

Handbook on cultural, spiritual and religious beliefs

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Section One

General Considerations

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Introduction

The Need for Cultural and Spiritual Awareness

Britain is a multi-cultural and multi-faith society. To enable the NHS to continue to provide the highest standards of patient care within a diverse society, and for patients to receive care which is appropriate, it is important that the providers of care take into account cultural/spiritual needs.

Most people become stressed and anxious when they are in need of health care, but for those who are not familiar with the way things happen in hospitals, or do not speak the same language as those trying to care for them, it can be a bewildering and frightening time. The person may feel very isolated and misunderstood. If you were ill and had to be admitted to hospital in another country, what would you most like the staff who are caring for you to know about you? What would you most like them to understand?

This resource pack attempts to address some of the main areas that **all** patients may be concerned about:

Diet

Hygiene

Modesty

Family Planning

Childbirth

Blood Transfusions

Dress/Jewellery

Names

Special Considerations

Organ Transplantations

Care of the Dying/Death

Post Mortems

It would be impossible in an information pack of this nature to go through all the possible permutations and combinations of each ethnic group/religion and so, for brevity, this pack gives a broad outline of cultural groupings in [Section Two](#) and a brief synopsis of the various world religions in [Section Three](#).

It is important for the 'user' of this information pack to use this information as a guide and to always consult the patient about their individual needs.

Please Note:

This pack is intended to raise staff awareness of the varying needs of all patients.? While we realise that some users of the pack may feel that certain sections form part of normal nursing care and practice, it has to be remembered that the pack is for general use and the information given is basic.

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The Individual

This information is intended as a guideline and the most important thing is to ask the individual (and/or the family) what is needed and what staff should be aware of.? Whatever cultural or religious beliefs a patient has, she/he will have preferences and needs which are individual and personal to them alone.? The individual has a right to have these wishes respected, as long as this is possible and does not impose excessively on the rights of others.

Some people have religious needs.? Everyone has spiritual needs and these may basically be expressed as:

- 1.????????? The right to love and be loved
- 2.????????? The need for meaning and purpose in my life
- 3.????????? The need to feel worthwhile

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General Considerations - All Patients

All patients should be treated equally, regardless of gender, race or creed.? They should have free access to religious support with the opportunity to practise their chosen religion whilst in hospital. To help staff meet these requirements, the following guidelines are recommended:

1. **Admissions Documentation?** - should be completed accurately and in full, including the patient's religious beliefs. Consult the individual and/or their family about their needs.? Offer contact with the Chaplain's department or appropriate religious group.
2. **Patient Transfer?**- if a patient moves to another ward, theatre or hospital within the Trust, ensure that all relevant information and requests are communicated to the appropriate staff.
3. **Dietary Requirements?** - to ensure appropriate dietary requirements, it is important to contact the Hotel Services Department upon admission to make necessary arrangements.? (This may be arranged beforehand for planned admissions.)? Hotel Services are willing to visit any patient in order to discuss their particular dietary needs.
4. **Fasting** - some patients will want to fast i.e. abstain from food for religious reasons at certain times.? Necessary arrangements for food should be made outside the fasting period.
5. **Dress/Jewellery** - respect the patient's dress requirements as determined by their faith.? This may also include the wearing of religious jewellery.
6. **Modesty** - any requests to be treated solely by male or female staff should be respected where possible and appropriate.
7. **Privacy** - during admission procedures, medical examination, treatment and ward rounds, the patient's privacy must be respected at all times.? On occasions it may be necessary to provide a place that is more private, where conversations cannot? be overheard by others.? This will enable the patient to feel more comfortable when speaking confidentially with health care staff, their relatives or friends or when praying.
8. **Care of the dying?**- respect the personal wishes of a patient who may be dying and consult relatives/ friends about their wishes.

Issues around death and dying in certain cultures are often surrounded by mystery and confusion.? It is difficult to ask patients and carers questions about these sensitive issues when the patient is very ill or in the case of sudden death.? It is critical, however, that these issues are not ignored and help should be sought from more experienced staff. The effects of inappropriate intervention can result in long term distress for the family in their bereavement.

9. **Bereavement?**- offer the services of a chaplain or other religious leader to bereaved relatives and friends.

As a sign of respect and sensitivity to all religions, Mortuary chapels hold some symbols of the major religions which can be displayed or removed as relatives and friends wish.

There is a Chapel at Torbay Hospital situated near Radiology West ('old X-ray').? The Chapel is available to **all** patients/relatives/friends.

Further resource material is also available from the Hospital Chaplain who can be contacted on Bleep 230 or ext. 4186 or via Switchboard.? The Chaplain also keeps some of the sacred writings.

10. Nursing Implications

Communication - appropriate information and interpretation is essential to the concept of informed consent.? The use of family members may not always be ideal as they may be unfamiliar with the medical terminology and reticent about discussing sensitive information with older or younger relatives.

Spirituality - this can often be a misunderstood concept.? NHS staff should be sensitive to the fact that 'spiritual' needs may be experienced by anyone, not simply those with religious beliefs.? Indeed, the acknowledgement of a person's language, culture, dietary needs, customs, anxiety and fear; or even their sense of isolation in unfamiliar surroundings, is an important component of spiritual care.? Those who provide the care should not, therefore, assume that it is only patients who have explicitly stated their religion who are likely to need spiritual support and comfort during illness.? Times of crisis can lead the most unlikely people to consciously or unconsciously experience a spiritual need.

