervention language and the other making the most of information and communication technology (ICT). As a point of reference, the term “intervention” is used in this study to indicate the use of English when it seems needed.

The reasons behind this hypothesis were as follows. Firstly, the informants in this study did not have any knowledge of Japanese as a target language, even though they had taken Japanese language lessons for six months before and after entering Japan. Therefore, using Japanese as the direct method of teaching obviously seems to be ineffective. In general, the direct method of teaching focuses on the development of oral skills (Richard, 2014). It is argued that compelling Indonesian candidates to study Japanese language is the same as assimilation (Bayuwardhani, 2012). In East and Southeast Asia, the ‘Lingua Franca Approach’ to teaching English is proposed (Kirkpatrick, 2012). In fact, English is the sole working language shared by Indonesian and Japanese. Additionally, textbooks written in English are often used in universities in Indonesia (Honna, 2006). Through our first-hand investigation of textbooks in Bali, it was also found that the nursing students were using subject textbooks written in English and published in such English-speaking countries as Australia or America.<sup>1</sup>

Furthermore, the Ministry of Health, Labour and Welfare (2013) took steps to improve the national examination for licensed caregivers in 2013. One such measure involved writing the names of diseases in English as well as Japanese, and, to this end, 240 parts of the 120 questions were reviewed in total. It was thought that utilizing English as an intervention language (one of the languages of instruction) could be useful when, for example, explaining medical terminology. This is not only because it serves as a lingua franca in the world but also because it is used in the Association of South East Asian Nations (ASEAN Secretariat, 1988; Okudaira, 2004; Takeshita and Ishikawa, 2013). The use of English translation in the national examination is one example of such an intervention.

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1 In a survey conducted in 2015 on nursing students in the School of Nursing at both a national university and a private university in Indonesia, 568 out of 901 nursing students (63.0%) answered “Yes” to the question of whether they used English textbooks in their nursing classes. Furthermore, 312 students (34.6%) answered “No,” whereas 21 students (2.3%) did not respond to the question.

Secondly, space and time differences are other issues in the transfer of knowledge between Japan and Indonesia. Today, this issue can be solved by information and communication technology (ICT). The use of ICT-based learning in nursing education in Bangladesh, for example, has proven to be successful in supporting distant learning, which in turn has significantly increased the number of nurses in the country (Saisho 2013). Since the Massive Open Online Course (MOOC) phenomenon took off in 2012 (McGuire, 2014), various types of e-learning have become more familiar to learners throughout the world. Learners can work on the course at their own pace.

Unfortunately, most candidates came to Japan without knowing much about what the national examination for licensed caregivers is like. These candidates received very minimal information of how the assessment would be administered. The Ministry of Health, Labour and Welfare had started providing the past examinations translated into English only to the foreign candidates in Japan. This means that there was no chance for the candidate to look over the national examinations before arriving in Japan. It is advisable that candidates learn about it before applying to be an elderly caregiver candidate in order to prevent needless anxiety and wasting time. ICT could be a helpful solution for the problems of time and physical distance between Indonesia and Japan, and could work best for very self-directed learners who would like to try the exercises of the national examination for licensed caregivers before they decide to become a candidate.

In this pilot study, a free learning support system<sup>2</sup> developed by Osaka University in Japan was used. All the questions of the 24<sup>th</sup> national examination for licensed caregivers that had been translated into English were set up on the web site for this pilot study. Learners can check the correct answers right after they answer questions by clicking the answer button. Also, when they need an explanation as to why their answer is wrong, they have only to click the button. A detailed explanation pops up. The learners can go over the text repeatedly as a means of practicing. The testing software is programmed so that the order of the answering options provided for each question changes once the question has been answered. Some disadvantages have been reported regarding internet-based learning, such as the tendency for learners with low motivation or bad study habits to fall behind. However, this learning system does try to address that issue by, for example, automatically sending messages to the learners. Therefore, the learners will be encouraged to practice on a regular basis.

It is thought that by using technology in this way EPA candidates will be able to get a sense in advance of what the questions in previous national tests are like. In

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<sup>2</sup> Osaka University decided to disuse this free learning support system any more and to replace a new device from 2019.

addition, they will get an idea of what is involved in this kind of nursing care. If so, the use of this type of e-learning might drastically reduce the number of candidates who, even after passing the national examination, refuse to accept the job offered after recognizing what kind of work is involved. Also, even if they cannot pass the test on their first try, this technology will help them continue to study by themselves in their own country before taking the second test. This type of e-learning can help candidates understand which aspects of the various fields should be focused on for additional study.

