The Concise Guide to the Customs of Religious Culture and Practice

The Chaplaincy Department
York Hospitals NHS Trust
June 2009
Introduction

This Concise Guide is aimed to equip all staff with information and guidance regarding cultural and religious practices so that patient care can be given with knowledge and sensitivity.

Standards for Better Health (Department of Health 2004) sets out the level of quality that all healthcare organisations will be expected to meet.

Core Standard C13(a) requires that:
Staff treat patients, their relatives and carers with dignity and respect.

Developmental Standard D2(b) requires that patient treatment and care:
Takes into account their individual requirements and meets their physical, cultural, spiritual and psychological needs and preferences.

A person’s religion and culture is central to their very being and will have a direct effect on their needs, their behaviour and quite often on their attitude to being ill. At a time of illness and being in hospital, a patient may receive a lot of comfort from their faith and the opportunity to practice it. Patients and their relatives will appreciate their culture and religious belief being respected and feel valued at a difficult time for them.

This guide is offered in the hope that it will be a useful resource in caring for our patients. It is a Guide and there is very wide variation in belief and practice. It is therefore important not to make assumptions about beliefs and practices, but to ask.

To make contact with a representative from a faith community or denomination please contact the Chaplaincy Office on ext 5579 or the Hospital Switchboard, dial ‘0’.
The Chaplaincy Department would like to acknowledge that this Concise Guide has been produced by the Lancashire Teaching Hospitals NHS Trust, and is reproduced with their permission.

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BAHÁ’Í FAITH

The Bahá’í Faith began in Persia in the middle of the last Century since which time it has established itself throughout the world. Bahá’ís are followers of Bahá’u’lláh (1817-1892), a Messenger of God who name is a title meaning “The Glory of God”. His teachings centre on the unity of mankind and of religions, and include the harmony of religion and science, the equality of men and women and the abolition of prejudice.

The faith has no clergy and its affairs are in the hands of elected administrative bodies known as "Spiritual Assemblies" at present there are some 200 of these in the United Kingdom. Although there are significant numbers of Bahá’ís in this country of Persian origin, the majority of members are of British background and their cultural approach and needs are basically the same as those of other patients.

While they believe in the power of prayer, Bahá’ís have no objection to orthodox medical practice seeing them as different aspects of the same God-given healing process, they are exhorted by their faith to trust and to follow the recommendations of the doctors treating them.

Key issues and special considerations

Members of the faith observe a period of fasting during March each year; invalids are exempted from this, as are children, the elderly, and expectant and nursing mothers. Under normal circumstances, Bahá’ís abstain from alcohol and from other harmful or habit forming drugs, but it is permitted where prescribed as a bona-fide part of treatment. Narcotics will similarly be permitted for control of pain as prescribed.
Termination of pregnancy is permitted only where there are strong medical grounds such as risk to life and health of the mother.

The bearing of children is regarded as one of the main reasons for the institution of marriage, but the details and extent of contraceptive practice are left to the conscience of the couple. Many will not use intra-uterine device as they regard it more as an abortifacient, than as a contraceptive.

Diet

There are no special requirements as far as food and diet are concerned, except that the abstention of alcohol extends to cooking as well, so that wine sauces, sherry trifle etc. are forbidden. (Such items do not usually form part of a hospital diet.)

Care of the dying and what to do after death

There is no objection to the giving or receiving of blood transfusions or of organ transplants; donation of organs after death for transplanting to others is regarded as praiseworthy. Bahá’ís believe that after death, the body should be treated with respect. Cremation is not permitted, and burial should take place as close as reasonably possible to the place of death, certainly within the distance of an hour’s transport. There is no objection to necessary post-mortem examination provided these stipulations can be met.
BUDDHISM

Buddhism arose in the sixth century BC in the area of the Himalayan Kingdom of Nepal in Northern India. It took its name from the title ‘Buddha’ (The Enlightened) given to its founder. Over the centuries it spread far beyond India in various forms, and adherents of Buddhism are widely found in Sri Lanka, the Indo-Chinese peninsula, China, Japan and Korea.

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 the ways in which they exercise their freedom in life, since the consequences of their actions may be seen in subsequent lives. It is therefore important that an individual behaves properly, and this includes not killing. Buddhist tradition condemns abortion and active euthanasia.

Because there is no ‘God’ there is no actual worship, but the act of ‘Puja’ (to respect) is the Buddhist way of acknowledgement of an ideal.

There are about 20,000 Buddhists in Britain. Most are native converts, but in recent years others have come as refugees from Tibet and Vietnam.

Key issues and special considerations

Peace and quiet for meditation and chanting would be appreciated, as would visits from other Buddhists.

