

ACTIVITY REPORT

Duration: 4th February – 04th March 2015



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I. Introduction

I am reporting on my activity in the Post Graduate Student Exchange program with Gadjha Mada University(UGM) and Kobe University between 4th February 2015 and 4th March 2015. First of all I would like to express my gratitude to all of the people who supported me.

Person in Charge: Prof. Sunartini Hapsara, Sp.A(K), Ph.D

Members : Dr. Elizabeth Siti Herini, Sp.A(K)

Elsi Dwi Hapsari, S.Kp, M.S., D.S

Wiwin Lismidiati, S.Kep, Ns., M.Kep, Sp.Kep.Mat

Lely Lusmilasari, S.Kp, M.Kes

Melyza Perdana, S.Kep, Ns., MN

Sri Hartini, S.Kep, Ns., M.Kes

Anita Herawati, S.Kep, Ns

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Asti Kurniawati, S.E

Evi Viva

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Mudi Raharjo

Supervisors : Elsi Dwi Hapsari, S.Kp, M.S., D.S

Totok Harjanto, S.Kep, Ns., M.Kes

My activity considered the following five parts. *Daily life adjustment, Preparation Class, Field trip, Optional Program, and Cultural Activities*. I learned a great deal from these five parts, about Indonesian culture, nursing education, health system, the problem of Indonesia, and also Bahasa Indonesia. In the next chapter I would like to report on the details of each activity.

II. The result of each activities.

In this chapter I would like to report on the details of each activities.

1. Daily life adjustment

During my stay in Yogyakarta through the support of the staff such as Ms. Elsi Dwi Hapsari there were no problem in my daily life. They always cared about my daily life. Indonesian food suits my taste preferences. For the most part Indonesian food is spicy or sweet. Sometimes the staff invited me to lunch, I could try many traditional Indonesian dishes.

I stayed for two months in Wisma MM. This hotel has rooms for long stay people. The room was very clean and comfortable. Using the common kitchen, I sometimes cooked by myself. Ms. Elsi Dwi Hapsari lent me a TV. It was difficult to understand Bahasa Indonesia, however by watching TV I could learn some words and it was useful for communication. The laundry was located near the Wisma MM. It was very cheap and the family was very kind.

2. Preparation class

The preparation class contains five sections. *Campus Orientation, Bahasa Preparation, Common Culture of Javanese People, Health Care System in Indonesia and Health Problem in Indonesia.*

1) Campus Orientation

UGM was founded in 1949. UGM is the oldest and largest institution of higher learning in Indonesia. The 360 acre university is comprised of 18 faculty departments. 68 undergraduate study programs, 23 diploma study programs, 104 master and specialist study program, and 43 Doctorate study programs.

In the huge school permit, it has approximately 55,000 students, 1,187 foreign students and 2,500 faculty members currently. UGM has been considered to be one of the most prestigious universities in Indonesia. Near the nursing building there are mosques, library, cafeterias, and kiosks. There are several kinds of cafeterias. I usually ate there during lunch. Since Ms. Evi Visa prepared my library card, I could use it whatever I needed.

2) Bahasa Preparation

I received lectures about Bahasa Jawa (PIC: Wiwin Lismidati, S.Kep., Ns., M.Kep., Sp. Mat. / Anita Kustanti, S.Kep., Ns.,) and Bahasa Indonesia (PIC: Melyza Perdana, S.Kep., Ns., MS.) two times each.

Bahasa Jawa is the original language of Jawa Island. Compared to Bahasa Indonesia it was quite different. Bahasa Jawa is classified as three types by the subject to speak, and it was difficult for me to pronounce. Since the official language is Bahasa Indonesian, it was hard to learn the two types of languages during my stay. I preferred to use Bahasa Indonesian. For greeting, I tried to use Bahasa Jawa. In my daily life I made an effort to use Bahasa Indonesian.

3) Nursing education in Indonesia (Diploma / Bachelor)

I received lectures about Nursing education (Diploma Program and Undergraduate program) in Indonesia (PIC : Melyza Perdana, S.Kep., Ns., MS.). There are different competencies, responsibilities, between Undergraduate program and Diploma program. Diploma program students practice in the hospital after finishing each academic phase, but undergraduate student they have to conduct nursing practice in a hospital for 1 year (internship) after finishing all-academic phases. Nursing policy and competency are similar to Japan's. But the internship system is a little bit difficult to understand. Since not all students who graduate from the school start an internship, they can chose when they start the internship.