## 2.2 Participants, Data Collection and Analytical Method

The participants of this study were thirty graduates of a nursing college who had just finished their three-year nursing course at a certain nursing university with which we had a cooperative relationship for this study in Indonesia (group B)<sup>3</sup>. A past examination (the 24<sup>th</sup> national examination for licensed caregivers) had already been translated into English, and it was administered to the participants through computers. The participants were given at most 150 minutes to work on the examination at their own pace. Prior to taking the examination, the participants were taught how to access and use e-learning resources. Instructions were given for this e-learning in Indonesian. The null hypothesis was used to see if there would be a statistically significant difference between the successful answer rates of the fifty Indonesian licensed caregiver candidates after their three-year training in Japan, who had taken the paper-based Japanese examinations in 2012 (group A) and the group B. The data of the fifty candidates was taken from the Japanese Council of Senior Citizen Welfare Services.

## 3. Findings and Discussion

### 3.1 Statistical Analysis

Table 3 presents the comparison of the accuracy rates that the two groups scored in the Japanese original version and in the English translation version, respectively. As can be seen from the results obtained by testing the null hypothesis, statistically significant differences exist between group A and group B. The score for group A was higher than that for group B in only one section—human dignity and independence in the region of people and society ( $p > 0.05$ ). However, there did not exist a statistically significant difference between the two groups in the second question regarding human relationships and communication, or in the fifth question about communication techniques. Most significant was the fact that Group B scored higher than group A in the other questions: #3, #4, #6, #7, #8, #9, #10, #11 and #12 ( $p > 0.05$  respectively). In

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<sup>3</sup> All participants of this survey were nursing students with an experience of using English textbooks in their nursing classes.

particular, group B scored the highest in question #10, understanding disability, and the second highest in #6, livelihood support techniques. On the whole, group B scored higher than group A in nine sections out of 12 (75%).

Table 3: Accuracy rates of the informants' examination scores compared with the ones taken by the first batch of Indonesian licensed caregiver candidates

No.	Areas	Sections	# of Q*	Group A (First Group in 2008) (n = 50)			Group B (Informants in this research) (n = 30)			z value
				total # of Q	# of right answers	accuracy rate (%)	total # of Q	# of right answers	accuracy rate (%)	
1	People and Society	Human dignity and independence	2	100	77	77.0%	60	35	58.3%	-2.50
2		Human relationships and communication	2	100	72	72.0%	60	45	75.0%	0.41
3		Social understanding	12	600	364	60.7%	360	246	68.3%	2.79
4	Nursing care	Nursing care basics	16	800	476	59.5%	480	368	76.6%	6.25
5		Communication techniques	8	400	275	68.8%	240	174	72.0%	0.86
6		Livelihood support techniques	20	1000	583	58.3%	600	480	80.0%	8.90
7		Nursing care process	8	400	264	66.0%	240	209	87.0%	5.86
8	Mechanism of the mind and body	Understanding development and aging	8	400	256	64.0%	240	192	80.0%	4.28
9		Understanding dementia	10	500	250	50.0%	300	221	73.6%	6.57
10		Understanding disability	10	500	264	52.8%	300	267	89.0%	10.49
11		Structure of the mind and body	12	600	358	59.7%	360	310	86.1%	8.61
12	Comprehensive Questions	Comprehensive Questions	12	600	333	55.5%	360	295	81.9%	8.33

\* "# of Q" means "the number of questions."

### 3.2 Utilization of English as an Intervention Language

Taking these results into account, the lack of Japanese language proficiency among Indonesian candidates has so far limited the candidates' ability to demonstrate their expertise, knowledge, and skills in the test. Not surprisingly, it has also hindered them in being able to work as professionals immediately after training in Japan. This pilot study demonstrated that English as an intervention language successfully helped both Indonesian candidates and Japanese trainers understand which parts in the fields should be focused on for additional study.

