The Work of Oliver R. Avison in Comparison to that of Albert Schweitzer from a Post-Colonial Perspective

Meehyun Chung
Office of Chaplaincy, United Graduate School of Theology, Yonsei University, Seoul, Korea.

Compared to Nobel Prize Laureate Albert Schweitzer, Oliver R. Avison is not well known. Seeking to achieve more international recognition for Avison, this article elaborates on Avison’s work with hospital and educational institutions from a post-colonial perspective. Schweitzer and Avison each wrote their memoirs in an autobiographical style, and this article deals primarily with those writings, which are published under the titles Out of My Life and Thought by Schweitzer and The Land of the Morning Calm by Avison. Schweitzer and Avison were contemporaries and worked in medical service in the colonial period. Thus, they have certain commonalities. However, this article will elaborate on how Avison approached his mission differently in order to promote sustainability, equality, and subjectivity in his work. Avison carried out more than mere charity work, he also accomplished sustainable development of his hospital, as well as its affiliated educational institution. The current circumstances of Severance Hospital and Yonsei University in Korea, compared to that of the Albert Schweitzer Hospital in Lambaréné, are clear evidence of this. Avison’s extraordinary missionary work did not reflect the more negative side effects of colonial heritage intertwined with mission work in the 19th Century. Avison’s case should be better known as a model of ecumenical mission towards sustainable development.

Key Words: Sustainability, subjectivity, equality, medical education, orientalism, post colonialism

INTRODUCTION

The COVID-19 pandemic experience has reinforced the importance of the sustainability and interconnectedness in our globalized world. In the late 19th and the beginning of the 20th century, Western influences contributed greatly to the cultivation of public health systems in Korea in the face of cholera and a local smallpox epidemic. Oliver R. Avison (1860–1959) was the prime promoter of Western medicine at this time through his work at Severance Hospital and its affiliated medical college.

While Oliver R. Avison was working in Korea, on the other side of the globe, the Nobel Prize Laureate and French Medical Missionary Albert Schweitzer (1875–1965) was working in Africa. Both Schweitzer and Avison each wrote autobiographical memoirs of their work. This article primarily deals with those writings, which are published under the titles Out of My Life and Thought by Schweitzer and The Land of the Morning Calm by Avison. Schweitzer and Avison were contemporaries and worked in medical service in the colonial period. Thus, they have certain commonalities. However, this article will elaborate on how Avison approached his mission differently in order to promote sustainability, equality, and subjectivity in his work. Avison carried out more than mere charity work, he also accomplished sustainable development of his hospital, as well as its affiliated educational institution. The current circumstances of Severance Hospital and Yonsei University in Korea, compared to that of the Albert Schweitzer Hospital in Lambaréné, are clear evidence of this. Avison’s extraordinary missionary work did not reflect the more negative side effects of colonial heritage intertwined with mission work in the 19th Century. Avison’s case should be better known as a model of ecumenical mission towards sustainable development.

Key Words: Sustainability, subjectivity, equality, medical education, orientalism, post colonialism
In order to serve in Africa, he studied medicine for 7 years between 1905 and 1912. Schweitzer was finally sent to Africa by The Society of the Evangelist Missions of Paris in 1913 at the age of 38 years. Even though he had taught theology at the University of Strasbourg and served as a pastor at a local church in Europe, in the mission field, filled with suffering natives, he was not involved in faith matters, but served “merely as a doctor.”

Oliver Avison had studied pharmacy and then later medicine, and had taught as a professor in the medical faculty of the University of Toronto. He also practiced as the personal doctor for the mayor of Toronto. Thus, regarding medical expertise, there was a difference between Schweitzer and Avison in terms of study and experience.

In September 1892, Avison invited US missionary Horace Grant Underwood (1859–1916) to Toronto through the Young Men’s Christian Association for a lecture to the medical students: in addition to Underwood, his encounters with Canadian missionaries in Korea, including James S. Gale (1863–1937) and Robert A. Hardie (1865–1949), were essential to Avison’s work in Korea.4 In this encounter with Underwood, Avison heard of the medical needs of Korea and made up his mind to go to Korea.9 As a result of Underwood’s visit, Avison grew determined to reduce the high death rate, infant mortality in particular, and to improve sanitary knowledge and the condition of people’s lives in Korea. Avison began his work on November 1, 1893 as physician to the Royal Korean Hospital10 sent by the North Presbyterian Church of USA where he saw potential for development.

