

A Comparative Study of Korean and Japanese customs related to Child Birth and Child Rearing

Kazuyo OISHI¹, Bong Ju PARK², Miyuki ARAKI¹, Nachiko KATO³,
Emiko KINEBUCHI⁴, and Kazuko MIYASATO⁵

Abstract The cultural background of patients who require in nursing must be considered because it has effects on the quality of nursing care. Traditional customs regarding delivery and child rearing in Korea and Japan were investigated and compared. Inherited customs in the two areas were very similar. Many taboos concerned the type of eaten food and behavior during after delivery were scientifically persuasive. Before the development of medical science, such customs whereas were the fruits of traditional wisdom. Concerning childbirth, taboos in Korea involved the element of sacredness, in Japan taboos guarded against pollution. Various rites performed after birth reflected not only the wishes of the parents and other family members, but of neighbors for the healthy growth of the child. The essence of these birth customs, regardless of differences in culture, is that people wished for the safety of the mother and child.

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Key Words : traditional customs, delivery, childrearing, Korean, Japanese

Introduction

The cultural background of patients must be considered in order to provide quality nursing care. Traditional customs concerning delivery and child rearing give us a unique glimpse into the most fundamental aspect of human culture. Both schools of medicine and nursing can benefit from investigations of the cultural traditions related to childbirth and child rearing. Improvements in nursing and medical technology have brought about significant improvements in the physical conditions of both the mother and baby, but advancements in medical technology have often overshadowed or neglected traditional values and customs concerning heart and traditional wisdom in childbirth and parenting. We therefore investigated traditional customs regarding delivery and parenting in Korea and Japan. A comparison is made of those customs and suggestions given as how to use the understanding of traditional culture to improve nursing care.

Definition of terms

1. Culture: The totality of group life of human beings who are members of a single society, which includes knowledge, religion, art, law, morals, and customs.
2. Customs: Traditional ways of doing things which have been developed within a society been in effect for generations and are generally accepted by its members.

Method

1. Choice of participants and areas

a) Participants

Data first was collected from women 20 to 94 years old. The question arose as to which age group would have paid greater attention to the concerns of custom and tradition, therefore only persons over the age of 40 were chosen for our survey, 81 women in Korea and 75 in Japan who had undergone home delivery. Only women who were able to understand the purpose of this study were asked to participate.

1 Advanced Course for Midwifery, Associate Degree, Nagasaki University

2 Faculty of Nursing, Chinju Junior College of Nursing and Health

3 Tatuki Ladies Clinic

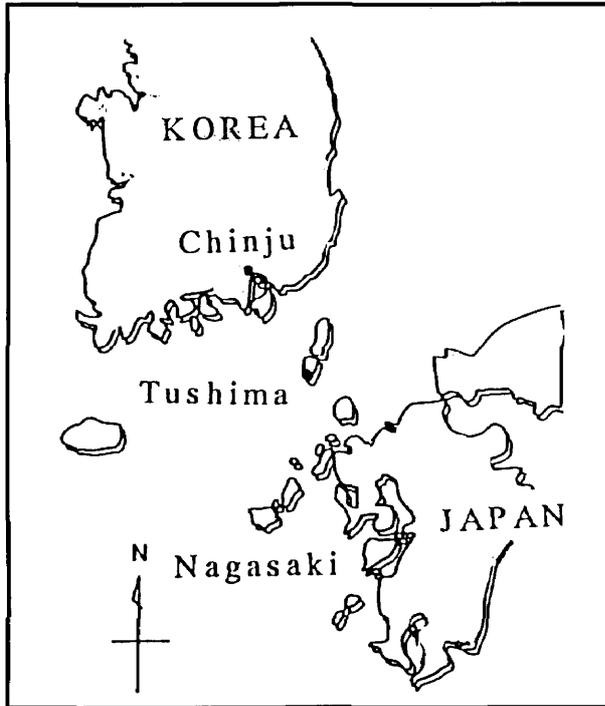
4 Department of Nursing Graduate School, Kitazato University

5 Faculty of Nursing, Kitazato University

b) Areas <Figure 1>

(1) In Korea, 10 locations: Gumsan myun, Gungok myun, Daegok myun, Gisu myun, Myungsuk myun, Chinsung myun, Chyphyun myun, Moonsan myun, Gaedong myun, and Chinju City, Kyung sang namdo were surveyed.