For example, it became evident that candidates were commonly unable to achieve good marks on questions regarding the social system in Japan and cultural issues. This has affected the candidates' achievement in general. As can be observed from the questions (Table 4), candidates were generally unable to answer questions on "regional changes in modern Japanese society" (question 1) and the "Services and Supports for Persons with Disabilities Act in Japan" (question 2). Due to their lack of knowledge in these regards, it is understandable that they would not be able to answer further questions such those regarding as the "appropriate method for support that a nursing care staff should take" (question 3). This is primarily due to the fact that no distinction exists between a nurse and an elderly caregiver in Indonesia. Therefore, it would be very hard for EPA candidates to understand the differences between the role of the nursing care staff and that of the licensed caregivers.

Table 4: Examples questions regarding a social system  
The correct answer is marked by an asterisk (\*).

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Question 1.

Which of the following statements about regional changes in modern Japanese society is appropriate?

1. Depopulation in rural/agricultural areas has been eased.
2. The emergence of settlement limits is limited to metropolitan areas.
3. An integrated work-life lifestyle has become common in order to promote a work-life balance.
4. The issue of waiting lists for nurseries in urban areas has been resolved.\*
5. Public comments are made in order for local governments to determine measures based on the opinions of the residents.

Question 2.

Which of the following statements about the Services and Supports for Persons with Disabilities Act is correct?

1. Welfare services were centralized regardless of the type of disability.\*
2. The affordable burden concept was continued.



3. Plans for the welfare of persons with disabilities are formulated at the discretion of municipalities.
4. Provisions concerning job assistance are not included in the act.
5. The number of surveyed items for the classification of disability level certification and the certification of long-term care need under the Long-Term Care Insurance Act is the same.

Question 3.

Two weeks have passed since Mr. A, hospitalized with a femoral neck fracture and suffering from mild dementia, was admitted to a long-term care health facility. At the time he was admitted, occasional delirium due to changes in the environment was observed and his dietary intake was low due to his decreased appetite as a result of inactivity in his daily life. He was also at risk of falling or collapsing. Currently, his delirium is no longer present, and he has expressed a desire to enjoy his hobby of karaoke; however, he is not able to perform day-to-day money management. Please choose the appropriate method of support for nursing care staff.

1. Pass judgment that the amount of food provided to Mr. A is too much and subsequently decreasing it.
  2. Surround Mr. A's bed with rails as a safety measure.
  3. Provide Mr. A with total assistance when moving.
  4. Provide an environment for Mr. A to enjoy karaoke with other patients.\*
  5. Advise Mr. A's family to change the name on his bank deposit book.
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As for the questions related to cultural issues, the following questions in Table 5 might be different depending on the culture. Culture has a powerful effect on communication (Hall, 1976; Triandis, 1989, 1995; Shweder, 1991). According to anthropologist Hall, high-context communicators, such as Asian and South American people, emphasize interpersonal relationships. Context is more important than words. Context might include the speaker's tone of voice, facial expression, gestures, posture and even the person's educational background, family history and social status. On the other hand, low-context communicators, such as North Americans, strive to use precise words and intend them to be taken literally. Although Indonesia and Japan might be classified into the same high-context culture and understand each other more easily than people in low-context culture, the candidates may not be able to get the correct answer unless they have come to understand Japanese manners or behavior. "*Sassuru* (reading other people's mind or feelings)," for example, is an inherent part of Japanese spiritual culture. This suggests that it would be important for candidates to spend time learning about culture differences as they continue to work as an elderly caregiver in Japan. Doing so would put them in a better position to pass the examination in the future.

Table 5. Examples questions regarding cultural issues

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Question 4.

Which of the following statements about communication is not appropriate?

1. Questioning the other party with words like “why?” and “how?” may lead them to feeling like they are being cross-examined.
2. Building a relationship with the other party at first is important in communication.
3. It is important to be aware of the message conveyed by your non-verbal behavior.
4. The belief that you know the other party well makes their feelings more difficult to see.
5. Personal space is constant regardless of the degree of intimacy with a partner.\*

Question 5.

It has been three days since Mr. B (a 75-year-old male) was admitted to the facility; his facial expression is stiff, and he has not talked to anyone. Which of the following is not appropriate as an initial means of nursing care staff involvement with Mr. B?

1. Observe Mr. B's expression and behavior to figure out what he is interested in.
2. Engage Mr. B in casual conversation to build a relationship.
3. Observe the occasions and locations where Mr. B sits, etc.
4. Involvement centered on bodily contact such as placing a hand on Mr. B's shoulder, etc.\*
5. During communication, smile and nod as well as exchange words.

Question 6.

Mr. J (an 80-year-old male) has a reduced dietary intake as a consequence of decreased swallowing function, which has resulted in malnutrition. A certified care worker, the head of the facility, a physician, a nurse and a registered dietitian were amongst the conference attendees considering this issue. Which of the following is most appropriate as the manner of participation of the certified care worker at this conference?

1. When speaking, the certified care worker should make remarks in accordance with the opinion of the facility director.
  2. When listening, the certified care worker should place more emphasis on the majority opinion than the minority opinion.
  3. If the certified care worker doesn't understand something, they should check up on it later rather than interrupting the meeting and asking a question.
  4. The certified care worker should discuss issues even if there is disagreement among the other conference participants and find a point of agreement.\*
  5. As the problem is related to malnutrition, the certified care worker should act in accordance with the opinions of the physician.
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Through our observation of nursing facilities in Japan, the ways of teaching EPA candidates were various. It appears that most general trainers in facilities try to teach through trial and error. Because candidates cannot speak Japanese well, they might sometimes be treated like a child even though they are qualified nurses in Indonesia. However, if English as an intervention language were used, it would be easier for both

candidates and trainers to understand the reasons why the candidates had lost points, whether the loss of those points was because of the language barrier, cultural differences, lack of understanding the Japanese social system and social welfare system, or lack of specific knowledge.

### 3.3 Utilization of ICT as One of a Combination of Teaching Methodologies

We have seen so far which teaching methods are most effective in helping a foreign candidate pass the national examination for licensed caregivers. This pilot study attempted a combination of teaching methodologies utilizing an ICT. As mentioned earlier, various types of e-learning have become more familiar to learners throughout the world, and so using ICT among our informants in this pilot study was fully expected. From the questionnaire on the e-learning approach, 799 out of 901 students (88.7%) answered that they would like to use it again. The top five answers to the question “What do you want to study with this e-learning system before visiting Japan as a candidate of licensed caregiver” were: 1) questions that were on past national tests, 2) questions anticipated to be on the national exam, 3) Japanese language, 4) Japanese culture and 5) Japanese society. The pilot study described here is continuing even now. Currently, a class taught in Japan and English is being offered to learners in Indonesia through the Skype® as part of the project’s testing. Simultaneous live classes in both countries have become possible by making the best use of the small-time difference.

## 4. Conclusions and Suggestions

In spite of concluding bilateral free trade agreements between Indonesia and Japan, the total annual number of licensed caregivers under the EPA has been diminishing gradually and appears nominal for the time being. This study revealed that the primary cause of this decrease is the language barrier. At the moment, caregiver candidates have no choice but to take the national examination in Japanese in the same way as Japanese nationals. In light of that, this investigation sought to examine from the viewpoint of language learning the most effective and efficient teaching methods that would help licensed caregiver candidates from Indonesia pass the national examination. It revealed that the reasons preventing candidates from achieving high scores can be classified into several categories, including problems related to the language barrier, a lack of understanding Japanese social system such as the welfare system, a misunderstanding of cultural differences, or a lack of expert knowledge as a licensed caregiver. As a potentially effective solution to these issues, this study tested a combination of teaching methodologies using English as an intervention language and internet-based learning that was undertaken in cooperation between the two countries.

Thus far, the educational effectiveness of ICT has been well documented and its benefits extend beyond what can be offered in the usual educational setting. As Khan (2013) has pointed out, “Technology has the power to free us from those limitations, to make education far more portable, flexible, and personal; to foster initiative and individual responsibility; to restore the treasure-hunt excitement to the process of learning (pp.150).” These benefits were clearly evident in this study. Moreover, this blended method could also be applied to registered nurse candidates under the EPA program.

The results of this pilot study could well prompt the Japanese government to reconsider the need to have EPA candidates take the national examination in Japanese. As it is widely known, language use for communication is acquired very quickly in a real-life setting. As was often voiced by the facilities accepting the candidate: “The candidates who have no license at present can work sufficiently without any problem clinically and it is not rational to force them to leave Japan when they fail to pass the national examination. It appears that a new licensing system for the ‘licensed foreign caregivers’ is necessary.” This study strongly indicates that the use of the English language in the design of a new licensing system could assist in keeping the EPA sustainable. In so doing, the English language could serve to promote globalization throughout Asia and connect people regardless of ideology.

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