Schweitzer diligently raised funds by giving concerts and lectures in different parts of Europe. When he was awarded the Nobel Peace Prize in 1952, he donated the entire amount of this prize for construction of a leprosarium and for improving his primary hospital. Avison also raised funds diligently. A major donor with whom he was connected was Louis Henry Severance (1838–1913) who was inspired by the medical project of Avison and made possible the establishment of a full-scale hospital in Seoul. This sort of financial assistance enabled self-support for Koreans.

In regards to socio-political background and colonialism, the two went through similar experiences. Lambaréné, located south of the equator on the Ogooué River, was a part of French Equatorial Africa until 1958, at which time it became the nation of Gabon.11 The French people dominated this region as colonizers. Avison arrived in Korea at a very turbulent time. After the Russo-Japanese War (1904–1905), the U.S.A., Great Britain, Germany, and France had supported Japan with a secret agreement which legitimized the Japanese colonial rule of Korea. The secret accord, the Katsura-Taft Agreement, was made on July 29, 1905. In result, Korea lost their autonomy, and the Korean emperor was forced to resign from his position. In 1910, Korea was finally annexed by Japan. On March 1, 1919 there was a non-violent peaceful independence movement.12 Avison experienced all of this political tumult and under these circumstances worked on the establishment of a hospital and college.

COMMONALITIES BETWEEN SCHWEITZER AND AVISON

As a French citizen, Schweitzer served in present day Gabon between 1913 and 1965, while as a Canadian with a British background, Avison worked in Korea between 1892 and 1935. Avison arrived in Lambaréné, Gabon at the age of 38 years with his wife Helene Bresslau Schweitzer (1879–1957). Avison stayed in Korea for 43 years, with a short sabbatical. Schweitzer served in the African mission field for 52 years, leaving briefly during the Second World War; his actual stay in Africa was 37 years. During his stay in Europe, Schweitzer sought to raise funds for his medical project in Lambaréné. Similarly, Avison used his sabbatical stay in Canada and USA to deliver lectures on his missionary activities in Korea and to raise funds. Oliver and Jennie Barnes Avison and Albert and Helene Bresslau Schweitzer shared a common goal to improve medicine and heal the suffering of people. Both couples also loved music. As a pipe organist Albert introduced the piano to Lambaréné, and Avison also brought a piano to Seoul and with his wife and promoted Church music in all departments of college education.

Schweitzer’s initial interest in mission was awakened during his university years as a theology student by a professor of Church history, Paul Ernst Lucius (1852–1902) who persuasively explained the meaning of mission’s history. Schweitzer became acquainted with the connection between mission and following Jesus as a disciple seeking atonement.5 Schweitzer became a lecturer at the University of Strasbourg and specialized in his research into the Historical Jesus and Paul’s mysticism.7 He was a leading scholar in liberal theology. At the age of 21, he thought he would dedicate his life to science, but from the age of thirty, he dedicated himself to serving humanity. One day in 1904, Schweitzer was reading a newsletter from the Paris Missionary Society, which was looking for a medical missionary in Africa, that lead to his resolve to become a jungle doctor.6
DIFFERENCES BETWEEN LAMBARÉNÉ AND SEOUL

Links between Western colonialism and mission work are readily evident, and a paternalistic attitude was common among missionaries in the global South. In this regard, Albert Schweitzer did not differ greatly from the status quo. In 1952, Schweitzer won the Nobel Prize for his service to humanity and his ethical theory of “reverence for life.” In its October 6, 1947 edition, Life magazine called him, “the greatest man in the world.” British Prime Minister Winston Churchill (1874–1965) dubbed him “a genius of humanity.” Time magazine described him in its July 11, 1949 cover story, “One of the most extraordinary men of modern times.” However, from a present-day perspective, aspects of a colonial mindset can be seen.