The way spirituality is presented by a patient may vary.? It could mean their need for a quiet period or room for meditation.? In some religions, prayer times may be set and the nursing staff may have to negotiate with patients around these times.

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Section Two

Culture

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African/Caribbean

We recognise that grouping African and Caribbean people together is much too simplistic, as it does very little to inform staff in healthcare settings about cultural/religious/dietary differences.? We use the term African/Caribbean here to include people of African and Caribbean origin.

As a result of this broad generalisation it is important that patients are consulted individually about their needs.

Religion – Religion plays an important part in the lives of most African/Caribbeans.? A large proportion are mainstream Christians of whom most are Protestants.? Some are Catholics and there are a growing number of Muslims.

Diet – There are no specific dietary regulations.? As diet may vary depending on the patient’s religion it is advisable to ask the individual.? One of the common foods is rice and peas.? Fish, okra (“ladies fingers”), sweet potatoes and yam are also popular.

Modesty – Patients are likely to have a strong preference for a doctor/nurse of the same sex when being examined or treated, where possible.? Sensitivity and care should be taken in situations which may cause embarrassment.

Family Planning – This will vary depending on the patient’s religion and so the individual should always be consulted.

Death – Burial is preferred.? Funeral and mourning customs vary depending on culture/religious belief.

It is customary amongst some African/Caribbean cultures to express their emotions freely when a relative dies.? Privacy to do so should be given whenever possible.

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Asian

It is important to realise that it is difficult to make broad generalisations about Asian patients.? We use the term here to include people from Bangladesh, India and Pakistan.

Religion -

Bangladeshis - majority Islam, some Hindus.

Indians - majority Hindus, some Muslims, Sikhs and also Christian.

Pakistanis - majority Islam.

(please refer to Section Three)

Diet - The diet varies considerably depending upon the person’s religion.? Neither Hindus nor Muslims will eat food which has come into contact with prohibited food/utensils,(please refer to specific religion).

Hygiene/Cleanliness - Handwashing is considered essential before and after eating.? Water or washing is

needed in the same room as the WC itself, i.e. patients should be provided with bowls/jugs of water/bidet etc.? If a bedpan has to be used, bowls/jugs of water should also be provided.? Asian patients prefer to wash in free flowing water e.g. a shower, as baths are considered unhygienic.? If a shower is not available ask the patient if they would like a jug to use in the bath.

Modesty – Asian patients, particularly women, are likely to have a strong preference for a doctor of the same sex when being examined or treated.? Sensitivity and care should be taken in situations which may cause the patient embarrassment, e.g. wearing a gown which the patient may consider too short.

In some Asian cultures direct eye contact is avoided during a conversation particularly if the other person is of the opposite sex; this behaviour should not be seen as rude and does not imply disinterest.

Family Planning – There is no objection to family planning from a religious point of view.? Due to strong social pressures, however, it is advisable to ask the patient whether she wishes to involve her husband or any other family member in the discussion? Orthodox Muslims may refuse family planning.

Naming – Please see next page.

Death – It is customary amongst some Asian cultures to express their emotions freely when a relative dies.? Wherever possible they should be given privacy to do so without unsettling other patients.

Naming – Ask the patient for his or her **family** name and their most used **personal** name.? Use the family name as a ‘**surname**’ for recording purposes.

All Asian naming systems have a religious significance.? In practice they can vary a great deal.

Recording unfamiliar names can be difficult and may lead to serious errors.? It is important that staff are aware of the different systems so that patients are accurately identified.

As the majority of Asians are not ‘Christians’ the? ‘Christian name’ has no significance in most cases.? Names are given as follows:

Personal Name/ Religious or Titular Name/Family Name

e.g. Vijay/Lal/Patel



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Chinese/Vietnamese

As half of the population of Vietnam is of Chinese origin, we have broadly categorised the two cultures together as some of their customs and beliefs are very similar.

Religion - Taoism, Buddhism and Confucianism are the main religions although some Chinese are Christians.

Diet - The Chinese believe that in order to be healthy, an equilibrium between 'hot' and 'cold' needs to be maintained, whether this relates to food, herbs or medicines.? Foods are classified as hot or cold (this does not refer to temperature), therefore in order to restore balance the Chinese / Vietnamese may adhere to a special diet. For example:

Hot

Most pulses, garlic, ginger, eggs, nuts, lamb, honey, chilli, onions, dates, tea and coffee.

Cold

Cereals, rice, wheat, fruit, potatoes, White sugar, chick peas, milk, Green leaf vegetables.

Rice is the staple food which is eaten with a variety of meat, fish and vegetable dishes.

Hygiene/ Cleanliness - A soak in the bath is believed to be bad for the body in later life and therefore showers are preferred.

Modesty - In general women prefer to be examined by a female doctor, although medical care takes priority.? Some women may find wearing short, open backed gowns unacceptable.

Naming -The family name tends to come first e.g. Cheung, followed by a one or two part personal name e.g. Hung Yim, resulting in a Cheung Hung Yim.? A person's family of origin is of great importance; hence women tend to keep their maiden names.? Many Chinese / Vietnamese have reversed the order so that it corresponds to the British naming pattern.

Family Planning - Generally no objections to contraception.? Family planning matters should not be mentioned in front of other Chinese family members or friends.