Buddhists have no conflicts with modern medicine.
Diet

Many Buddhists are vegetarian, because of their respect for all life.

Care of the dying and what to do after death

Consideration for the dying will vary among the different Buddhist groups. The most important consideration relates to the state of mind at the time of death, as Buddhists believe that this will influence the character of rebirth.

The dying patient may wish to arrange for a time of peace and quiet to allow for meditation, or may seek counselling from a fellow Buddhist. Some form of chanting may be used to influence the state of mind at death so that it may be peaceful.

There is no objection to blood transfusion or organ transplants or tissue and organ donation, since helping others is fundamental to Buddhist belief. There is also no objection to a post-mortem.

Formal or ritualistic requirements in relation to a corpse are virtually nil. It is appropriate to follow normal hospital practice.

The most important thing when a Buddhist dies is that a Buddhist minister or monk is informed as soon as possible, and ideally he should be of the same school of Buddhism as the deceased.

Most Buddhists prefer cremation (ideally within three to seven days of death) before burial, and if the body or ashes are buried, the headstone should bear the eight-spoked wheel of the law.
CHINESE COMMUNITY

The main period of Chinese immigration was in the 1950’s and 1960’s, from various parts of the Far East. China itself is very diverse, this diversity being reflected in the community in Britain. While many Chinese now are British born, aspects of traditional Chinese culture remain important.

There are many different Chinese dialects, e.g. Mandarin, Cantonese, but only one written language. Many older Chinese speak little English. Traditionally the family is extended, with many people of several generations living together. The reputation and honour of the family is considered important.

Chinese philosophy is based on three main strands; Confucianism, Taoism and Buddhism. Confucius lived about 2,500 years ago and taught social harmony through a code of personal and social conduct. Taoism contains the idea of a unifying force underlying as reality and stresses the importance of achieving purity and union with the natural world through meditation. See separate entry on Buddhism. The concepts of good and bad luck are important.

The Chinese New Year is the major festival, and is celebrated in January or February.
Key issues and special considerations

Chinese medicine is a well-organised and highly respected system of medical knowledge based on balance and harmony within the human body. Treatment includes diet, herbal medicines and acupuncture. Such treatments may be preferred.

Treatment by a medical attendant of the same sex may be preferred.

Names

Traditionally the family name comes first, followed by a two-part personal name always used together. On marriage a woman usually adds her husband’s family name before her own.

Diet

Rice is a staple, traditionally eaten at each main meal. A balance of food types is eaten to restore or maintain the harmony of the body.
CHRISTIANITY

The Christian religion acknowledges the divinity of Jesus Christ. Christians believe that some 2,000 years ago God became man on earth in the person of Jesus Christ. He was crucified, rose from the dead and ascended into heaven.

Approximately one-third of the world’s population professes some form of Christianity. There are many different Christian churches, with differing structures, beliefs and rituals, but the concept of one God who reveals Himself as Father, Son and Holy Spirit (the Trinity), is central to all Christian teaching.

Sacraments are ceremonies, which Christians believe, were ordained by Jesus Christ and confer spiritual gifts on those who receive them. Christian tradition recognises seven sacraments. Baptism, the ‘essential’ sacrament, marks the entry of a person into the family of Christ. The Eucharist is the ‘principal’ sacrament, also called Holy Communion, Lord’s Supper or Mass whereby bread and wine symbolising the body and blood of Christ, are taken in His memory. These words refer to both the ceremony in which the bread and wine is consecrated and to the sacred species brought to the patient at the bedside. The Eucharist heals and sustains the Christian in various ways and reinforces their hope and purpose at difficult moments such as illness.

The other sacraments are: confirmation, penance, extreme unction (anointing of the sick), matrimony and priestly ordination. Different churches vary in the importance they attach to the different sacraments, and their relevance to death and dying.

The Roman Catholic Church in particular believes the consecrated bread and wine are the very presence of god with us, body, blood, soul and divinity. They must therefore be treated with utmost reverence.
Christian churches include:

Anglican, Roman Catholic and Free Churches. The latter, which are tied neither to the Church of England, nor to Rome, include: Baptist, Methodist, Salvation Army, Seventh-day Adventist, Unitarian, United Reform.

Key issues and special considerations

Patients may wish to see a Chaplain, especially if seriously ill or before an operation so that they can be prayed for and receive Holy Communion. They may wish to attend services in the Chapel. Baptism should be discussed with the parents of a sick baby as soon as possible.

Catholic patients will expect to receive the sacrament of the sick (anointing) from the priest especially if seriously ill, and Holy Communion from the priest or one of his assistants. Catholic Chaplains consider it their duty to visit Catholic patients.

Never hesitate to call the Catholic Chaplain at any time in appropriate situations.