4) Health Care System in Indonesia (Emergency section)

Mr. Sutono and Ms. Happy gave me lectures about the Emergency Medical System in Yogyakarta. Since in Indonesia there are no Paramedics, emergency nurses play a role in Paramedics. In Yogyakarta there is the Yogyakarta Emergency System 118 (YES118). YES118 is a free ambulance service for dealing with any life threatening situation that occurs around the city of Yogyakarta. It also helps patients with guaranteed free emergency services from transportation for the first 24 hours of care. To access YES 118, a person simply dials 118. This will connect them to the accident call centre who will give them instructions on what to do, identify their location, and then send an ambulance to them.

Since emergency nurses can do intubation, defibrillation, give medication and intravenous in emergency situations, they go through training for five days. They have the competency rather than Japanese nurses.

3. Field trip

My supervisors organized the field trips in consideration of my background as an Emergency Nurse and Midwife. Therefore, I could have a wide variety of experiences. It was a great experience for me to understand the medical field in Indonesia. I would like to report on the details of each field trip.

1) Banyumas Hospital

PIC: Elsi Dwi Hapsari, S.Kp., MS., DS. / Wiwin Lismidiati, S.Kep, Ns., M.Kep, Sp.Kep.Mat

Date: 16th January 2015

Banyumas is located in the south-western part of Central Java. It takes about 5 hours from Yogyakarta by car.

I visited Banyumas Hospital. My supervisor is planning to open a specialist course in this hospital. I observed a maternity unit. In this hospital, delivery style is free. Therefore delivery beds are used for only difficult case. In Japan, basically all deliveries in hospitals use a delivery bed. I was surprised by the difference, however it is good for mothers that they can chose their position. I discussed with midwifeies about maternity care, family care, child care. Throughout this field trip I realized my lack of knowledge about the maternity field.

In addition, in this hospital there were UGM internship students. I had a chance to have a conversation with these students. I interviewed with them about how they fell about the internship program, difficulties during the practice, how to solve problems, and their intentions to work abroad. They faced the differences between what they learned at school and the reality. However, at the same time they noticed that it is important watch and learn, then practice by themselves, and they can solve the difference. It was a great experience for me to get their firsthand views of their feelings about their internships.

2) Akper Yakpermas

PIC: Elsi Dwi Hapsari, S.Kp., MS., DS.

Date: 16th January 2015

Akper Yakpermas is one of the private academies of nursing. At this institution, I had a chance to talk about Japanese culture, nursing education and careers in Japan. Some of the students are interested in working in Japan. They asked about the differences between nurses and care workers, the differences between nursing care between Indonesia and Japan, what skills are necessary to work in Japan. In Indonesia there are no licenses for care-workers, therefore it was difficult to imagine the work of care-workers, and also for me it was very difficult to explain.

3) Pusbankes 118

PIC: Sutono, S.Kp.,M.Kes. / Melyza Perdana,S.Kep.,Ns.,MS.

Date: 24th January 2015

Pusbankes 118 is a Cooperative Agency Emergency Medical Countermeasures in Yogyakarta. They give lecture 70 times a year in many places such as Health offices, the Board of Police, Health Centres, Hospitals and nursing

institutions. They require Emergency Response Training, Basic Trauma and Cardiac Life Support. They collaborate with the government and also with NGOs.

Thanks to Mr. Sutono, I could observe the lectures. They gave the lecture to midwife student from Borneo Island. This lecture is essential for all health professionals. This program is given throughout five days. I observed a part of lecture, however I realized that the trainers are highly skilled people and their teaching technique is very easy to understand. The basic knowledge is the most difficult to teach, even if I could not understand Bahasa Indonesia, I could understand what they teach.

In addition, imitable things, they also teach the how to use the everyday things in place of specialized equipment. For example, in place of a neck brace, they use a sandal and scarf. They are important applied skills to know.

4) Emergency services in Sardjito Hospital

PIC : Happy Indah Kusuma, S.Kep.,Ns

Date: 29th January 2015

Sardjito Hospital which is adjacent to UGM is the biggest hospital in Yogyakarta. I visited the Emergency care center. I observed the resuscitation room, emergency room, High care unit and intermediate care unit. In emergency service, they used the emergency severity index (ESI), and it has been managed well. Sardjito Hospital is the central hospital in Yogyakarta, so it has many patients. When I visited the hospital there were many patients. Some patients were waiting in the corridor. There is a delivery room in the emergency care center. And a midwife is assigned to the emergency room.

Differently from Japan, all equipment has to be brought at the hospital pharmacy, and the family has to stay in the corridor using a mat. However it is just different from the system and culture between Indonesia and Japan. This time I could not observe how the nurses care for the patients, however the system has been coordinated well, I think the nursing education is also conducted well.

To understand the different systems, observation is the best way. I could learn the Emergency System in Yogyakarta It was a great experience for me.

5) Public Health Centre (PUSKESMAS, POSYANDU)

PIC: Mr. Akhumandi

Date: 29th January 2015

In Indonesia, the Public Health Centre is called PUSKESMAS(Pusat Kesehatan Masyarakat). PUSKESMAS is linked to series of sub-centres called PUSTU. I visited one of the activities of POSYANDU. POSYANDU (Pos Pelayanan Terpadu) is a community-level health station. Once a month in POSYANDU, while collaborating with PUSKESMAS nurses and Health Cadre conduct the health care service based on community level.

Health Cadre is one of the volunteers who is educated by PUSKESMAS nurses about basic roles anthropometric, fill-out form the maternal handbook, treatment of diarrhea. Once a month they have a meeting with PUSKESMAS nurses about new information and some problems in the community. Through the meeting they improve their skills. They have an important role in the community. Since in Japan there is no such kind of system of Health Cadre, it is difficult to understand it.

In the community there are several problems, nutrition, environmental health and communicable disease. In the

case of nutrition I can see in Yogyakarta many people are overweight. In community health they also educate the importance of vegetables. However in POSYANDU they prepared fried food and sweets. As you can imagine it is very difficult to change this behaviour.

POSYANDU activity has a very important role in the community, as it not only takes care of the community health but also keeps a connection in the community.

6) BP3TKI

PIC: Elsi Dwi Hapsari, S.Kp., MS., DS.

Date: 30th January 2015

BP3TKI is the institution for Indonesian Migrant workers in Yogyakarta. Nowadays in Japan there are many Indonesian workers. I would like to learn the role of BP3TKI. In the medical field, the BP3TKI focuses on care workers. They are promoted to all academies for nurse. They give information about how to apply, the process, the salary in Japan and about matching. From 2008 to 2013, 3 nurses and 22 care workers go to Japan from Yogyakarta. In order to go to Japan as a nurse or care worker they need high competency, most Indonesian workers go to Malaysia or Korea to work in Manufacturing, Fishing, and Construction. Each year they evaluate and revise the program. Hopefully more Indonesian come to Japan.

7) Children House “Griya Lare Utami”

PIC: Elsi Dwi Hapsari, S.Kp., MS., DS.

Date: 04th February 2015

Children’s House “Griya Lare Utami” has been established under the cooperation of Gadjah Mada University and Kobe University based on the funds that were received by the relief fund of the earthquake of Jawa 2006 in KOBE. They provide early education for children under five-six years old. They also have activities to support children with disabilities and their families. Once a month the residents of UGM Pediatrics examine the development and also other students check the eyesight and teeth. In the morning the physiotherapist hold activities for children with disabilities. And now master students of UGM are planning to provide health education for children.

They divided the children into two groups, three-four years old and five-six years old. For three-four year old children, through the activities they learn how to socialize, for five-six year old children they prepare to go to school. Some of the children who come to the Children’s House have Down syndrome. They do activities with other children. I think it is a very good thing to spend the same time there. In every village there is a children’s house, however the teacher is cadre so they don’t have the background of education. However the teachers at “Griya Lare Utami” have licences, so the parents prefer to come here.

I was impressed that the children’s house activity is continued by the local people. It is very difficult to continue the activity however they provide the good education and activities so many parent prefer to come to this children’s house. I hope this activity continues in the future.

8) **UGM academic Hospital**

PIC: Melyza Perdana, S.Kep.,Ns.,MS.

Date: 11th February 2015

UGM academic Hospital was inaugurated in 2012 and established as an educational hospital for UGM students. In addition to being an educational hospital, it provides health services to the public. The hospital has 293 employees (November 2014), including specialists, general practitioners, dentists, nurses, and medical personnel. The design of RSA's clinical services is in the form of integrated and multidisciplinary cluster services. There are eleven clusters, namely primary health care cluster, integrated surgery, internal medicine and metabolism, integrated heart health service, maternal and reproductive health.

I visited the haemodialysis unit, ICU, ER. When I visited the ER, there were not many patients. The ER in Sargito hospital was full with patients to the corridor. I think if there is a system to divide the patients between UGM academic Hospital and Sargito Hospital they can provide services to more people.

9) **Health Polytechnic of Health Ministry in Yogyakarta**

PIC: Mr. Akhumadi / Mr. Heru subekfi

Date : 13th February 2015

Health polytechnic of Health Ministry in Yogyakarta was formed by the Decree of Minister of Health and Social Welfare Affairs. There are the six departments; Medical laboratory Technologist, Nutrition, Midwifery, Nursing, Dental Health, Environmental Health.

I got the opportunity to discuss with student. Some of them were interested to work or study in Japan. They were interested in Japan's advanced industry, climate, animation and movies. Some of them are from the department of dentist, nutrition, environmental health, so they asked me about the opportunity to work in Japan, unfortunately not having the information about these departments, I couldn't answer their questions.

However there are many student who want to go to Japan. I hope there are some opportunities for them.

4. **Optional program**

1) **Emergency and Disaster Drill in Wonosari Hospital**

PIC: Sutono, S.Ko.,M.Kes

Date: 28th January 2015

I attended one of the activities in Wonosari Hospital with a group working on the disaster of UGM in Wonosari Hospital located in Gunung Kidul. Gunung Kidul is a region in the southeast part of the province of Yogyakarta. Gunung kidul has five hospitals and 13 PUSKESMAS. They plan to launch an emergency system in Gunung kidul. Last year the group working on the disaster of UGM gave a lecture about disaster management in the hospital, this time they conducted Emergency and Disaster Drills in this hospital.

The fire simulation scenario takes place in a laboratory where suddenly an electrical short happens and a fire occurs. There are four victims in the accident one patient is in surgery and six people are in the treatment room.

This was the disaster drill in this hospital. It took 10 minutes to extinguish the fire. In the debriefing session, they discussed the difficulty of the incident command system, communication, how to evacuate the patient and mass media support. This was the first time things did not go well. However this experience is very important to improve and enhance their preparation for disaster.

In Indonesia there are a lot of disasters like in Japan. If we can share each activity between Indonesia and Japan, we can learn a lot of things from each other.

2) Stikes Madani Yogyakarta

PIC: Mr. Arif

Date: 14th February 2015

In this institution we discussed Japanese nursing education and the opportunity to work in Japan. This institution has very strict Islamic practices. The students are divided into boy and girl section using a screen. The first time I was very surprised to see that however we had a lively exchange of views about many topics. The questions from student are “Can we pray in Japan” “how is the Emergency system in japan” “Japanese midwife can open the individual clinic” “Nurse can give the medication” “how about the national examination”. And some question are very difficult to answer. “How can we become an on time person like the Japanese” “How can we become a hard worker like the Japanese”. I was stuck for an answer. However I was very happy that many students have interest in Japan. Some students want to study in Japan, and I should research the information for them.

5. Cultural activity

During my stay I visited many place with my supervisor, friends and sometimes by myself.

The places that I visited are the Beach Parangtritis, Beach Balon, Plambanam temple, Borobudur temple, Cilacap, Purwokerto. I really enjoy visiting many place and I could learn about traditional Indonesia culture.

6. Conclusion

I could learn about a part of the nursing education and health care system in Indonesia thorough this program. In addition, it was a good opportunity for me to reconsider my view on nursing through interaction with Indonesian people. I had a great time and no trouble of health and safety thanks to the all support from professors, supervisors, staff, students and Kobe University. I would like this experience to be a meaningful time during my remaining term of my student life.