Register of Japanese Nursing (Kango/Kaigo) Language

Hardianto Rahardjo[1], S.Pd., M.Pd; Ningrum Tresnasari[2], S.S.,M.A; Nurza Ariestafuri[3], S.S.,M.Pd; Raden Novitasari[4], S.S.,M.Hum; Uning Kuraesin[5], Dra.,M.Pd;

[1]Prodi Bahasa Jepang Universitas Widyatama
[2]Prodi Bahasa Jepang Universitas Widyatama
[3]Prodi Bahasa Jepang Universitas Widyatama
[4]Prodi Bahasa Jepang Universitas Widyatama
[5]Prodi Bahasa Jepang Universitas Widyatama
[1]hardianto.rahardjo@widyatama.ac.id; [2]ningrum.tresnasari@widyatama.ac.id;

Abstract: The concerning decline in Japanese population caused by the lower ratio of births compared to mortality, had caused an alarmingly increasing number of elders and low numbers of youngsters in Japan. Due to the lack of professional workforce in productive ages, Japan government had been forced to recruit foreign workforce to work in Japan. One of several countries who have been constantly supplying Japan with the much needed workforce is Indonesia. Every year, no less than 25.000 workforces has been sent to Japan, and the number hasn't shown any sign of declining, even amidst the dangerous pandemic that struck both countries in the late 2 years. One of the specific skilled workforces that constantly in high demand is kaigo and kango, or medical nurses. Nevertheless, albeit being well trained in medical care, most of the candidates need to be trained to speak Japanese first, which would take more time and costs before they can be employed. One among several method to decrease the time and costs to train them Japaese is to provide a short but adequate crash course in Japanese conversation and etiquette.

Keyword: kango ; kaiwa ; kotoba ; training

1. Introduction

Since 2010, Japan has seen a steady decline of population. At 2010, Japanese population is around 128 million people, but per January 2021, there are only 125 million people, with 2,5 million among them are foreigners who work and lives in Japan. The high rate of mortality, among them are the youngsters, was not balanced by the rate of birth. This condition has caused the increasing number of elder population, partly due to the advance of medical technology and services and the Japanese healthy lifestyle, and the declining number of professional workforce in productive age. If the population decline continues, it is allegedly predicted that by the year of 2200, the Japanese would have probably extinct.

Back to the problem at hand, nowadays, Japan is still recruiting hundreds of thousands of workforce from other country, namely China, Phillipines and even Indonesia. Every year, Indonesia sent no less than 25.000 workforces to Japan, to work in various range of skill and professions. Among them are those who were trained as Kango or Kaigo, or in English, nurses. Not only nurses for medical treatment in hospitals and such are needed, but also nurses (caretakers) whose duty is to take care of the elder in Japan.

While skilled and trained nurses and caretakers can be provided, since they have to work and stay in Japan, these worforces requires training in at the very least basic Japanese and Japanese language used in medical field. The level of Japanese language proficiency needed to work and stay in Japan normally took months or maybe even years to procure. But, due to the lack of workforce, further worsen by the pandemic which befallen both Japan and Indonesia the needs for Kango and Kaigo workforce becoming more and more dire. Therefore, there's no time and cost that can be wasted in order to properly trained future Kango dan kaigo canndidates. One of several solutions that can be offered is a crash course of basic Japanese skill, namely conversation, both ini workplace and daily life, and training about Japanese manner, etiquette, and work habits. This can be achieved in shorter time than it is to completely train them, both when they arrive in Japan, and before they depart.

This article will discuss the examples of things that needed to be taught to Kango and Kaigo candidates prior to their departure to Japan.

2. Method

This article will be written using descriptive analysis method, i.e. the data will be presented and analyzed in order to obtain a conclusion which is the answer of the problem/question this article try to solve.

3.   Results and Discussions

3.1 Sociolinguistics

Nababan (1991: 2) in Sanyoto (2015: 3) states that sociolinguistics is the study or discussion of language in relation to speakers of that language as members of society. It can also be said that sociolinguistics studies and discusses societal aspects of language, especially the differences (variations) that exist in language related to societal (social) factors. The same thing was revealed by Crystal in Sanyoto (2015: 3), which states that sociolinguistics is a branch of linguistics that examines the way language is integrated with society (with uniqueness, with references, such as race, ethnicity, class, sex and social institutions).

3.2 Register

Wardhaug in Sanyoto (2015: 3-4) suggests that register is a set of vocabulary related to the characteristics of work and groups. Wardhaug provides examples of vocabulary used by surgeons, airline pilots, bank managers, sales clekers and so on. The same thing is also expressed by Pateda (1990: 64) in Sanyoto (2015: 4) which explains that register is the use of language associated with one's job.