Fig. 1. The area of study



(2) In Japan, 1 location: Tutu, Izuhara-cho, Tushima, Nagasaki Prefecture was surveyed.

2. Data collection and method of analysis

The study design was that of a survey. The collection in Korea was done by a Korean researcher and her assistants, and in Japan by Japanese researchers and their assistants from March 1996 to June 1997. Researchers have visited to home of participants and asked some questions to then to fill out a questionnaire, assistance being provided when necessary. The average time spent with a participant was 40 minutes to 1 hour. A questionnaire was written in Korean, Japanese, and English to avoid linguistic confusion. There were 6 items on general characteristics, 2 on obstetric history, 6 on pregnancy, 13 on delivery, and 10 on after-delivery, and upbringing. There were a total of 37 open and closed questions. Data was analyzed for frequency, percentage, and mean using the SPSS (statistical package for social science).

Results

1. General characteristics of the participants (Table 1)

The ages of the Korean women ranged from 52 to 89 years. The largest age group consisted of women in their 1970s (average 68.0yrs). The ages of the women in Japan ranged from 48 to 94 years. The average age was 73.9 years. The Japanese women were older than Korean women, the average age difference being 5.9 years. The majority of the Japanese participants had elementary school educations, whereas the majority of the Korean ones had had no formal schooling. Most women reported themselves Buddhist; 87.7% in Korea, 84.0% in Japan. The average length of residency was 43.9 years in Korea and 70.8 years in Japan. 52.0% of the Japanese women's husbands were farmers or fishermen, and 92.6% of Korean women's husbands were farmers.

Table 1. General Characteristics of the women studied

	Korean women(N:81)	Japanese women(N:75)
Average age	68.0	73.9
(Range)	(52-89)	(48-94)
Education level		
Could write & read only	41(50.6%)	-
Elementary school	5(6.2%)	54(72.0%)
Middle school	7(8.6%)	11(14.7%)
Others	28(34.6%)	10(13.3%)
Religion		
Buddist	71(87.7%)	63(84.0%)
Others	10(12.3%)	12(16.0%)
Average length of residency(years)	43.9	70.8
Occupation of husband		
Farmer or fisherman	75(92.6%)	39(52.0%)
Others	6(7.4%)	36(48.0%)

2. Obstetric characteristics (Table 2)

The average age at marriage was 21.3 in Japan, and 18.0 in Korea, the Korean marital age being 3 years younger. The average number of deliveries was 5.0 in Korea, and 4.4 in Japan.

Table 2. Obstetric characteristics of the study participants

	Korean women(N:81)	Japanese women(N:75)
Average age at marriage	18.0	21.3
(Range)	(15-25)	(15-30)
Average number of deliveries	5.0	4.4

3. Customs related to delivery

a) Assistant(s) at delivery (Table 3)

The main assistant at delivery was the mother-

in-law (75.3%) in Korea and the midwife (61.3%) in Japan.

Table 3. Assistant during delivery

	Korean women(N:81)	Japanese women(N:75)
Husband	1(1.2%)	1(1.3%)
Mother-in-law	61(75.3%)	4(5.3%)
Mother	1(1.2%)	5(6.7%)
Neighbor	1(1.2%)	2(2.7%)
Midwife	2(2.5%)	46(61.3%)
Pregnant woman herself	13(16.0%)	9(12.0%)
Other	2(2.5%)	8(10.7%)

b) Husband's participation in delivery

Few husbands were present at delivery in either country. The roles of men and women are distinctly defined in Korea. Giving birth is considered a woman's task, the not taking part in the delivery. In Japan, delivery was called "sankegare" (delivery was uncleanliness), and the husband was prohibited from entering the delivery room.

c) Taboos related to delivery (Table 4)

77.8% of the Korean women answered that there were taboos regarding delivery, but only 10.7% of Japanese answered positively. Compared to the Japanese women, the Koreans had to follow many procedures which appeared to be taboos, e.g., to prevent people from visiting a newborn baby and mother. Japanese taboos prevented delivery in a room containing a Shinto altar and men were not allowed to enter the delivery room.

Table 4. Taboos related to delivery

	Korean women(N:81)	Japanese women(N:75)
Some	63(77.8%)	8(10.7%)
None	18(22.2%)	67(89.3%)

4. Customs related to after-delivery and upbringing

a) Returning to the wife's natal home for delivery (Table 5)

Only 2.5% of the Korean women returned their parents' homes for delivery, whereas 45.3% of the Japanese did, 21.3% for the first delivery only and 24.0% for subsequent deliveries.