Childbirth - Some women avoid cold drinks and do not wash their hair for several days after childbirth.

Blood Transfusions - Generally no objections.

Organ Transplantation - Generally no objections.

Death – Funeral and mourning customs vary widely depending upon culture/religious belief.? Some are buried, whilst others are cremated.

Special Considerations –

Traditional Chinese Medicines – Traditional remedies are sometimes used for certain diseases and it is important to consult the individual.

The most important festivals are the New Year or Spring Festival celebrated in February.? Dates vary as they are based on the lunar calendar.

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Section Three

Religions of the World

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Baha'i

Although the Baha'i faith has its roots in Babism, a Muslim denomination, it is a separate religion.? It's teachings centre on the unity of mankind, the harmony of religion and science, equality of men and women and universal peace.

It has no set doctrines, no priesthood, no formal public ritual and no authoritative scriptures.? However a patient may wish to have a visitor from the Spiritual Assembly of Baha'i.

There are no unusual requirements for a Baha'i patient in hospital.? S/he will accept usual routines and treatment.

Diet – Alcohol is not permitted – including alcohol in cooking.

Fasting – Members of the Baha'i faith fast for a period from 2nd March – 21st March.? The fast is from sunrise to sunset.

Children, expectant mothers and nursing mothers, the elderly and the sick are exempt from fasting.

If a patient is fasting, arrangements need to be made to make food available before dawn and after dusk.

Blood Transfusions – There is unlikely to be any objection.

Organ Transplantation – No objections to organ transplants.

Death – Baha'is believe in Afterlife and therefore they treat the body with great respect after death.? Routine

Last Rites are appropriate.? Cremation is not permitted.

Burial should take place within an hour's journey from the place of death.

Post Mortem – No objections to post mortem.

Special Considerations – NAWRUZ – New Year, celebrated on 21st March each year.

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Buddhism

Buddhist faith centres on the Buddha, who is revered, not as a god, but as an example of a way of life.? Buddhists believe in reincarnation and so accept responsibility for their actions.? The chief doctrine is that of? 'Karma', good or evil deeds resulting in an appropriate reward or punishment either in this life, or through reincarnation along a succession of lives.

From its very beginning, Buddhism has always been culturally adaptable, and as a result a variety of forms and movements have developed within the religion, each with different traditions.? Ask the individual and/or family/friends what is required.

Diet – As Buddhism encourages its followers to practice non-violence, Buddhists will mostly be vegetarian.? Meals will vary considerably depending upon their country of origin.

Family Planning – Buddhists believe that life begins at conception and so do not condemn contraception.? However as abortion and active euthanasia are seen as taking life they are condemned.

Blood Transfusion – There is unlikely to be any objection.

Organ Transplantation – There is unlikely to be any objection.

Care of the Dying – Buddhists believe in rebirth after death.? The state of mind of a person at the moment of death is important in determining the state of rebirth.? They like to have full information about their imminent death to enable them to make preparation.? Some Buddhists may not wish to have sedatives or pain killing drugs administered at this time.

Peace and quiet for meditation and visits from other Buddhists will be appreciated.? Some form of chanting may be used to influence the state of mind at death so that it may be peaceful.

Death – If other Buddhists are not in attendance, then a Buddhist minister should be informed of the death as

soon as possible.? Routine Last Rites are appropriate.? Cremation is preferred.

Post Mortem – There is unlikely to be any objection.

Special Considerations – WESAK – a celebration of enlightenment of Buddha – held on full moon in May.

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Christian Science

Established in the United States of America in 1879.

Christian Science teaches a reliance on God for healing, rather than on medicine or surgery.? It will be unusual, therefore, for Christian Scientists to be patients in ordinary hospitals.? They will usually seek nursing care at home or in a Christian Science Nursing home.? They may, however, be admitted to hospital following accidents, or during pregnancy and childbirth, and because of family or legal pressures.? They will accept medical care for their children where the law requires them to do so.? The Church does not attempt to control the actions of its members and the decision about whether to accept medical intervention lies with the individual.

A Christian Scientist will appreciate the normal care of the hospital if it is necessary for him/her to be admitted, but will normally wish to be totally free of drug treatment.? S/he will probably wish to contact a Christian Science practitioner for treatment through prayer.? The patient will appreciate privacy for prayer and access the “holy” books of the Christian Science faith.

Diet – Alcohol and tobacco are not allowed.? Strict Christian Scientists may not drink tea or coffee.

Blood Transfusion – It is not normally acceptable for adults, but parents usually consent to transfusion for their child if doctors consider it essential.

Organ Transplantation – It is not normally acceptable for adults to donate or receive organs.

Care of the Dying – There are no rituals to be performed.

Death – Routine Last Rites are appropriate.? A female body should be handled by female staff.? Cremation is usually preferred.

Post Mortem – Christian Scientists object to post mortems, unless required by law.

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Christianity

Anglicans?? -?? Roman Catholics?? -?? Free Churches

Although the doctrines of Christian churches vary greatly both within and between countries, there are four features of Christianity that are nearly universal: initiation (baptism), worship, ministry and 'good works'.? The sacred writings of Christian religion are in the Bible.? A Christian's individual faith and religious practice will be influenced by the tradition of the church to which they belong as well as their own personal relationship with God.? Please record the individual's specific denomination in their notes.

Diet – There are no general dietary requirements.? Some Christians observe Friday as a day when they do not eat meat.? Some Christians may wish to abstain from food (fast) before receiving Holy Communion.? Some abstain from alcohol.

Family Planning – Varies from Religion to Religion.? Please refer to individual patient.

Blood Transfusion – No religious objections.

Organ Transplantation – No religious objections.

Death – Routine Last Rites are appropriate for all Christians.

Special Considerations:

Baptism/Christening – There is no age limit for baptism.? When babies or children are very ill, baptism should be offered.

Roman Catholics – Baptism – A lay person may perform this ceremony if death is imminent.

In the absence of a Minister of Religion, **anyone** may perform a baptism.? This is done by making the sign of the cross on a person's forehead.? A little water is poured on the forehead (or another accessible part of the body), with the words, "...(Name)...", I baptise you in the name of the Father, and of the Son, and of the Holy Spirit.? Amen".

The chaplain should be informed as soon as possible.

If a child dies unbaptised the Chaplain will offer a Blessing and Naming service and a certificate to commemorate this will be given to the parents.? This is particularly appropriate following a miscarriage or stillbirth.

Patients may wish to see a Chaplain, Priest or a Minister from the local church, especially before an operation or when there is something which is of concern to them.? They may wish to receive Holy Communion and be prayed with.? They may request a Bible or wish to attend services in the hospital chapel.

Christmas and Easter are the most important festivals/celebrations.? Christians will usually wish to receive Holy Communion at these times.

Post Mortem – No religious objection.

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Christianity

Church of England? (Anglican)

Always ask the individual and/or family/friends if they would like to see a Chaplain or their local minister.

Prayers may be said at the bedside of a dying patient.? Sometimes the family or the patient will ask to receive the “Sacrament of the Sick”.? This involves anointing with holy oil.

After death some families may like to offer prayers of thanksgiving for the person’s life.

Roman Catholic

The patient will probably wish to be visited by a Catholic Priest and to receive Holy Communion and the “Sacrament of the Sick”.? This is not only for the dying, but also for the sick, especially before an operation.

The Sacraments are very important.? The? Catholic Priest must be called to the dying patient and if the death is sudden, immediately afterwards.

Free Churches

Baptist

Independent churches and missions

Methodist

Moravian Brethren

Pentecostal

Plymouth Brethren
Presbyterian
Salvation Army
The Religious Society of Friends (Quakers)
United Reformed Church

Free Church patients may like to receive a visit from a Minister, a member of their own church or the Free Church Chaplain.? Ceremony/sacraments, may not be observed as strictly as the Anglican and Catholic religions; however, they may welcome prayers being said with them.

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Hinduism

Central to Hinduism is reincarnation.? Hindu religious practices vary a great deal, depending on areas of origin.? Hinduism is a social system as well as a religion, therefore customs and practices are closely interwoven.? Please refer to the individual and/or family/friends about particular requirements.

Diet – Most Hindus **do not** eat beef.? Some will not eat eggs/chicken.? Dairy produce is acceptable, so long as it is free of animal fat.? However, it is best to ask each individual.? **Some Hindus are very strict vegetarians they will not eat food which has come into contact with prohibited food/utensils.**

“Hot and Cold Foods” – This relates to perceived medicinal properties of food and has nothing to do with either temperature or spicy qualities.

Tobacco and alcohol are not generally accepted.

Fasting – This means eating only “pure” foods such as fruit or yoghurt rather than complete abstinence.? However, very few would insist on fasting when in hospital.

Hygiene/Cleanliness – Handwashing is considered essential before and after eating.

Water for washing is needed in the same room as the WC itself, i.e. patients should be provided with bowls/jugs of water/bidet etc.? If a bedpan has to be used, bowls/jugs of water should also be provided.? Hindu patients prefer to wash in free flowing water e.g. a shower, as baths are considered unhygienic.? If a shower is not available ask the patient if they would like a jug to use in the bath.

Modesty – Women prefer to be treated by female medical staff where appropriate.

Dress/Jewellery – Jewellery usually has a religious or cultural significance e.g. a woman’s bangles are only removed on her husband’s death.? Some Hindu boys wear a “Sacred Thread”^{*} over the right shoulder and

around the body.? None of these items should be removed or cut without the permission of the patient or next of kin.? If the Thread has to be cut or removed it should be retained and given to the patient later.

Family Planning – No Hindu objection to contraception.? It is advisable to ask the woman whether she would like her husband/family member/friend to be present during any discussion.

Care of the Dying – Hindu patients very much want to die at home.? This has religious significance and death in hospital can cause great distress.

The patient’s family may wish to call in a Hindu priest to read from the Hindu holy books and to perform holy rites.? These may include tying a thread around the wrist or neck, sprinkling the person with water from the Ganges, or placing a sacred tulsi leaf in his or her mouth.

Their belief in cremation and the body being returned to nature may involve a dying person asking to be placed on the floor during the final few breaths.

Blood Transfusions – Generally acceptable.

Organ Transplantation – No objections to organ transplantation.

Death – Distress may be caused if the body is touched by non-Hindus.?? The family will usually want to wash the body at home.? If no family are available, the following? procedure should be followed:

- Wearing disposable gloves, close the eyes and straighten the limbs.
- Jewellery, sacred threads and other religious objects should not be removed.
- Wrap the body in a plain sheet.
- In most cases the body should not be washed as this is part of the funeral rites and will usually be carried out by relatives later.
- If there is a delay, e.g. because the death has to be reported to the Coroner, this must be carefully explained to the family because it is their practice for the funeral to take place as soon as possible.
- ? If a body is to be left in a room overnight a light or candle should be left burning throughout the night.
- If the family wish to view the body, staff should ask the mortician to ensure that the room is free of any other religious “symbols”.

All adult Hindus are cremated.

Post Mortems – Generally disliked.

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Sacred Thread (Upanayana) – This thread is a symbol of his second birth when he starts to learn from his guru. The three strands symbolises his duties to God, his parents/teacher and to the world.

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Islam

The followers of the Islamic religion are called Muslims. The Holy Book for Muslims is the Holy Qur'an. There are two main denominations. Sunni and Shi'ite.

The religious duties are summed up in 'five pillars':

- 1. Creed – God is one and only one supreme creator and Mohammed is the Prophet of God.**
- 2. Prayer – Five times a day facing Mecca (South-east) with ritual washing beforehand.**
- 3. Alms giving**
- 4. Fasting**
- 5. A pilgrimage to Mecca once in life.**

Diet – Muslims are forbidden to eat any product from pigs. Other meat can be eaten but it has to be HALAL meat, i.e. killed in a special manner stated in Islamic law. Fish and eggs are allowed but not if they are cooked near pork or non-halal food. Nurses should discuss dietary requirements with the patient. Alcohol is prohibited.

Fasting – During the month of Ramadan a Muslim fasts between sunrise and sunset. Those who are sick are not expected to fast. If, however, a patient wishes to do so, food should be made available **before** sunrise and **after** sunset. Essential drugs and medicines can be administered during Ramadan.

Hygiene/Cleanliness – Hands, feet and mouth are always washed before prayer.

Handwashing is considered essential before eating.

Water for washing is needed in the **same room** as the WC itself, i.e. patients should be provided with bowls/ jugs of water/bidet etc. If a bedpan has to be used, bowls/jugs of water should also be provided. Patients prefer to wash in free flowing water, e.g. a shower, as baths are considered unhygienic. If a shower is unavailable, ask the patient if they would like to use a jug in the bath.

Modesty – Women prefer to be treated by female staff where appropriate.

Dress/Jewellery – A locket containing religious writing is sometimes worn around the neck in a small leather bag. These are kept for protection and strength and therefore should never be removed.

Family Planning – Strictly speaking orthodox Muslims do not approve of contraception, in practice, individuals vary widely in their approach.

Abortion is frowned upon, but is often tolerated if it is for medical reasons.

Childbirth – Some women may refuse to be examined internally before giving birth. When a Muslim child is born it is required that as soon as possible a member of the family recites in the baby's ear a short prayer.

Blood Transfusion – No religious objection.

Organ Transplantation – No specific rulings prohibiting transplantation. However, strict Muslims will not agree to organ transplants.

Care of the Dying – The dying Muslim may wish to sit or lie with his/her face towards Mecca. Moving the bed to make this possible will be appreciated. The family may recite prayers around the bed. If no family are available, any practising Muslim can help.

The patient may wish the IMAM (religious leader) to visit.

Death – After death the body **should not be touched** by non-Muslims. Health workers who need to touch the body should wear disposable gloves.

The body should be prepared according to the wishes of the family. If family are not available, the following procedure should be followed:

- Turn the head towards the right shoulder before rigor mortis begins. This is so that the body can be buried with the face towards Mecca.
- Do not wash the body, nor cut hair or nails.
- Wrap the body in a plain white sheet.

Muslims believe in the resurrection of the body after death, therefore Muslims are always buried, never cremated. The body will be ritually washed by the family and Muslim undertakers before burial. Muslim funerals take place as soon as practicable, as delay can cause distress. If a delay is unavoidable explain the reasons carefully to the relatives.

If the death has to be reported to the Coroner, s/he should be informed that the patient was a Muslim and be

asked if the procedures can take place as soon as possible.

If the family wish to view the body, staff should ask the mortician to ensure that the room is free of any religious “symbols”.

Post Mortem – Post mortems are **forbidden** unless ordered by the Coroner, in which case the reasons for it must be clearly explained to the family.? The family may request that organs removed should be returned to the body after examination.

Special Considerations – There are many Muslim festivals, all calculated by the lunar calendar.? Ask the patient or family if any important occasions for their faith occur during their stay in hospital.? The most important is the month of Ramadan during which Muslims practice self-discipline in order to achieve tolerance, love, sacrifice and equality.

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Jehovah's Witnesses

Jehovah's Witnesses try to live their lives according to the commands of God as written in the Old and New Testaments.? They regard Jesus Christ as the Son of God, but not in the sense of being equal with God or one with God.

Diet – Food containing blood or blood products is not acceptable.

Jehovah's Witnesses do not smoke.

Blood Transfusions – Jehovah's Witnesses have religious views that taking blood into one's body is morally wrong and is therefore prohibited.? This includes whole blood or its components, such as packed red cells, plasma, white cells and platelets.? Jehovah's Witnesses can choose whether to accept products such as albumin, immunoglobins or clotting factors.

Blood samples may be taken for pathological testing providing any unused blood is disposed of.

Dialysis will usually be accepted.

Jehovah's Witnesses will accept medical treatment in all other respects apart from those involving the use of blood or blood components.

Organ Transplantation – Generally not permitted.? Components where blood is not involved, e.g. corneas, are more likely to be acceptable.? Jehovah's Witnesses are not likely to be willing either to donate or receive an organ through which blood flows.? They will want reassurance that blood will not be used against their

wishes.

Care of the Dying – There are no special rituals for the dying but they will usually appreciate a visit from one of the Elders of their Faith.? (There are no separate clergy).

Death – Routine Last Rites are **NOT** appropriate.

Post Mortem – This is a matter of individual choice for the family.

Special Considerations – Jehovah's Witnesses do not usually celebrate birthdays or Christmas.? The only festival is the annual memorial of the death of Christ.

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Judaism

In Judaism, religion and culture are entwined.? It is based on the worship of one God; carrying out the ten commandments; and the practice of charity and tolerance towards one's fellow human beings.? There are different groups within Judaism:-

Orthodox Jews – Are usually more traditional and observant of the religious/dietary laws.

Non-Orthodox Jews (included Conservative/Liberal/Reform) – Make their religious observance fit into modern society.

Diet – Many Jews will ask for **Kosher** food, i.e. meat that has been prepared in a special way according to Jewish Law.

Shellfish, pork, rabbit and derivatives are strictly prohibited (treifu).? Milk and meat products are not eaten in the same meal.? This means that they do not have milk in their drinks or cream with their desserts after their meat meal and do not use butter on meat sandwiches.

The patient should be consulted over his/her level of dietary observance and the necessary arrangements made.

Orthodox Jews may not be happy to take non-Kosher medication.

Fasting – See special occasions below.? If fasting would be a danger, even Orthodox patients will accept medical advice.

Modesty – Orthodox Jewish women would prefer to have their bodies and limbs covered.? They may also prefer to keep their hair covered with a head scarf.? Orthodox men keep their head covered with a hat or skull cap (Kappel).

Family Planning – Some Orthodox Jews forbid contraception or family planning unless the woman’s health is at risk.

Birth – Nearly all Jewish boys are circumcised, usually eight days after birth.? This is performed by a trained and medically certificated religious functionary called a “Mohel”.? If there is any doubt about the child’s health the circumcision is delayed.

Organ Transplantation – Organ transplants are usually forbidden by Orthodox Jews.? However opinions vary and decisions may rest with the rabbinic authority.

Care of the Dying – The patient may wish to recite or hear special psalms or prayers, especially Psalm 23 (The Lord is My Shepherd), and may appreciate being able to hold the page on which it is written.

Prayers may be said by the relatives and they may wish a Rabbi to be called to help the dying person with their formal confession and to bring comfort.

Death – In some cases the son or nearest relative, if present, may wish to close the eyes and mouth.

The body should be handled as little as possible by non-Jews.

Depending on the sex of the patients a fellow male or female washes and prepares the body for burial.? Usually three members of the community are present.? Traditional Jews will arrange for this to be done by the Jewish Burial Society.

If, however, members of the family are not present, most non Orthodox Jews would accept the usual washing and last rites performed by hospital staff.

The body should be covered with a clean white sheet.

The family may wish for the body to be placed with the feet pointing towards the doorway and to light a candle.

Some Orthodox Jewish groups may wish to appoint someone to stay with the body from the time of death to the burial, which **usually takes place within 24 hours**.? This person is called a “watcher” and he or she may need to stay with the body throughout the night.

In the above instance or if the family wish to view the body, staff should ask the Mortician to ensure that the room is free of any religious “symbols”.

If the death has to be reported to the Coroner, s/he should be informed that the patient was Jewish and be asked if the procedures can take place as soon as possible.

Orthodox Jews are always buried but non Orthodox Jews allow cremation.? The funeral has to take place as soon as possible.

Post Mortem – Post mortems are not permitted unless legally? required.

Special Considerations – The Sabbath (Shabbat) begins at sunset on Friday and lasts until sunset on Saturday.? On the Sabbath ‘work’ is prohibited and this includes things such as writing, travelling and switching on lights or electrical appliances.

Passover (in March or April) is when special foods may be required by some Jewish patients.

Day of Atonement or Yom Kippur (in September or October).? This is a special day of fasting.? A Jewish patient will normally wish to keep that day to pray and be quiet.? It is the holiest day of the Jewish Calendar and is considered to set the path for the year to follow.? Orthodox patients must be offered alternatives to oral medication, such as injections or suppositories.

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Mormans

The Mormon Church is also known as the Church of Jesus of Latter-Day Saints.? It began in America in 1830.

Mormons follow a very strict health code, known as the Word of Wisdom which advises against the use of tea, coffee, alcohol, tobacco etc.? and advocates healthy living.

Family unity has great importance for Mormons.

Diet – Mormons eat sparingly and avoid products which contain a lot of blood.

Tea and coffee are avoided and some Mormons will avoid all hot drinks.? Milk, water and fruit juice are acceptable.

Blood Transfusions – Generally no objections.

Organ Transplantation – There is no objection to organ transplants.

Care of the Dying – There are no rituals for the dying, but spiritual contact is important.? The church has “home teachers” who offer support and care by visiting church members in hospital.

Death – Routine Last Rites are appropriate.

The sacred garment, if worn, (see Special Considerations), must be replaced on the body following the last rites.

Church burial is preferred, although cremation is not forbidden.

Post Mortem – There are no religious objections.? It is a decision for the individual family.

Special Considerations – Some Mormons who have been through a special temple ceremony wear a sacred undergarment.? It is an **intensely private** item and is worn at all times.? It is only removed for hygiene purposes.? It may be removed for surgical operations but it must at all times be considered private and be treated with respect.

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Rastafarianism

Rastafarians are followers of a movement which began in the 1930s in the West Indies, among the descendants of slave families who had come from Africa.

The Old and New Testaments are still regarded as scriptures, but Rastafarians do not consider themselves to be Christian.

Rastafarianism is a personal religion.? It places emphasis on personal dignity and a deep love of God.? There are no churches, services or official clergy.

For some, legal marriage is unnecessary and thus extended families may be complex.

Diet – All forms of pork and shellfish are forbidden.? Some Rastafarians are completely vegetarian.? Some do not drink milk or coffee.

Modesty – Rastafarian women dress modestly.? There is a taboo on wearing second hand clothing, and therefore the patient may be unwilling to wear hospital garments which have been worn by others.? A disposable theatre gown may be preferred.

Family Planning – The majority of Rastafarians do not believe in contraception.

Blood Transfusion – There will probably be anxieties about this because of concerns about contamination of the body.? Assurance will need to be given.

Organ Transplantation – This is not generally acceptable.

Care of the Dying – Amongst Rastafarians, visiting the sick is important.? Visits are often made in groups.? Family members may wish to pray at the bedside.? Apart from this there are no rites or rituals, before or after death.

Death – Routine Last Rites are appropriate.? Burial is preferred.

Post Mortem – A post mortem will only be agreed to if ordered by the Coroner.

Special Considerations – Rastafarians will be unwilling to receive any treatment that will contaminate the body.? They will prefer alternative therapies such as herbalism or acupuncture.? However, those who seek the advice of doctors are likely to accept some conventional treatment.

The distinctive hairstyles (dreadlocks or locks), are a symbol of the Rastafarian faith.? Orthodox members may not permit their hair to be cut.

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Sikhism

Sikhs, as an act of faith, wear the 5 signs of Sikhism, known as the 5 K's.

Kesh – uncut hair, kept under a turban

Kangha – small comb worn in the hair

Kara – steel wrist band or bangle (or ring)

Kirpan – sword/dagger

Kaccha – white shorts worn as an under garment.

These symbols should not be? disturbed unless it is absolutely necessary, in which case the necessity should be explained to the patient and/or his/her family.

Diet – Many Sikhs are vegetarian.? Some may not eat eggs or fish.? A few Sikhs who eat meat will not eat beef.? It is helpful to explain to patients the ingredients of dishes with unfamiliar names, e.g. “Hot Pot”.

Sikhs do not smoke and alcohol is forbidden.

Names – Most Sikhs have three names: a first name, a religious middle name and a family name.? The religious middle name is always SINGH for men, and KAUR for women.? Some Sikhs just use this religious title, e.g. Mr Singh.? The wife of “Mr Singh” is never “Mrs Singh” but “Mrs Kaur” and vice versa.

Family Planning – Contraception can be used but is not openly spoken about.

Blood Transfusion – Generally no objections.

Organ Transplantation – Generally no objections.

Care of the Dying – A dying Sikh may receive comfort from reciting hymns from the Guru Granth Sahab, the Sikh holy book.? The family or any practising Sikh may help with this.

Death – Generally Sikhs are happy for non-Sikhs to attend to the body.? However, many families will wish to wash and lay out the body themselves.

If members of the family are not available, in addition to the normal Last Rites, the following procedure should be followed:

- Special regard should be given to the 5K's.?? These should be respected and should be left intact.
- Do not trim the hair or beard.

If the family wish to view the body, staff should ask the mortician to ensure that the room is free of all religious “symbols”.

Apart from Stillbirths and Neonates, who may be buried, Sikhs are always cremated.? This should take place as soon as possible.

Post Mortem – No objections to post mortem examinations.

Special Considerations – Sikhs do not have a specific holy day: British Sikhs have adopted Sunday as the holy day.? Prayers are read up to five times daily.

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Section Four

Further Information

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Local Contacts

Hospital Chaplains:

Torbay Hospital:

Church of England - Bleep 230/4186 or Switchboard

Roman Catholic - Pager 04325 138361 or Switchboard

Freechurch - No bleep but contactable by Switchboard.

The Hospital Chaplain keeps lists of all churches and names of Priests/Ministers (Bleep 230/4186).

Baha'I

Tel:	Newton Abbot	(01626)351225
	Torquay	(01803)556632
	Totnes	(01803)863454

Buddhist

Tel:	Ashprington	(01803)732082
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Christian

Contact Hospital Chaplain Bleep	230/4186
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Christadelphian

Tel:	Torquay	(01803)607646
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Orthodox Greek

Tel:	Torquay	(01803)297720 or (01803)325472
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Hindu

See National Contacts

Islam

Islamic Centre, Torquay	(01803)211818
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Jehovah's Witness

Tel:	Paignton	(01803)559354
	Totnes	(01803)862052

Jewish

Tel: Torquay (01803)607197

Quakers

Tel: Torquay (01803)297184

Salvation Army

Tel: Torquay (01803)329007
(01803)294197

Sikh

Tel: Torquay (01803)605248

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National Contacts

The following addresses may be used to make contact on behalf of a patient.? However, the Chaplain should, in the first instance, ask the patient what their needs are or what they would prefer.? If, for any reason, the patient is unable to answer for themselves, the next contact should be with the next of kin or a close member of family.