There is no religious objection to the giving or receiving of blood or organs, nor to the donation of the body for teaching or research.
Diet

There are no general dietary requirements but some ‘high’ Anglicans (may call themselves Anglo-Catholics) may observe the meatless Friday as a day of self denial. Those awaiting Holy Communion may wish to fast until they have received the sacrament.

Care of the dying and what to do after death

**Anglican/Church of England**
Prayers may be said at the bed-side at the point of death, or over the body of the patient after death, in the ward or the mortuary chapel. The minister offers thanks for the life which has passed and commends the soul to God’s keeping. Last offices (the washing and laying out of a body) are carried out according to normal ward practice.

**Roman Catholic**
The Sacrament of the Sick may be given at the bedside at the point of death, prayers may be said over the patient after death, in the ward or the mortuary chapel if requested. There is no religious objection to non-Catholics handling the body. Baptism of infants in danger of death is also important.

**Free Churches**
Free Church patients will welcome prayers, but will not normally expect a sacramental ministry. For all the Free Churches, routine last offices are appropriate.
CHRISTIAN SCIENTISTS

The major work of the founder of Christian Science, Mary Baker Eddy (1821 – 1910), is Science and Health with Key to the Scriptures – which sets out the systematic method of healing she discovered, applied to herself and others, and taught extensively. This method of prayer-based curative treatment developed from her own life experience and study of the Bible.

Christian Science treatment is a systematic method of healing available for everyone to use, whether or not they are members of the Church of Christ, Scientist. People may describe themselves as Christian Scientist and follow Mary Baker Eddy’s teachings without being a member of either a local branch church or society, or of The Mother Church, The First Church of Christ, Scientist, in Boston, Massachusetts.

Individual choice

The Church does not dictate to members what their healthcare options or other lifestyle choices should be. Specifically, the Church Manual (the guiding By-Laws of The Church of Christ, Scientist) allows for freedom of choice between spiritual healing and medical treatment.

In practice, the majority of Christian Scientist regularly choose Christian Science treatment for themselves and for family members (where this is allowed by law), usually because they have experienced or witnessed excellent healing results of their own and have confidence in its 125 year healing record. This record of healing is accessible to the public in weekly and monthly magazines available to read in Christian Science Reading Rooms.
Important provision

The Bible and Science and Health are usually studied on a daily basis by Christian Scientist, and are considered the official pastor of the Church. Access to these books is always important, and especially when challenging decisions need to be made, for example decisions about the most acceptable form of treatment (medical options or spiritual reliance). Such decisions are based on individual prayer and study.

Key issues and special considerations

Christian Science practitioners and Christian Science nurses are available at all times to help those choosing to rely on prayer-based spiritual treatment. Many Christian Science practitioners are willing to visit a patient undergoing medical care as an expression of care and loving support.

There are no dress codes, and no dietary restrictions, associated with the study and practice of Christian Science.

Post-mortems are agreed to by Christian Scientists whenever they are a legal requirement.

When possible, female bodies should be prepared for burial by women.

There are no specific last rites.

Individual preference also applies to funerals, though experience suggests that the majority of families choose cremation, and often invite church members and friends to conduct a simple remembrance service for the deceased.
Church organisation

There are no clergy, ordained preachers or leaders within The Church of Christ, Scientist or its branches and societies. Important posts are filled, in rotation, by members of the church. Among these, Readers are elected to conduct the services. Executive Boards are elected by members to manage the day-to-day business and to appoint other officers, and more important decisions are made democratically at members meetings. As each church or society is autonomous the specifics of organisation may vary.
HINDUISM

Hinduism, the title given to the religion of the majority of the population of India, is inextricably bound up with culture and social structure. It encompasses a great tolerance of beliefs and practices, and different Hindu communities have different ways of expressing their faith, and usually have their own local temple.

Hindus believe there is one God, who can be understood and worshipped in many different forms. Every Hindu should pray, revere the old, and offer generous hospitality to any visitor. Many are vegetarian, refusing to take the lives of animals for food. In India, where a caste system exists, castes vary in how strictly they follow the laws of diet, prayer, and ritual purification.

There is also a belief in reincarnation in which the status, condition and caste of each life is determined by the behaviour in the last life - making each person responsible for who he is and what he does.

Key issues and special considerations

Hindu women much prefer to be treated by female staff, particularly where questions of modesty are concerned.

Hindus prefer to wash themselves with running water after using the toilet, rather than using dry toilet paper. The provision of a bidet, or similar possibility to wash in running water, will be much appreciated.

There are no religious objections to blood transfusions or organ transplantation, though permission should always be sought. Post-mortems are disliked but accepted.
Issues around birth

Customs and ceremonies vary. