



## Cultural Reference Guide

### Korean

This is intended as a staff reference for use as a starting point for understanding care for those of different cultures. Always talk with your patient and their family to learn about his/her particular beliefs and practices to avoid stereotyping. There can be large variations in beliefs and practices even within a given family. Be respectful of the uniqueness of each person you care for at OSUMC. See “Resources & References” for sources for this information.

**Language:** Major language called Hangeul. One written language but several dialects.

#### **Spiritual/Religious Practices**

- Many in US attend Protestant or Catholic churches but may have influence of Shamanism, Taoism, Confucianism, and Buddhism.
- Prayer healing prevalent. Religion is helpful to prevent a healing shock to the body; the divine removes the essence of illness so that the body is able to heal.

#### **Communication**

- Address by title and last name to show respect.
- High respect for doctors but mixed feelings about nurses.
- May agree to avoid conflict. Avoid direct eye contact out of respect for elders and health care providers.
- Using a finger or foot to give directions is considered rude.
- Need small talk to increase comfort. Tend to withhold information unless directly asked.
- If questions are face threatening, leads to shame. Patients will change subject.

#### **Food Practices**

- May not want cold fluids, such as iced beverages. Many are lactose intolerant.
- Diet high in fiber and spicy. Rice, tofu, vegetables, seafood, lean meats and pickled vegetables common in diet.
- May not want to drink water from tap. Family may want to bring special foods to treat hot or cold conditions.

#### **Family**

- Family is nuclear and extended. Head of household makes decisions.
- Women are caregivers. Respect elders.

#### **Health Beliefs**

- Health is balance of life energy. Illness is seen as result of bad luck or something wrong that was done in the past. Disability as shameful.
- Use acupuncture, herbs, and cupping. Tend to self treat.
- Sharing medicines common and accepted. Reduce med doses as American medicine is “too strong”. May stop taking medicines when symptoms ease.
- View blood draw as taking away life energy.
- Prefer whole body treatment. Scientific treatments only work if you “see” it.

#### **Death/Dying**

- Hesitant to talk about death. Head of household usually told diagnosis and then family informs patient. May prefer to take person home to die so his/her ghost will not wander.
- Not usually accepting of organ donation or autopsy because it is viewed as tampering with the body, soul and spirit.