

Original article

Perspectives of persons in charge regarding support for the health and daily lives of female technical intern trainees who migrate to Japan: a qualitative study

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Abstract

Objectives: Migrant technical intern trainees who migrate to Japan have become essential to the Japanese labour force, especially in rural areas. Persons in charge of supervising organisations and training coordinators both support the trainees' health and daily lives during their stay in Japan. This support is significant for trainees as it helps them access and interact with Japanese society. This study explored the perspectives of persons in charge of female technical trainees regarding support for the latter's health and daily lives.

Materials and Methods: Semi-structured interviews were conducted with 14 persons in charge of female technical trainees, followed by a thematic analysis of the interview data to extract key themes.

Results: Four primary themes emerged: fostered beliefs and roles, cultural considerations and health support, language considerations, and concerns about female trainees in relationships. These considerations and support developed solely through experience of persons in charge of female trainees. Additionally, those in charge expressed concerns about trainees being involved in a relationship. However, no specific measures, such as providing female trainees with information, have been taken.

Conclusion: Persons in charge of female technical intern trainees need to be provided opportunities to learn about cultural considerations and providing health support for their trainees. Furthermore, the cooperation of health professionals with supervising organisations and training facilities is essential to promote the healthy lives of technical intern trainees. These insights can contribute to the development of an integrated community-based approach to support the health and daily lives of female trainees.

Key words: female, health, Japan, migrant workers, technical intern trainees

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Introduction

A migrant worker is defined as a person who is to be engaged, is currently engaged, or has been engaged in a re-

munerated activity in a state where they are not a national¹⁾. Economic globalisation has created more migrant workers from low- and middle-income countries seeking to work overseas²⁾. The Japanese government established the Technical Intern Training Program (TITP) to provide opportunities for people from 14 Asian countries to learn and transfer the techniques and skills accumulated in Japan, and contribute to their countries' further development. Technical intern trainees help fill labour shortages, especially in a wide range of manufacturing industries, although this is not necessarily the intention of the TITP. People who want to come to Japan as technical intern trainees apply for the program through an organisation which sends them (hereafter, sending organisation) in their own country. Then, they are transferred to one of the supervising organisations that has a sending

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organisation contract in Japan³. As of October 2021, there were approximately 350,000 technical intern trainees in Japan, comprising 20% of the total number of foreign workers⁴. The proportion of technical intern trainees was higher in rural areas than in urban areas; moreover, female trainees accounted for approximately 42% of all trainees⁵.

Migrants often face obstacles regarding their health conditions and right to access adequate medical healthcare services⁶. In addition to general health challenges, female migrants encounter reproductive health problems and are underserved⁷. Additionally, cultural adaptation and acculturative stress experienced by female migrants may appear as reproductive symptoms^{8, 9}. Shinohara *et al.*¹⁰ observed female-specific physical changes among Vietnamese female technical intern trainees. In Vietnam, a country that has been sending many technical intern trainees, reproductive health education in high schools has been conducted through integrated disciplines. However, this has not sufficiently improved reproductive health knowledge among students^{11, 12}. Most trainees in their 20s have reached sexual maturity⁵. However, both male and female trainees are likely to come to Japan with inadequate knowledge of secondary sexual characteristics, including menstruation, and the physiology of pregnancy and childbirth. Therefore, the reproductive health needs of female trainees may not have been met. This can expose them to reproductive health risks.

In 2021, there were approximately 3,200 supervising organisations in Japan. After dispatching technical intern trainees, supervising organisations inspect whether the technical training plans, trainees' living conditions, and medical examinations have been properly implemented. They also provide consultations to technical intern trainees³. Managers of supervising organisations are required to attend lectures, but other members are not. Employees with more than five years of work experience related to skills acquired by technical intern trainees are appointed as technical intern training coordinators. Although doing so is preferred, they do not have to attend lectures as training coordinator¹³. As supervising organisations work closely with training coordinators close to trainees to maintain their living environment and respond to changes in their physical condition¹⁴, these organisations play an important role in the appropriate implementation of technical training and protection of technical intern trainees¹⁵. The organisations are also in a position to recognise trainees' health problems because they consider the health and living environment of trainees¹⁶. However, they are not experts in healthcare or cultural anthropology, and therefore, may have varied perspectives on health and multiculturalism. Given the importance of their role, the perspectives of persons in charge of female technical intern trainees, who may require different attention because of potential reproductive health problems, are vital when considering trainees' health and daily lives.