Table 5. Returning to the wife's natal home for delivery

	Korean women(N:81)	Japanese women(N:75)
Some	2(2.5%)	34(45.3%)
None	79(97.5%)	41(54.7%)

b) Helpers during the puerperium (Table 6)

In Korea, 74.1% women reported their mothers-in-law as the primary helper, and 3.7% reported their own mothers as their helper. Those who answered nobody accounted for 14.8% of the study participants. In Japan, 52.0% of the women reported their mothers as the primary helper, and 28.0% their mothers-in-law.

Table 6. Helpers during the puerperium

	Korean women(N:81)	Japanese women(N:75)
Husband	4(4.9%)	5(6.8%)
Mother-in-law	60(74.1%)	21(28.0%)
Mother	3(3.7%)	39(52.0%)
Neighbor	-	2(2.7%)
Sister	-	4(5.3%)
Other	-	4(5.3%)
None	12(14.8%)	-

c) Taboos after delivery (Table 7 for foods, Table 8 for behavior)

Taboos concerning food and drink reported after delivery were 79.0% women Korean, 30.7% Japanese women. The Koreans reported more elements to avoid than the Japanese. Food and drink prohibited in Korea were kimchee, anything hard, ice water, spicy food. Fried foods and food offerings from ceremonies also were prohibited because of the Korean superstition that something bad would happen that would affect the baby's well being. Compared to the taboos observed during pregnancy, the taboos after delivery had no homeopathic aspect rather they were scientifically reasonable. The prohibited foods and drink in Japan were foods hard to digest such as shiitake mushrooms, soba (buckwheat noodles), azuki beans, and butterbur. In both countries, protection of the teeth and stomach of the mother were commonly taken into account.

As to prohibited behavior, 87.7% of the Koreans and 21.3% of the Japanese reported. In general, "do not attend funerals" and "do not work hard" were Korean taboos, and "do not move around" and "do not go near deities"

were the Japanese taboos. One typical Korean taboo was "do not expose body parts to cold weather".

Table 7. Foods to be avoided after childbirth

	Korean women(N:81)	Japanese women(N:75)
Some	64(79.0%)	23(30.7%)
None	16(19.8%)	52(69.3%)
Other	1(1.2%)	-

Table 8. Behavior to be avoided after childbirth

	Korean women(N:81)	Japanese women(N:75)
Some	71(87.7%)	16(21.3%)
None	10(12.3%)	59(78.7%)

d) Rituals after childbirth

Three main rituals were observed in Korea. The first taking place in the period when the child was 7 to 49 days old, the second when the child was 100 days old, and the last when the child was 1 year old. Four main rituals were observed in Japan; after 7 days, 33 days, 100 days, and the last when the child was 1 year old.

Discussion

1. General background of the participants

Most of Japanese women were elderly, older by an average 5.9 years than the Korean woman. The study participants had all undergone home delivery with or without health care providers. In Japan, traditional customs regarding pregnancy, delivery, and upbringing changed markedly in the 1960s. This change occurred when the place of delivery shifted from the home to a health care institution¹⁾. The Japanese women in this study gave birth between 1930 and 1950, before this modification took place and therefore were still influenced by traditional customs. Furthermore, Tutu was an isolated fishing village, not affected by modern technology until recent year, so its own traditions were well preserved. In Korea, home delivery was overtaken by hospital delivery in the 1960s and 1970s. In the pilot test the random sample questioned women whose ages ranged 20 to 89 years old. Those in their 40 and 50 had experienced home or institutional deliveries, institutional delivery being higher for those in their 40 than in their 50. For the purposes of this study of traditional customs, only women who had had a home delivery were selected for participation.

2. Taboo customs during delivery

A Korean taboo was that no one but the family members could enter a house where there was a new-born baby for 14-21 days after its delivery. In Korea, when a baby is born, the entrance of the house is decorated with a banning rope called geum-jul, which is the symbol of a sacred area that rid it of uncleanness and demons. If the baby is a boy, red pepper and charcoal are attached to the rope, if a girl, green pine needles and charcoal. This is the sign of birth to the neighbors and that no one but the family members may enter the house. Because Koreans have sanctified labor pains. Many taboos and restrictions that apply to those outside the family therefore are related to birth. The geum-jul being hung at the front entrance of a house therefore serves as a signal to visitors not to approach the holy delivery place they by avoids possible damage to a newborn child or its mother. Sometimes, however, people used the geum-jul for a purpose other than as the symbol of birth, such as for when there was an outbreak of infectious disease. Although the geum-jul was only a sign of restriction and was a primitive act to induce caution and draw attention, it played an important role for the new mother and baby. Use of the geum-jul is very rational because it alerts visitors against approaching the newborn and its mother when both are extremely weak mentally and physically and might not be able to protect themselves from contamination careeied on a visitor's hands, feet, body, mouth, or clothes¹⁾. In conclusion, the geum-jul (banning rope) is a symbol both of the sanctity of labor pain and the need of caution and carefulness. This geum-jul is a custom unique to Asia is said to be used across ethnic boundaries in China, Japan, Vietnam, Manchuria, and Mongolia¹⁾, but we could find no use of a banning rope in Japan in our research.

In Japan, delivery should not occur in a room containing a Buddhist or Shinto altar, and men should keep away from the delivery, because delivery of a child was considered unclean (sankegare)²⁾³⁾. After delivery women first should rid themselves of uncleanness by living, only in the delivery room for 7 days not entering the room with the Buddhist or Shinto altar or the sunny side of the house. Taboos for other family members also were strict, e.g., they must not go to work for 3 to 7 days if they fishermen. The custom of sankegare is said to

have disappeared about 1872³⁾, but it may have remained in the above form in some places through the 1930s and 1950s, when most of our study participants underwent child birth. A dark room the *nando*, was used for delivery. This was a room usually used only as a bedroom. The main room, the *zashiki*, where the *Shinto* or *Buddhist* altar was placed, was never used for birthing. Because of the belief that the husband being around the delivery room would cause a hard labor, he stayed in another part of this own during the delivery. Although not present at the labor, he could help by boiling water and calling for the midwife.

The degree of the mother-in-law's involvement was lower in Japan (assisting at delivery, 5.3%) than Korea (assisting at delivery, 75.3%); however, 45.3% of the Japanese women went to their own parent's home for delivery, which was a very different custom from that of the Korean women. We conclude that Japanese mothers of pregnant women could be involved in their married daughters' lives, whereas Korean mothers could not. Korean society has been molded by Confucianethics. When a woman marries she is called *chul ga wae in* (a stranger due to marriage), and is no longer considered a member of her natal family. The mother would not be involved in her married daughter's life even should she want to be. Extended family systems are another characteristic of traditional Korean society. In this type of family the dynamic, mother-in-law has a core role in transmitting family traditions to the next generation. Her role includes being counselor, assistant at delivery and after, educator, and advisor to the child. This custom is related in the results of this study; 77.2% of the Korea women had their mother-in-law assisting in the delivery, 76.9% as postpartum assistant, and 97.5% did not return their own parent's home for convalescence after delivery. These findings differ from those for the Japanese women, which showed a strong connection between a married daughter and her mother. The custom of sending a great deal of food and other goods to the in-laws during the pregnant daughter's residence is still observed in various parts of Japan. The logic behind this custom is that the parents of the pregnant women are aiding the in-laws loss due to their daughter's pregnancy and her inability to work during the peri-pregnant period²⁾⁴⁾. Under old style marriage customs, however, after marriage the

husband visited his wife and children, who usually were taken care of by the wife's family until the husband became the master of his family or set up his own branch family. This large-scale present giving to in-laws therefore can be traced back to this old style of marriage²⁾⁴⁾. Delivery at the wife's parent's home still prevails, and the connection between the parents and married daughter is strong in Japan.

3. Taboo customs after delivery

There was a major difference between the observance of Korean and Japanese delivery customs; 79.0% of the Korean sample group tried to keep these customs of foods(30.7% in Japan), 87.7% of the Korean sample group tried to keep these customs of behavior(21.3% in Japan).