Envisioning sustainability

Worldwide mission beginning in the 17th century was intertwined with the aspirations of colonialism. One fundamental problem was a disregard for the need for education. While the hospital staff in Lambaréné were mostly Gabonese, the directors were mostly European, and Schweitzer did not support the training of indigenous doctors and nurses.

Schweitzer was well aware of the problems of colonialism, the European exploitation of natural resources, and the slave trade, and through his missionary work, he wanted to atone for the sins of Europeans. For Schweitzer, ethical conduct in general and atonement were essential. As a theologian researching the historical Jesus, he came to the realization that ethical actions were more important than investigating historical facts about Jesus. As a person who pursued Christian ethical values to achieve atonement, Schweitzer personally reached his goal. However, a lack of support for sustainability is significant.

Schweitzer was well aware of, albeit ambivalent to, colonial political problems and the effects of colonialism on economic systems. He was influenced by Orientalism and had inherited the attitude of a “colonial master.” He wrote, “Our only possible course is to exercise for the benefit of the natives the power we actually possess, and thus provide a moral justification for it. Even the hitherto prevailing ‘imperialism’ can plead that it has some qualities of ethical value.” Justified under the colonial system, Schweitzer lacked trust in indigenous African independence and self-government.

Moreover, Schweitzer was unwilling to promote higher education in colonial Africa. He stated that, “For their civilization it is more important that the natives should learn to burn bricks, to build, to saw logs into planks, to be ready with hammer, plane, and chisel, than they should be brilliant at reading and writing, and even be able to calculate with a+b, and x+y.” In his opinion, a basic education would be enough for people of color. The following quotation reveals this:

“Agriculture and handicraft are the foundations of civiliza-

tion. But with the natives in the colonies—and they themselves demand it—we proceed as if not agriculture and handicraft, but reading and writing were the beginnings of civilization... Proper colonization means educating the natives in such a way that they are not alienated from agriculture and handicraft but attracted to them. Intellectual learning should in every colonial school be accompanied by the acquisition of every kind of manual skill.”

Meanwhile, in Korea, under Japanese colonial rule, interference in Korean colonial politics by foreign missionaries was not allowed. Japanese colonial politicians knew that Christian mission schools offered a qualitative education that promoted self-reliance and a Korean national spirit. Masatake Terauchi (1852–1919), Korean Resident General and later Governor General, proclaimed, “The Revised Private School Rules-The College Decree” on March 24, 1915 to domesticate Koreans according to the Japanese Tenno system. The colonial government wanted neither to promote higher education nor to support a Christian spirit, which it saw would inspire national awareness, and thus, religious education was prohibited. However, Avison, Underwood, and others who contributed to the establishment of Chosen Christian College were convinced they could develop future generations of Christians by offering qualitative education and by demonstrating a Christian spirit, despite being unable to conduct regular courses on Christianity.

Oliver Avison officially stood against the discrimination of the Japanese toward Koreans who were not officially allowed to study medicine. Nevertheless, he sought to maintain a positive relationship with some Japanese high-ranking politicians, including Ito Hirobumi (1841–1909). Thus, it was possible to maintain the establishment of a medical college, as well as the Chosen Christian College, where the major modern sciences were taught by professors with Ph.D. degrees from American universities, including Yale, Boston, Michigan, and so on.

For Schweitzer, cheap labor was essential to keeping the colonial system intact. He wrote, “Colonization, however, demands that as much of the population as possible shall be made available in every possible way for utilizing to the utmost the natural wealth of the country.” To this end, medical facilities in the colony were necessary. He expressed, “The necessity for taking medical help to the natives in our colonies is frequently argued on the ground that it is worthwhile to preserve the human material without which the colonies would become valueless. But the matter is in reality something much more important than a question of economics.” He also states, “Then the present is living at the expense of the future... The maintenance of the native population must be the first object of any sound colonial policy.” Although his motivation for medical work was related to ethical thinking and humanism, for Schweitzer, medical aid was an instrument for maintaining the labor force.
ourselves alone the wealth of means for fighting sickness, pain, and death which science has given us. If there is any ethical thinking at all among us, how can we refuse to let these new discoveries benefit those who, in distant lands, are subject to even greater physical distress than we are?\textsuperscript{19}