This study explored the perspectives of supervising organisations' staff and training coordinators regarding the health and daily lives of female technical intern trainees, and their awareness of physical and mental health changes.

Materials and Methods

Study design and setting

Given this study's purpose, a detailed description or explanation of the phenomenon¹⁷ by participants was considered necessary. Therefore, a qualitative descriptive methodology was selected because it allowed us to understand the participants' perceptions and interpretations via direct answers.

Oita Prefecture (population: approximately 1 million) is located in a non-metropolitan area of southern Japan. As of October 2021, there were 7,313 foreign workers in Oita Prefecture. Technical intern trainees comprised 48.2% of foreign workers, the majority of whom were involved in manufacturing¹⁸. Seven Public Employment Security Office branches are situated in Oita Prefecture, and a higher percentage of trainees has been reported in rural areas.

Recruitment and data collection

The participants were supervising organisations' staff or training coordinators in charge of female technical intern trainees. To ensure a standardised social and cultural background, we recruited native Japanese speakers born and raised in Japan. In November 2021, the first author visited 10 of the 33 supervising organisations that agreed to meet in Oita Prefecture to explain the study objectives, contents of the interview guide, and ethical considerations. The manager of each supervising organisation introduced us to the participants, who provided their consent to participate in the research.

Face-to-face semi-structured interviews were conducted individually by the first author at each participant's workplace. Each participant was interviewed once. The participants were asked questions based on an interview guide (e.g. their support and consideration for female trainees' health and daily lives in Japan, and their perspectives or thoughts as a person in charge of health support for female trainees). Each interview lasted approximately 45–100 minutes. All interviews were audio recorded after obtaining permission, and conducted between November 2021 and February 2022.

Data analysis

All audio-recorded data were transcribed verbatim after the interviews and analysed using inductive thematic analysis. Following Braun and Clarke¹⁹, the data were analysed based on the following process. First, the first author independently analysed the data and generated the themes. Next,

the first and second authors reviewed the codes, subthemes, and themes, and then immersed themselves in the data again. Subsequently, both authors confirmed data saturation because no further themes were generated²⁰. Lastly, the other authors reviewed the extracted themes and subthemes.

Methodological rigor

To maintain methodological rigor, we used the following criteria suggested by Lincoln and Guba²¹: credibility, transferability, dependability, and confirmability. Regarding credibility, the first and second authors held regular peer debriefing sessions. Member checks were conducted by all authors to receive feedback on codes, subcategories, and themes. Regarding transferability, we collected rich descriptive data and contemplated their practical applicability. For dependability, we evaluated the data in a stepwise manner, accompanied by a record of the researchers' decisions. Finally, regarding confirmability, we eliminated the influence of researcher bias and distortion as much as possible through repeated discussions.

Ethical considerations

This study was reviewed and approved by the Committee on Research Ethics and Safety of the first, second, and third authors' institute (Authorisation No.: 21-58). Written consent was obtained from all participants after explaining the study objective, confidentiality, and the right to withdraw from the study at any time. Additionally, we received permission from all participants to audio-record the interviews.

Results

Participants' demographic characteristics

In total, there were 14 study participants, consisting of 6 staff from supervising organisations and 8 training co-

ordinators. The average experience was approximately six years. Additional demographic characteristics are presented in Table 1.

Extracting themes

Relevant statements regarding 'consideration for and awareness of changes in the health and lives of female technical intern trainees by supervising organisation staff or training coordinators' were extracted. A total of 57 codes were derived from these extracted statements. The codes were categorised into 21 subthemes and further classified into four themes. The themes and subthemes are listed in Table 2.

The results are described in the following sections, organised by themes and subthemes, and illustrated with one or two exemplar quotations from the participants. Themes are presented in **bold letters**, subthemes in **bold italic font**, and quotations from participants in standard *italic font*.

Fostered beliefs and roles

The participants talked about their beliefs and roles as the person in charge of female trainees. They stated that their beliefs were essential in supporting trainees from different cultural backgrounds. We found that participants fostered their beliefs and roles through trial and error.

Fostered parental awareness and responses

The participants said that they cared about female technical intern trainees like their children or wanted to be like a parent who the trainees could rely on.

Well, from the very beginning, the people at this company also wanted the children (trainees) to work in good health for the next three years. (ID 3; supervising organisation, female)

There is no one around them (trainees) to rely on in Ja-

Table 1 Participants' demographic characteristics

ID	Age	Sex	Role	Years of experience since being in charge	Industry	Nationality of trainees
1	Early 30s	Male	Supervising organisation staff	4	-	Vietnam
2	Early 40s	Female	Supervising organisation staff	1	-	Vietnam
3	Early 40s	Female	Supervising organisation staff	6	-	China/Vietnam
4	Late 40s	Female	Supervising organisation staff	4	-	Vietnam
5	Late 40s	Male	Supervising organisation staff	4	-	China/Vietnam/Cambodia
6	Early 60s	Male	Supervising organisation staff	2	-	Vietnam/Cambodia/Myanmar
7	Early 30s	Male	Technical intern training coordinator	6	Manufacturing	China/Vietnam
8	Early 30s	Male	Technical intern training coordinator	3	Manufacturing	Vietnam/Indonesia
9	Late 30s	Male	Technical intern training coordinator	14	Manufacturing	China/Vietnam
10	Late 40s	Male	Technical intern training coordinator	5	Manufacturing	China
11	Late 40s	Female	Technical intern training coordinator	3	Manufacturing	China
12	Early 60s	Female	Technical intern training coordinator	10	Manufacturing	Vietnam
13	Early 60s	Female	Technical intern training coordinator	20	Food processing	China
14	Late 60s	Male	Technical intern training coordinator	7	Food processing	China/Vietnam

Table 2 Themes and sub-themes of the study

Theme	Sub-theme
Fostered beliefs and roles	Fostered parental awareness and responses Supportive attitude in facing problems and consultations among technical intern trainees Proactive communication essential to building relationships with female technical intern trainees Desired opportunities for interaction to enable technical intern trainees to have a better relationship with the community and workplace Role as a liaison in building relationships between technical intern trainees and Japanese employees Attitude of watching changes in technical intern trainees over the months and years
Cultural considerations and health support	Consideration of trainees' dietary habits in anticipating health impacts Recognising the diversification of trainees' ages and cultures Recognising differences in how trainees deal with health problems Recognising and responding to the trainees' physical symptoms Understanding the trainees' mental health status Support for medical examinations provided in response to the complaints of trainees Consideration of and care for the trainees' gynaecological symptoms Japanese hygiene concepts trainees needed to understand Recognising differences in lifestyle and national identity based on the cultural background of trainees Providing shopping assistance considering trainees' situations
Language considerations	Ingenuity of expressions and methods which are easy to convey to trainees Background and concerns hindering the improvement of the trainees' Japanese language proficiency Collaboration with interpreters essential for understanding trainees
Concerns about female technical intern trainees in a relationship	Concerns about possible problems arising from dating Dating a partner with adequate knowledge and recognition

pan. I feel that I need to be a person they can consult. (ID 7; training coordinator, male)

Supportive attitude in facing problems and consultations among technical intern trainees

The participants often faced problems, and were asked to provide consultations and coping strategies. They stated that a supportive attitude was necessary to deal with the problems caused by cultural differences or language barriers. Furthermore, participants had to deal with trouble among trainees in the dormitory. Hence, they ensured that female trainees would get along in that setting.

It's hard to assign rooms. You have to be creative. It's a very small thing, but if one of the trainees doesn't get along with the others, they say that they don't even want to share a garbage bag with that person. (ID 11; training coordinator, female)

Proactive communication essential to building relationships with female technical intern trainees

Participants, especially males, remarked that it was important to communicate proactively with female trainees to establish relationships. Additionally, participants stated that daily conversations enabled them to understand female trainees' conditions.

I think that it might be difficult for them (female trainees) to talk to me because I am a man. So, I think it's better if

I talk to them. (ID 10; training coordinator, male)
We have daily conversations through which we can catch what is wrong with their condition, so we value that kind of communication. (ID 7; training coordinator, male)

Desired opportunities for interaction to enable technical intern trainees to have a better relationship with the community and workplace

The participants acknowledged that female technical intern trainees had fewer opportunities to interact with locals and that some trainees were likely to isolate themselves from others. The participants stated that they tried to create opportunities that would allow female trainees to have a better relationship with the community and workplace to prevent isolation.