Concerning the special diet given women after delivery, the Korean participants were given seaweed soup and steamed rice 4 to 6 times a day for 14-21 days. The women believed that seaweed soup was effective to ridding them of bad blood. Seaweed contains much calcium and iodine, which have been proved to aid hemostasis and contraction of the uterus and to enhance the body is metabolism⁵⁾. The Japanese participants were given miso soup and rice gruel 4 to 6 times a day for 3 days. They believed that after delivery women are so weak that their stomachs may reject certain kinds of food. Miso soup and rice gruel are not particularly nutritious, but because they are easily digested and absorbed, it is scientifically valid to say they are good for recovery from childbirth²⁾⁴⁾.

Various foods were prohibited after childbirth as they prolonged the recovery period. Hard, cold foods were avoided in Korea, and hard to digest ones in Japan. Their avoidance was good for protecting the teeth and stomach of the mather, which again is scientifically valid. In both countries, recuperation after delivery was considered very important, and after delivery women were made to rest. Certain behavior was prohibited, such as actions that might have an unfavorable effect on recovery, e.g., hard work, attending funeral or wedding ceremonies, and coming near fire. In both countries, these taboos were meant to protect the mother physically and mentally. Getting enough rest was very important for the mother, therefore going to the well to draw water and seeing or reading books was prohibited. Household work

originally was permitted after 8 days and work in the fields after 14-21 days. All these prohibitions were intended to protect the mother's body.

Many of the customs concerning taboos after childbirth are not merely superstitions, they are scientifically persuasive. The members of early societies, who had little scientific knowledge, were well acquainted with the process of recover from childbirth through their life experiences³⁾⁴⁾⁵⁾. In Korea, the most common after-delivery taboos are avoidance of participation in funerals and wedding ceremonies, the most serious being taboos related to death. This is to prevent contact with unclean people and things. People long regarded the death as the worst type of pollution. Although taboos have lost much of their social power in recent years restrictive, historically they were exceedingly powerful, and people obeyed them.

4. Customs concerning childrearing

In Japan, the naming ceremony traditionally was performed on the 7th day after birth. This important ceremony, marked the mother's return ordinary daily life, and baby was treated as a human being. On the 31st day there was the ceremony of visiting a shrine, at which time the defilement of the mother was considered to be over, and the baby was taken outside for the first time. There were three kinds of after-delivery rituals in Korea; the seventh day, hundredth day, and first birthday rites. The ceremonies performed after 100 days and one year were similar in both countries. Another common custom in east Asia, is that the baby's fortune was told by letting him or her choose an abacus or a writing brush⁶⁾. The purpose of after-birth rites was to protect the baby from various dangers. The intervals between rites were the same in both countries, and coincided with physiological changes in the child²⁾⁶⁾. These rites reflect the protective feeling and prayers of the ancestors.

Conclusion

As for delivery, the taboos in Korea were related to the idea of sacredness of birth, whereas in Japan they were related to the idea of concept of pollution. The various rites performed after birth reflected not only the wishes of the parents but those of other family members and neighbors for the healthy growth of the child. The birthing

customs that were inherited in the areas of Korean and Japan were very similar, but there a major difference between the observance of Korean and Japanese delivery customs. Many of the taboos on foods and behavior during after delivery were scientifically persuasive. They were the fruits of traditional wisdom used to protect the lives of the new mother and child in times before medical science had developed. The essence of these birth customs, regardless of differences in culture, is that people wished for an easy delivery.

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日韓における出産・育児に関する慣習の比較研究

大石 和代¹・朴 鳳珠²・荒木 美幸¹・加藤奈智子³・杵淵恵美子⁴・宮里 和子⁵

- 1 長崎大学医療技術短期大学部専攻科助産学特別専攻
- 2 晋州看護保健専門大学
- 3 達木レディースクリニック
- 4 北里大学大学院
- 5 北里大学看護学部

要 旨 韓国（晋州）と日本（長崎県・対馬）において出産・育児に関する慣習について調査し、結果を比較した。里帰りの慣習は日本独自のものであった。出産は韓国では神聖視されており、日本では不浄視されていた。しかし、二つの地域での出産・育児の慣習は類似していた。産後の禁忌に関する慣習では、妊娠中の慣習と比較して科学的に納得のいくものが多かった。科学的知識の乏しかった時代の人々は、経験から産後の回復過程をよく観察し理解していたと思われる。誕生後はさまざまな儀式がとり行われていたが、これらは子どもの無事を願う両親や家族及び近隣社会の人々の気持ちを反映したものであった。出産・育児に関する慣習の本質は母子の安全への願いであり、それは文化の違いに関係なく存在するものであろう。

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