3.3 Register of Nursing Language (*Kango*) in Japanese

Based on the theory of the register above, in this analysis the writer will describe the nursing language register (*kango*) in Japanese which is classified into 3 types, the examination register (*kensa*), the health examination register (*shinsatsu*) and the care register in the form of action (*shochi*). .

3.3.1 Register of Examination (*Kensa*)

In the examination register (*kensa*) the vocabulary that will be presented is related to body examinations such as measurement of body weight and height (*shinchou / taijuu kensa*), blood pressure (*ketsuatsu kensa*), blood tests (*ketsueki kensa*), physical examination (*shintai kensa*), examination vital signs (*smell*), examination of urine / feces (*nyou kensa* / *kenben*), and examination of the stomach (*i no kensa*).

a.   Measurement of body weight and height (*shinchou/taijuu kensa*)

Shincou o hakaru	:	Measure your height
Taijuu o hakaru	:	Measure your weight
Shintai sokutei	:	physical measurement
Taijuu sokutei	:	Weight measurement

b.   Blood pressure check (*ketsuatsu kensa*)

Ketsuatsu o hakaru	:	Measure blood pressure
Myaku o hakaru	:	Measure the pulse
Ketsuatsu ga takai	:	High blood pressure
Ketsuatsu ga hikui	:	Low blood pressure
Kouketsuatsu	:	High blood pressure
Teiketsuatsu	:	Low blood pressure

c.   Blood check (*ketsueki kensa*)

Rakuni suru / rirakkusu suru	:	Relax
Shokuji o nuku	:	Skip the meal
Ketsueki kensa	:	Blood test
Chi o toru / saiketsu o suru	:	Take blood
Chi ga deru	:	Blood
Ase ga deru	:	Sweat
Chi ga tomaru	:	Blood stops

d.   Physical examination (*shintai kensa*)

Utsubuse ni naru	:	Be lying down
Aomuke ni naru	:	Lie on your back
Jitto suru	:	Stay still
Teiki kensa	:	Periodic inspection
Shiryoku kensha	:	Vision test
Ningen dokku	:	Human dock
Rentogen	:	Roentgen
Ekoo / chouompa kensa	:	Ultrasonography (USG)
Emuaaruai / jiki kyoumei eizouhou	:	Magnetic Resonance Imaging (MRI)
Shiitii / konpyuuta dansou satsuei	:	Computer Tomography (CT)

	Nouha	:	Electroencephalogram
	Mammogurafii	:	Mamography
	Kensa nyuuin	:	Inspection hospitalization
e.	Examination of vital signs (*baitaru sain*)		
	Myaku / myakuhaku	:	pulse
	Myaku ga osoi	:	Slow pulse
	Kodou ga osoi	:	Slow heartbeat
	Myaku ga hayai	:	Fast pulse
	Kodou ga hayai	:	Beat fast
	Myaku ga midareru	:	The pulse is disturbed
	Shindenzu ga midareru	:	ECG is disturbed
	Tan	:	phlegm
	Kokyuu	:	Breathing
	Iki o suu	:	take a breath
	Iki o tomeru	:	Hold your breath
	Iki o haku	:	take a breath
	Shinkokyuu o suru	:	Take a deep breath
	Taion o hakaru	:	Measure body temperature
	Taionkei o hasamu	:	Hold the thermometer
f.	examination of urine / feces (*nyou kensa / kenben*)		
	Nyou ga nigoru	:	Urine is muddy
	Ketsunyou	:	Hematuria
	Tounyou	:	Diabetes
	Ketsuben	:	Blood in stool
	Geketsu	:	Bloody stool
	Ben ga katai	:	Stool is hard
	Ben ga yawarakai	:	The stool is soft
g.	gastric examination (*i no kensa*)		
	Bariumu	:	Barium
	Geppu o suru	:	Burp
	I kamera o nomu	:	Swallow the Gastroscope
	Rentogen o toru	:	Take a roentgen
	Shindenzu o toru	:	Take an electrocardiogram
	Emuaaruai o toru	:	Take a MRI
	Ekoo o toru	:	Take a USG

3.3.2 Register of Medical examination (*Shinsatsu*)

In the medical check-up register (shinsatsu), the vocabulary that will be presented is related to medical history such as medical history interview (monshin) and symptom conveying (shoujou o tsutaeru).