We have [a] community cleanup about three times a year. All female technical intern trainees participate in these cleanups with us. (Our trainees can) interact with the community by attending such events. (ID 14; training coordinator, male)

Role as a liaison in building relationships between technical intern trainees and Japanese employees

The participants understood the cultural and social backgrounds of female trainees through their experiences of visiting trainees' homes for interviews. They stated that it was important to share their knowledge of the trainees'

culture or customs with other staff members, and reconcile their opinions.

I told the Japanese staff about how the intern feels. I will do my best to talk with them in that way. I understand the company's point of view. Well, I'd like to try to reach a place where both parties are not dissatisfied with each other. (ID 3; supervising organisation, female)

Attitude of watching changes in technical intern trainees over the months and years

While watching over the female trainees since their migration to Japan, the participants perceived changes, such as improvements in their Japanese skills and mood, as they got paid and could afford more things.

Overall, they (trainees) look more cheerful. Well, I guess they get paid and can afford more things. I think that they have become happier since coming to Japan. (ID 12; training coordinator, female)

Cultural considerations and health support

The participants recognised and dealt with cultural differences, although they were sometimes confused. They offered help or paid close attention to female technical intern trainees while showing an understanding of their health behaviours or lifestyles.

Consideration of trainees' dietary habits in anticipating health impacts

Many female technical intern trainees tend to skip meals or eat noodles only because they do not want to spend money or cook. The participants were aware of this tendency and observed its consequences on the trainees' health.

And then there are the trainees who are picky eaters and eat only what they like, and, well, in the summer, they get a little heat stroke and collapse. Yeah, yeah. Usually, after a year, they are a bit fat. (ID 3; supervising organisation, female)

Recognising the diversification of trainees' ages and cultures

Supervising organisations, and small- and medium-sized businesses accept female technical intern trainees from different countries. Some participants were in charge of trainees with different nationalities. In addition, the range of the age of trainees has expanded. Participants recognised the diverse needs of trainees.

After all, when they reach age 40 or so, yes. They can't even speak Japanese very well. Hmm... So, there is a possibility of age-related problems. They don't sleep well, or they have a tremor, or something. (ID 5; supervising organisation, male)

Recognising differences in how trainees deal with health problems

Strategies for addressing health issues reflect the associated cultures. Participants acknowledged the differences in how their trainees coped with health problems or their thoughts about Japanese medicine.

Headaches and colds, they cure themselves like some kind of spell. Well, one time, there was a big reddening here (forehead). It looked like internal bleeding. They said if they had a headache, they would pinch here. (ID 13; training coordinator, female)

Recognising and responding to the trainees' physical symptoms

The participants noticed the physical symptoms of their trainees owing to environmental differences. They took their trainees to a hospital if necessary and considered their conditions.

There are still many trainees who have some kind of skin irritation. Some of them don't have rough skin at all. But the ones that have skin problems have had them for about a year now. (ID 8; training coordinator, male)

Understanding the trainees' mental health status

Many female technical intern trainees were working overseas for the first time. The participants recognised the mental problems of the trainees triggered by homesickness or acculturative stress.

I know there were some who said 'I have a stomach ache' as soon as they arrived. Some of the trainees seemed to get homesick because they were in a foreign country. (ID 2; supervising organisation, female)

Support for medical examinations provided in response to the complaints of trainees

Taking technical intern trainees to the hospital and providing necessary support were the most common types of support provided by persons in charge on a daily basis. The participants supported trainees with symptoms as soon as possible in collaboration with each supervising organisation staff or training coordinator.

Basically, because the trainee raises her hand as a result of pain, for example, or if they tell us the night before, we take them to the hospital in the morning the next day, as fast as we can. (ID 14; training coordinator, male)

Consideration of and care for the trainees' gynaecological symptoms

Some trainees are reluctant to visit a gynaecologist because it is uncommon for unmarried women to visit a gynaecologist in their home country. The participants responded to their trainees' complaints regarding menstruation and sometimes worried about their reluctance to seek treatment.

I think she came to me once, when her menstrual bleeding wouldn't stop. But she told me she was embarrassed about the internal examination because, you know, she is not married. (ID 11; training coordinator, female)

Japanese hygiene concepts trainees needed to understand

The manner in which rooms are cleaned or garbage disposed in Japan differ substantially from those in female trainees' countries. The participants had to tell their trainees how to perform such tasks the Japanese way.

