

Development of Home Visit Intervention Program for Holistic Healthcare of Multi-cultural Couples

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Abstract. This study developed a home visit intervention program from a holistic healthcare perspective for multi-cultural couples in rural areas. The period of research was from March 2014 to July 2014. The program identified the health issues and educational demands of subjects through literary studies and interviews with multi-cultural couples, and composed the program from a holistic health care perspective. The composition of the program was made up of health examination and education, counseling and support, relaxation therapy, prayer, etc. A total of six program intervention methods were provided through visitations and phone counseling once a week for one hour at a time under the topics of couples learning about each other through mutual conversation approach method, healthy couples, wise and frugal couples, assimilating couples, and happy couples. It is necessary to apply to check for effects in holistic health of multi-cultural couples at related institutes such as multi-cultural centers and health centers, and it is also necessary to continuously develop customized health programs according to their cultural differences.

Keywords: Multi-cultural Couples, Holistic Healthcare, Intervention Program

1 Introduction

Marriage with foreign women, which was only 0.2% of the total population in 1990, now accounts for over 10% of newlyweds, and thus, multi-cultural families have now become a common type of Korean families [1]. 11,605, or 3.5%, of all marriages (332,090) in 2000 were international marriages, and 59.8% of them were between Korean men and foreign women. International marriages continued to increase and in

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2013, 8%, or 25,963, of the total number of marriages (322,807) were international marriages with 70.5% being between Korean men and foreign women [2].

Health today is a right for everyone and the new concept of holistic health surfaced, and through self-healthcare with gradual continuity per cycle from the perspective of life-cycle health from infancy to elderly [3], comprehensive healthcare that includes not only physical health, but also mental, social, cultural and spiritual health concepts have become important. In particular, nursing with a comprehensive approach method that can understand their health and cultural differences to improve the holistic health of multi-cultural couples in rural areas with low accessibility to medical benefits and weak social adaptability and economic power has become necessary.

1.1 Purpose of Study

The purpose of this study is to develop a home visit intervention program for holistic healthcare of multi-cultural couples from a physical, mental, social, cultural, and spiritual approach.

2 Research Method

2.1 Research Design

This study is on the development of a home visit nursing intervention program based on a holistic perspective for multi-cultural couples.

2.2 Data Collection and Analysis

This study was carried out from March 2014 after receiving approval from the Institutional Bioethics Review Board until July 2014. The detailed procedures are as follows. First, preceding studies and literatures were examined to identify the health issues and demands of multi-cultural couples. Second, four multi-cultural couples were interviewed and analyzed to check the health issue and demands for holistic healthcare of multi-cultural couples. Third, the goal and contents of the home visit intervention program was deduced from a holistic healthcare perspective. Fourth, feasibility was verified through consultation with experts based on the program composition, and the details of the program were completed.

3 Research Results

3.1 Preceding Research and Literary Studies

In order to identify the health issues and demands of multi-cultural couples, websites, diploma dissertations published in the past five years, studies published in academic journals, and policy reports were searched at KERIS (Korea Education & Research Information Service), National Assembly Library, KISS (Korea Studies Information), DBPia (Nuri Media), RISS, and the Ministry of Health and Welfare. Key search words were 'marriage migrant women', 'multi-cultural husband', 'international marriage', and 'multi-cultural families', with additional search words such as 'health', 'couples education', and 'nursing intervention' to categorize holistic health, or in other words, physical, mental, socio-cultural, and spiritual health, as part of the health fields suggested by the World Health Organization (WHO).

3.2 Interviews with Multi-cultural Couples

In order to identify the health issues and demands of multi-cultural couples in rural areas, four multi-cultural couples introduced by a social welfare center in Y-gun of K province were interviewed as subjects. Upon interviewing the husband, the need for education of couples per life-cycle was found to be in the five fields of migrant couples, newlyweds, adaptation period, middle age years, and retirement years in relation to the health issue and demands of multi-cultural couples. For migrant married women, health issues and demands were found to be in difficulty of communication in the beginning of marriage, difficulty to adapt to family cultural lifestyles, demand for raising global children, interference in raising children by parents-in-law, pressure on religion, different concept of hygiene, short temper of husbands, discord with husband who is impetuous and nagging, lack of understanding of wife by husband, desire for self-development, desire for pregnancy, lack of support system among residents in the same situation, and difference of food culture.

3.3 Goal and Contents of Home Visit Intervention Program

The home visit intervention program was comprised of a total of six sessions through home visits and telephone calls for one hour per week. Home visits were composed of educational contents to maintain and improve holistic health including vital signs check, relaxation therapy, counseling and support, and prayer. Physical health education aims at improving self healthcare abilities and providing motivation for positive changes in lifestyles in order to maintain and improve the holistic health of subjects. Mental and socio-cultural health education aims at learning the ability to control stress and comfortably express one's emotions, while creating a health and happy home environment culture in a relationship of mutual respect. Spiritual health education provides meaning and faith in life and aims at allowing couples to take on

new challenges while learning together, sharing together, and understanding each other.

3.3.1 Number of Sessions and Session Time

The number and time of sessions was in the case of home visits, it had a flexible characteristic according to the features and demands of the subjects [4]. Taking this into consideration, this study was on adults so it was decided to have 60 minute weekly sessions for a total of six sessions.

3.3.2 Program Operation Method

The program's operation method applied the JUMP(Jump Ultra Mom Program) [3] operating method to visit the homes of the subjects in order to compose the operating method of the program.

3.4 Counseling from Experts

In order to verify the feasibility of the program, based on counseling with three experts, the home visit intervention program was revised and supplemented, and finally, the feasibility was confirmed with nursing professors and education professors related to multi-cultural families.

4 Conclusion

The intervention program in this study integrated the emotional, social and cultural support program operated by multi-cultural centers or family health support centers as well as health improvement programs by health centers and was developed to visit homes to maintain and improve the holistic health of multi-cultural couples. Furthermore, in addition to health examinations and health education from the aspect of holistic health improvement, counseling and support activities, as well as relaxation therapy and prayer were added to develop a user-oriented integrated holistic healthcare program.

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