Agnostic, Atheist and People of no religion **It should not be assumed that they have no beliefs.? They may be glad of human support and friendship but should be approached with sensitivity.**

Baha’I National Spiritual Assembly of the Baha’is of the UK
27 Rutland Gate, London, SW7 1PD
Tel: (0207) 584 2566

Buddhist The Buddhist Society
53 Eccleston Square, London, SW1
Tel: (0207) 834 5858

Chinese – possibly influenced by Buddhism, Taoism or Confucianism Please refer to the individual patient or the Local Community Unit.

Christadelphian Christadelphians
404 Shaftmoor Lane, Hall Green,
Birmingham, B28 8SZ
Tel: (0121) 777 6328

- Christian Scientist** The Church of Christ Science
108 Palace Gardens Terrace, London, W8 4RY
Tel: (0207) 221 5650
- Greek Orthodox** Greek Orthodox Archdiocese of Thyateira and Great Britain
Thyateira House, 5 Craven Hill, London, W2 3EN
Tel: (0207) 723 4787
- Hindu** Bharitiya Vidya Bhaven
4a Castledown Road, London
W14 9HQ. Tel: (0207) 381 3086
or
National Council of Hindu Temples (UK)
26 Hillingdon Avenue, Great Barr, Birmingham, B43 7HS
or
Ramakrishna Vednanta Centre, Unit House, Blind Lane,
Bourne End, Bucks, SL8 5LG
- Humanist** British Humanist Association
14 Lamb's Place, Conduit Pass, London, WC1R 4RH
Tel: (0207) 430 0908
- Jehovah's Witnesses** Watch Tower House, The Ridgeway, London, NW7 1RN
Tel: (0208) 906 2211
- Jews (Orthodox)** The Office of the Chief Rabbi
Alder House, Tavistock Square, London, WC1
Tel: (0207) 387 5772
- Jews (Reformed)** Reform Synagogues of Great Britain
80 East End Road, London, N3 2SY
Tel: (0208) 349 4731
- Jews (Liberal and Progressive)** Union of Liberal and Progressive Synagogues
109 Whitfield Street, London, W1
- Mormons** Church of Jesus Christ of Latter-Day Saints
Public Affairs Department, Church Offices
751 Warwick Road, Solihull, West Midlands, B91 3DQ
Tel: (0121) 711 2244
- Muslim (Ahmadiyya)** London Mosque, 16 Gressenhall Road, Putney, London, SW18
Tel: (0208) 870 8517
- Muslim (Shi'ite)** Iranian Embassy, London

Muslim (Sunni)	London Central Mosque, 146 Park Road, London, NW8 7RG Tel: (0207) 724 3363 <i>Or</i> Islamic Foundation Marketfield Dawah Centre, Ratby Lane, Marketfield, Leicester, LE6 0RN Tel: (01530) 244944
Pagan	Please refer to the individual patient for their own Spiritual Adviser.
Rastafarian	Not organised on a national basis.? Please refer to the individual patient, your local Race Equality Council or Community unit
Russian Orthodox	Russian Orthodox Church, All Saints, Ennismore Gardens, London, SW7 1NH Tel: (0207) 584 0096
Seventh-Day Adventist Church	British Union Conference Stanborough Park, Watford, Herts, WD2 6JP Tel: (01923) 672251
Sikh	Contact the Sikh Temple or Gurdwara in your local telephone directory <i>Or</i> Sikh Council for Inter Faith Relations 43 Dorset Road, Merton Park, London, SW19 3EZ
Spiritualist	The Spiritualist Association of Great Britain 33 Belgrave Square, London, SW1X 8QB Tel: (0207) 235 3351
Vietnamese – possibly influenced by Buddhism, Taoism or Confucianism	Vietnam Refugee National Council 25 Station Road, London, SE25 5AH Tel: (0208) 771 8960
Zoroastrian	Zoroastrian Association of Europe 88 Compayne Gardens, London, NW6 3RU Tel: (0207) 328 6018

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Reference Books

Health Care Needs of a Multi-Racial Society

Perminder and Gurdev Bal

The World's Religions : Understanding the Living Faiths

Consultant Editor : Dr Peter Clarke

The Ethnic Health Handbook – a factfile for Health Care Professionals

Ghada Karmi – Blackwell Science Ltd

The Hutchinson Encyclopaedia – 10th Edition

Dealing with Death, Practices and Procedures

J Green? and M Green, Published by Chapman & Hall (1992)

Caring for Dying People of Different Faiths

Julia Neuberger, Published by Lisa Sainsbury Foundation (1987)

Death with Dignity – Meeting the Spiritual Needs of Patients in a Multicultural Society

available from the Nursing Times Book Service, York House, 26 Bourne Road, Colsterworth

Access to Health Care for People from Black and Ethnic Minorities

Edited by Anthony Hopkins and Veena Bahl, published by the Royal College of Physicians of London

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This document was prepared by [Rachel Bennion](#), Anaesthesia, ICU & Theatres ?South Devon Healthcare NHS Trust 03/2000