Because of the different environment in which they were raised, they said that the standard of hygiene was high in Japan. I try to teach them how to clean and such. (ID 12; training coordinator, female)

Recognising differences in lifestyle and national identity based on the cultural background of trainees

Participants recognised differences in lifestyle and cultural characteristics. Although somewhat confused, they dealt with the trainees' requests in relation to their customs and beliefs.

One of our trainees frequently told me that God appeared to her in a dream and kept telling her that her family would be unhappy if she did not return to her country. She was from a different area than the other trainees, prayed a different number of times, and fasted for a different period of time, so I think she had a different degree of faith. (ID 8; training coordinator, male)

Providing shopping assistance considering trainees' situations

Technical intern trainees work and live in rural areas where public transportation is not well developed. Most participants gave their trainees a ride to work and helped them shop for their daily necessities.

The inconvenience of this area is that there is no place nearby to go shopping on foot, so we use the bus mentioned earlier to take people shopping on Saturdays or Sundays. (ID 14; training coordinator, male)

Language considerations

Language barriers were strongly perceived among the participants because they had to instruct trainees regarding the job or necessary information. The participants used ingenuity in their expressions and asked interpreters for help when necessary.

Ingenuity of expressions and methods which are easy to convey to trainees

The participants stated that they repeatedly provided explanations while ensuring that the trainees understood them. Furthermore, while using ingenuity in expressions, participants tried to convey ideas using words that the fe-

male trainees would understand.

I'm not sure if it's a good idea to use incomplete Japanese sentences, but I'll try my best to break it up and speak single sentences in Japanese. That is not proper Japanese, though. I try to be creative like that. (ID 8; training coordinator, male)

Background and concerns hindering the improvement of the trainees' Japanese language proficiency

Participants stated that female trainees were unlikely to improve their Japanese skills because of the widespread use of translation software. Additionally, the trainees showed little increase in their interest in learning Japanese.

But now, they are on their phones, right? So, you know, if they don't know how to say it in Japanese, they just show the Japanese translation to me on their phones. (ID 13; training coordinator, female)

Collaboration with interpreters essential for understanding trainees

The number of supervising organisations hiring interpreters has increased. The participants collaborated with an interpreter to explain difficult subject matter that female trainees needed to understand properly.

I think it is necessary for them (trainees) to first learn about the Japanese way of working. Japan is an unusual country, isn't it? So, in order to put it in a way that is easy to understand, we need an interpreter to convey the message. (ID 8; training coordinator, male)

Concerns about female technical intern trainees in a relationship

In Japan, dismissal due to pregnancy or childbirth is illegal. However, it is practically difficult for trainees living in dormitories to continue with their jobs and lives in Japan during pregnancy. Therefore, female trainees who become pregnant tend to leave Japan before their practice ends, although this is often against their wishes because they are unable to continue earning money. Participants who knew about their trainees' circumstances and the consequences of pregnancy expressed concerns about their relationships in Japan.

Concerns about possible problems arising from dating

The participants were aware about a knowledge gap in contraception and different perceptions about having a relationship among female trainees with different cultural backgrounds. Participants were particularly concerned about the possible problems triggered by dating among trainees.

I don't know how to put it, but I don't think they (trainees) have much of a concept of birth control. Some of them come from rural areas, so they don't know such ways. (ID 8; training coordinator, male)

In the past, the company's intention was that we wanted trainees to discourage male–female relationships as much as possible, but nowadays, they are free to do so. And, well, anyway, I have instructed them not to get pregnant and to tell someone when they stay out overnight. (ID 12; training coordinator, female)

Dating a partner with adequate knowledge and recognition

The participants wanted female technical intern trainees to only date partners with adequate knowledge while advising them to try to avoid becoming pregnant. However, they did not reach the point of providing information about contraception.

One by one, as I talked to them, they told me that they had a boyfriend and that they were going to see him on their days off. And when I asked her, 'So, is it OK if you have a baby now?', she said, 'No, not right now'. So I said, 'Well, you should think carefully before you act'. (ID 3; supervising organisation, female)

Discussion

This study explored the perspectives of supervising organisations' staff and training coordinators regarding considerations of the health and daily lives of female technical intern trainees as well as their awareness of changes in trainees' physical and mental health. Those in charge *fostered beliefs and roles* while gaining experience. In particular, their beliefs were formed through parental awareness. They applied *cultural considerations and health support*, and *language considerations* with ingenuity. They also expressed *concerns about female technical intern trainees in a relationship* because of the potential problems that might arise from dating, such as unexpected pregnancies.