Schweitzer knew that a lack of medical personnel in Africa was a problem and that neither the government nor private care would be able to provide medical coverage for Africans. Thus, he urged people outside of Africa to join to provide medical services. However, he never appeared to consider raising natives to the level of medical doctors. He indicates:

"Close on the problem of labour comes that of the educated native. Taken by itself, a thorough school education is, in my opinion, by no means necessary for these primitive peoples. The beginning of civilization with them is not knowledge, but industry and agriculture, through which alone can be secured the economic conditions of higher education."\textsuperscript{24}

Avison was different in this regard, describing his long-range plans as follows:

"In the meantime I had been thinking more deeply about the future of medical work in Korea. I had noted the prevalence of epidemics, the terrible death rate that was decimating the population and the unsanitary conditions prevailing in both city and country. I had also given consideration to the fewness of foreign doctors and the improbability of their number being ever increased to more than thirty or so in the whole country and the impossibility of that small number ever being able to do much toward improving conditions. Unless efforts were made to educate Korean young men as doctors in sufficient numbers to do what the small number of foreign physicians could not accomplish Korea must go on as it was doing - running down."\textsuperscript{26}

Avison systematically planned to promote the cultivation of generations of medical human resources:

"With that in view, I had carefully selected my hospital assistants with the idea of giving them a medical education and at the same time guiding them to a desire to spend their lives and energies in improving the health of their people by careful treatment of their sicknesses and by inculcating the hygienic principles that would lessen the incidence of disease. I had already begun the preparation of textbooks and from them had been teaching my helpers some of the amazing possibilities lying in present medical methods."\textsuperscript{26}

While Schweitzer opened his hospital in a remote area, Avison opened his first-class hospital in the capital of Korea. Schweitzer sought to establish a free treatment system at his hospital, where each patient paid according to what they could freely afford. Although this is based on charity and humanitarian aid, from a more current point of view, it caused patients to be dependent on the hospital’s finances. Moreover, endless donations from Europeans elicited "African fatigue" on one side and hindered systemic independency on the other. In terms of size, management structure, and financial resources, the hospital in Lambaréné remains as it was in Schweitzer’s time. It was never properly taken over by indigenous people and is, currently, faced with huge financial problems. Avison’s legacy is different. Chosen Christian College developed into Yonsei University, one of Korea’s most prestigious universities,\textsuperscript{27} and the hospital he helped grow, Severance Hospital, became independent a long time ago and has expanded into three different campuses.\textsuperscript{28}

Promoting equality

For Schweitzer, discrimination can be inferred from his use of terms, such as “lazy negroes” and their “casual work."\textsuperscript{29} He held somewhat racist views between whites and blacks and was not free of the prejudices in regards to inferiority and superiority. For Schweitzer, full equality between colonizer and colonized was not efficient,\textsuperscript{30} writing “The prevention of unsuitable freedom is, however, only the external and technical part, so to say, of the problem of authority. A white man can only have real authority if the native respects him."\textsuperscript{31}

For his time, Avison possessed great foresight. He was not a son of his time, while Schweitzer was, believing in white supremacy over people of color, which was widely accepted in the era of colonialism. Avison was more discerning and believed strongly in the equality of the human race before God.\textsuperscript{32} He promoted equality in general and social justice against classism. Avison contributed to the reduction of inequality in Korean society.

This is seen in the famous anecdote of Avison’s former student Suh-Yang Park.\textsuperscript{33} Suh-Yang Park was the son of a butcher. In the Joseon dynasty, which was dominated by Confucianism and classism, a butcher belonged to the lowest class. Thus, he would not have had much of an opportunity to overcome this obvious social barrier. His father Sung-Choon Park was healed during a house call to Avison, and how Avison treated patients equally, regardless of class, was impressive to the people, Sung-Choon Park in particular. Later, Sung-Choon Park asked Avison to accept his son for education, and Suh-Yang Park enrolled in the first Western medical school in Korea in 1900 where he studied basic sciences and medical sciences, including anatomy and physiology, internal medicine, and surgery. Suh-Yang Park graduated from this medical school in 1908 and became the country’s first medical doctor after he received a Government Certificate from the Home Office, which allowed him the right to practice medicine. After graduation he taught as a professor at this medical college, and later, he worked as an activist for the independence movement against the Japanese Colonial government. Avison broke the glass ceiling of the caste system. He showed that Christianity promotes equality of human beings before God to pursue justice for all. Avison was totally free of
racism as this quotation shows:

“Do we white people regard that possibility with complacency? Have the colored races really got as good brains as we have? Usually, when I ask my white friends these questions, they deny that the colored races are our equals in brain capacity, but my answer is that the average inherent brain power of all races is practically the same. The proof of it is to be seen by study of what men of different races, and women too, have accomplished where they have been given equal opportunities for study and practice over a sufficiently long period.”

Additionally, he put his energy into preparing a text for medicine in Korean for future generations, demonstrating how much respect he held for Koreans.

“I decided that this instruction in Western medicine should be given in the native tongue even though there was then no vocabulary of other medical or scientific terms. It was a clear start from the very beginning, but believing from some study of Korea’s past history that its people had fundamentally good brains, I felt confident that a medical terminology could be produced and that the greatest good would eventually result if while educating some Korean young men they and we working together, should coincidentally develop the necessary Korean vocabulary and translate medical books as a basis for future advances. As my object just now is to support my thesis of mental equality of all races...”

Reinforcing subjectivity
Between 1916 and 1934, Avison worked as principal for the college and educated many young Koreans. Avison considered it his medical mission to include medical training. When he left to go back to Canada, Avison did not offer his position to his son Douglas Bray Avison (1893-1951) who had been born in Pusan, Korea as the fourth son of Oliver Avison, who was educated at the University of Toronto as a medical doctor, and who hoped to be successor to his father’s position. Instead, Oliver’s former Korean student Keung-Seon Oh (1878–1963), who was one of the first graduates of Severance Union College and was trained further as a medical doctor at the School of Medicine at the University of Louisville in Kentucky, took over this position. Thus, it was evident that Avison did not favor bloodlines, but promoted indigenous leadership and governance. Douglas Avison continued to teach medicine at Severance Medical College and later returned to Canada as missionaries were withdrawn with the growing threat of the Second World War.

All of the individuals who were educated thanks to Avison became pillars for the development of Korea’s modern society. Avison was a person with strong Christian conviction and acted boldly with hope for the future.

“...when the worst elements of Japanese politicians and militarists have brought their country into contempt, the world should be reminded that just now Japan is being misrepresented by those in authority. While she will have to suffer both the contempt of the other nations and the national punishment that those in control are earning for themselves and which all good will have to endure, we must stand ready to lend a helping hand when the time comes for correcting the political and economic abuses which we have all helped to build into the world structure.”

Avison treated Koreans as individuals in the same regard as himself, while Schweitzer looked down on Africans as objects for atonement.

CLOSING REMARKS
Avison deserves more international recognition over Schweitzer in terms of his contributions to educating the people he set out to serve and to establishing a strong medical system in Korea. This study demonstrates that Avison had much more foresight than Schweitzer and was not affected by Orientalism. More than mere charitable work, Avison sought to cultivate sustainable structures through which to provide medicine and education. The differences in the current states of the Albert Schweitzer Hospital in Lambaréné and Severance Hospital and Yonsei University in Korea are clear evidence of this. Whereas Avison’s extraordinary missionary work was disconnected from the more abhorrent aspects of Western colonial heritage, which was strongly intertwined with mission work at the time, Schweitzer’s work reflected paternalistic attitudes, charity merely for the sake of atonement, and in the long term, a lack of sustainability, which has had ongoing consequences.

The methodology of Avison in medical missions should be better recognized by worldwide communities as a model of ecumenical work for sustainable development. Avison’s work and attempts could be analyzed from the perspective of UN Sustainable Development Goals 17, providing a subject of further discussion and research. His reports to the board of the North Presbyterian Church of USA and letters could be included as materials for this expanded study.

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ORCID iD
Meehyun Chung https://orcid.org/0000-0001-8870-5520
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