a.	Medical history interview (*monshin*)		
	Toshi	:	Age
	Kikon; kekkon shite iru	:	married
	Mikon	:	Unmarried
	Jibyoo	:	Chronic condition
	Byooreki	:	Medical history
	Naifukureki	:	Oral calendar
	Kenkoo hoken	:	Health insurance
	Umaretsuki	:	Inborn
	Taishitsu	:	body condition
	Kanja-san	:	Patient
	Riyoosha-san	:	People who are receiving treatment
b.	Convey symptoms (*shoujou o tsutaeru*)		
	Atama ga itai; atamaita; zutsuu	:	headache
	Fura-fura suru	:	Flutter
	Onaka ga itai; onakaita; haraita; fukutsuu	:	Tummy hurts
	Seki (o) suru	:	Cough
	Hanamizu; hana	:	Runny nose
	Samuke ga suru	:	chills
	Netsu ga aru	:	have a fever
	Netsu ga deru	:	become feverish

Hatsunetsu	:	Fever
Koonetsu	:	High fever
Binetsu	:	Low-grade fever
Heinetsu	:	Normal heat
Shakkuri	:	hiccup
Kushami (o) suru	:	sneeze
Haku; modosu	:	Vomiting
Hakike	:	nausea
Kaze (o) hiku	:	cold
Utsuru	:	Contagious (disease)
Futoru	:	Get fat
Yaseru	:	Lose weight
Bempi	:	constipation
Geri	:	diarrhea
Douki	:	Palpitations
Mahi	:	paralysis
Seikatsu shuukanbyoo	:	Lifestyle-related diseases
Eiyou shicchoo	:	malnutrition
Hirou; tsukareru;tsukare	:	fatigue; Tired
kaoiro ga warui	:	Look sick
atama/karada ga omoi	:	Heavy head / body
memai	:	dizzy
noboseru	:	headache
aruregi ga aru	:	I have allergies
Muneyake; imotare	:	Heartburn; Stomach leaning
onaka ga goro-goro suru	:	stomach beeping loudly
zeezee iu	:	sigh
iki ga kurushii	:	Suffocating
iki ga tsumaru	:	Clog breath
ashi ga tsuru	:	Leg cramps
shibireru	:	Numb
mukumu	:	Swelling
katakori	:	Stiff shoulder
hieshoo	:	Cold sensitivity

3.3.3 Register of Care (*Shochi*)

In the care register (shochi), the vocabulary that will be presented is related to the vocabulary that is generally used in actions to get treatment, such as:

Chikutto suru	:	Stinging
Shochidai	:	Treatment table
Tenteki (o) suru	:	Intravenous
Hari	:	needle
Chuusa (o) suru; chuusa (o) utsu	:	inject
Shochi shitsu	:	Treatment room
Kyuunyuu (o) suru	:	inhale; suck
Kyuuin	:	suction
Moreru	:	leaking
Budoutou	:	glucose
Shochi suru	:	To treat [medical]
Tenteki kaato	:	Intravenous cart
Shoudoku suru	:	disinfect
Sakkin	:	Sterilization
Shafutsu	:	Boil disinfection
Nuku (hari/ito o ~)	:	Pull out (needle/yarn)
Teate	:	allowance (medical)
Houtai	:	bandage
Houtai koukan	:	Bandage change
Bansoukou	:	Adhesive plaster
Kateeteru	:	catheter

Kuda	:	tube
Kotton	:	cotton
Gaaze	:	gauze
Membou	:	*cotton bud*
Arukooru	:	alcohol
Arukooru men	:	Alcohol cotton
Tsukaisute	:	disposable
Pinsetto	:	tweezers
Hasami	:	Scissors
Ito	:	yarn
Kyuukyuu bako	:	First aid kit

4.　Conclusion

Based on the analysis described above, it can be concluded that the nursing language register (*kango*) in Japanese is divided into 3 types, such as examination register (*kensa*) which discusses vocabulary commonly used in body examinations, health examination registers (*shinsatsu*) which discusses the vocabulary commonly used for medical history, and the care register (*shochi*) which discusses the vocabulary used to carry out treatment actions.

5.　Acknowledgments

References

1. Sanyoto, Agung Lawu. 2015. *Registering Computers On Facebook Social Networking Accounts: Sociolinguistic Overview*. Published Articles. Muhammadiyah Surakarta University. Surakarta. Online. < http://eprints.ums.ac.id/34845/1/NASKAH%20PUBLIKASI.pdf>.
2. Ueda, Kazuko. 2017. *Nihongo De Care Navi Kamus Jepang-Indonesia Bagi Perawat dan Pengasuh Lansia*. Translated by Charity Soedargo. Jakarta Pusat:UI Press.