The fostered beliefs and roles were the foundation of the considerations and support for female technical intern trainees (Figure 1) and underpinned by parental awareness. Supervising organisations' staff and training coordinators played the role of 'a substitute parent' because technical intern trainees, especially those in rural areas, are largely dependent on them for not only work, but also social life in general (e.g. grocery shopping, recreational activities, and doctor appointments). Parental awareness allowed staff and coordinators to become more responsible and clarify their beliefs as the person in charge of female trainees. However, such circumstances can inevitably create up-and-down relationships^{22, 23}. In addition, the participants provided support in their own way with ingenuity based on their experiences. They learned that repeated trial and error was the best way to deal with problems arising at work and in the daily lives of female trainees. Chang and Tharenou²⁴ noted that competent multicultural managers are culturally sensi-

tive and respectful towards culturally diverse subordinates while practicing good communication and continual learning on the job. This study's participants may have acquired cultural competence through their experience as persons in charge of technical intern trainees. Nevertheless, support for the health and daily lives of trainees depends on their personal efforts. Considering that trainees have become more multinational with a wider age range, the perspective of multicultural and harmonious coexistence beyond parental awareness or knowledge through experience for persons in charge is needed. To enable this, opportunities that allow those in charge to learn about cultural considerations and health support for their trainees must be offered. Further, opportunities should be provided to allow supervising organisations and training facilities in the community to share their knowledge and information concerning support for the health and daily lives of trainees.

In particular, the study participants were worried about female trainees experiencing unexpected pregnancies because most of them were in their 20s and were sexually mature. Supervising organisations and training facilities cannot discharge female trainees due to pregnancy²⁵. However, in reality, it is difficult for female trainees to continue with pregnancy and childbirth under such circumstances²⁶. Additionally, supervising organisations' staff and training coordinators prefer to avoid such situations in terms of parental awareness and securing labour. Therefore, they ask female trainees to be careful about unexpected pregnancies. According to Ishimaru *et al.*¹⁶, supervising organisations have difficulty handling consultations regarding marriage, pregnancy, and childbirth. Still, no specific measures, such as providing female trainees with information about where they can purchase contraceptives or opportunities to learn about contraceptive methods from health professionals, have been taken. Sexual and reproductive health are integral elements of the right of everyone to enjoy the highest attainable standard of physical and mental health²⁷. Pregnancy and childbirth cause major changes in women's health, and complications sometimes occur that may affect their later health and even endanger their lives. Therefore, it is essential that women have the ability to make informed decisions regarding pregnancy and childbirth by themselves. However, the reproductive health rights of technical intern trainees are under threat in Japan²⁸. No one should be deprived of the right of self-determination, which may be life-endangering. Technical intern trainees may not have adequate reproductive health literacy; hence, it is necessary to provide them with precise information. Therefore, it is essential for health professionals to participate in regional assemblies for the proper implementation of technical training so that they can share information and strengthen cooperation to promote the healthy lives of technical intern trainees, as suggested by Aida *et al.*²⁹.

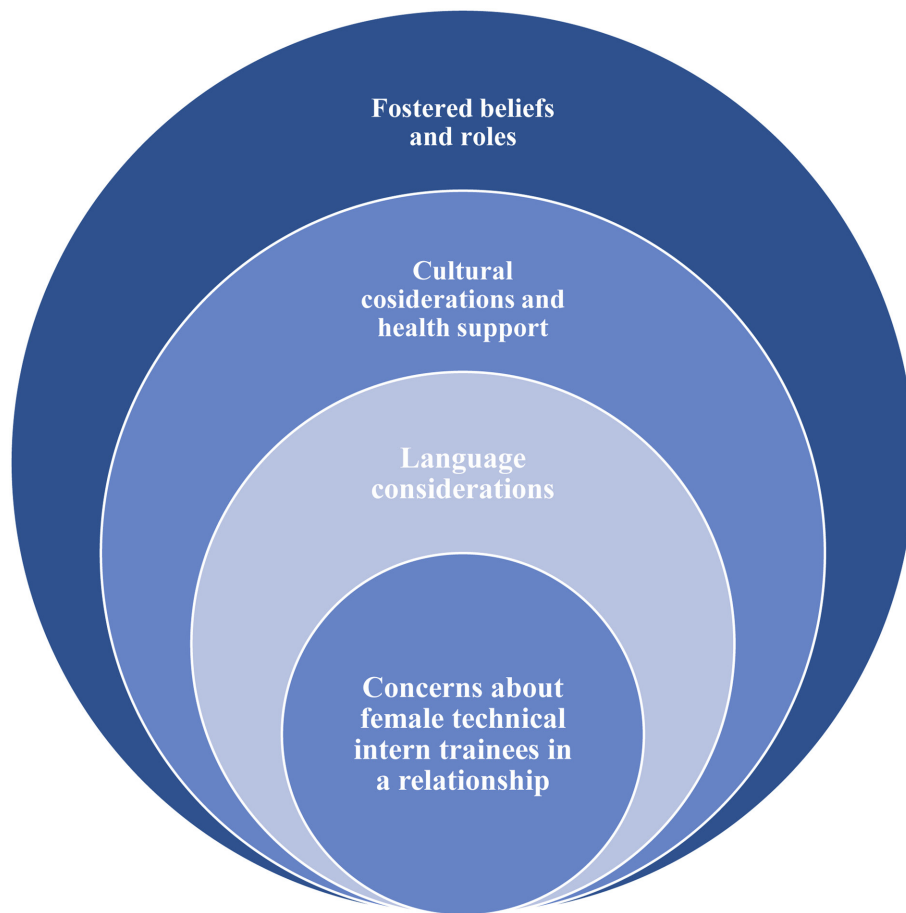


Figure 1 Perspectives of persons in charge regarding support for the health and daily lives of female technical intern trainees.

In the future, cooperation with governments is essential. For instance, in 2017, the Act on Proper Technical Intern Training and Protection of Technical Intern Trainees was enacted. This act clarified the definitions of implementing and supervising organisations as well as the need for cooperation in measures taken by national or local governments³⁰. Although local governments pursue a coexistence policy with foreigners, limited support is available for non-settled foreigners, such as technical intern trainees, because such support is biased towards settled foreigners³¹. Still, technical intern trainees should be considered members of the local community during their stay in Japan. Therefore, local governments should aim to understand the work situation, daily lives, and health of trainees residing in the community by reaching out to supervising organisations and training facilities to support technical intern trainees and meet their needs. A final report by an advisory panel of experts was compiled in November 2023 on the ideal form of the Technical Intern Training Program and Specified Skilled Worker System. It suggested that local governments should actively participate in regional councils composed

of supervising and related organisations, and promote efforts to improve the environment for accepting foreign human resources³². It is hereby hoped that local governments will cooperate with supervising organisations and training facilities to support technical intern trainees in line with their actual situations and needs. Various suggestions were made in the final report; however, none concerned health promotion or preventive measures for the health problems of technical intern trainees. The Ottawa Charter outlines that health is a resource for everyday life and that health promotion goes beyond healthy lifestyles to well-being³³. We believe that a health-promotion perspective is also necessary in policies for migrant workers. Therefore, more concrete efforts and accumulation of practical knowledge on migrant workers' health are desired. The Technical Intern Training Program will be replaced by a new system aimed at securing and developing human resources. An environment should be created so that migrant workers, such as technical intern trainees who are practically in demand as a labour force, can work healthily without threatening their right to self-determination.

This study has some limitations. First, the study was conducted with a small group of persons in charge of female technical intern trainees in a specific geography. Therefore, the findings may not be representative of all supervising organisational staff and training coordinators. Second, participants may have been prompted to provide socially adequate responses because of the face-to-face nature of the interviews. As an understanding of a subject may be deepened through multiple interviews, longitudinal surveys should be considered. Nonetheless, the study's findings provide deep insights into the perspectives of supervising organisations' staff and training coordinators regarding support for the health and daily lives of female trainees.

Conclusion

This study shed light on the perspectives of supervising organisations' staff and training coordinators regarding considerations of the health and daily lives of female technical intern trainees, and their awareness of changes in physical and mental health. Cultural and language considerations, and health support were revealed with a foundation of fostered beliefs and roles. These considerations and support were developed based on these supporters experience. Additionally, they expressed concerns about female trainees getting into a relationship. However, no specific measures, such as providing female trainees with information, have been taken. These findings can contribute to the development of an integrated community-based approach to support the health and daily lives of female trainees.

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