

## Abstract of Doctoral Thesis

Title: The basis of existence of care workers as a specialized profession  
-From the perspective of human resource shortage and professionalism-

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This study aims to trace the historical background of how care workers specialization and nursing care labor have been perceived and positioned in the past policies for securing nursing care personnel, clarifying the factors and structures that have led to the serious shortage of human resources. Moreover, it examines the training and education and long-term care insurance systems, which change in relation to the policies for securing nursing care personnel. Lastly, this study examines the implementation of care workers expertise on the basis of their existence by focusing on authority, working conditions, and work content; additionally, it clarifies the recent situation and problems. The research subjects are the following four points.

Research subject 1: Isn't the policy for securing human resources for care workers prioritized to secure quantitatively, and the education of highly specialized care workers was insufficient?

Research subject 2: The low quality of care workers may be due to insufficient clarification of specialization and characteristics when creating national qualifications for care workers.

Research subject 3: What are the specializations of care workers and the characteristics of labor?

Research subject 4: Isn't the specialization of care workers and the characteristics of labor neglected in the policies for securing long-term care personnel and the Long-term care insurance system? In addition, consider the factors that enable the specialization of care workers.

Indicates clarification. The recent qualification system for long-term care gives priority to securing quantitatively by classifying by simple training. There are ways to learn step by step, but in order to acquire high abilities, the motivation and working style of the person influences.

Furthermore, due to deregulation, the training implementation institutions have diversified, and learning methods and evaluation methods have not been unified. Therefore, it is difficult to

guarantee the quality of current long-term care personnel. Current learning methods cannot enhance long-term care specialization. Job authority to care workers is limited compared to other occupations. In addition, the wages are low. In addition, due to the country's promotion of the Community-based integrated care system, care workers tended to take on supporting and complementary tasks for other occupations.

The problems of low wages, social reputation, and retention as well as high turnover are related to the working environment of care workers. Meanwhile, the solidarity and support among workers have weakened due to the large number of non-regular employees in the workplace. Furthermore, the work content has been transformed (e.g., “short, fragmented” and “rushed” visits) and working conditions have deteriorated due to the prioritization of efficiency and cost. Current policies have introduced the concept of productivity improvement and standardization into nursing care services, and performance-based and management-based policies, such as the use of digital technology and the provision of incentives that emphasize the improvement of physical conditions, have been strengthened.

It has become clear that the qualification system, authority, working conditions, and work content that serve as the basis for the existence of care workers to exercise their expertise have not developed under the past policies for securing care workers and the long-term care insurance system, and this has contributed to the severe human resource shortage that we face today. From the above, the following four points became apparent. (1) limit the scope of duties based on qualifications within the care services and ensure that different treatments commensurate with the nature of work content, (2) build an education and training system with “horizontal expansion” that emphasizes the characteristics of the “place” and “subject” of care, and (3) expand the scope of work with autonomy and guarantee compensation, and (4) Appropriate evaluation of staffing standards and expertise commensurate with labor characteristics.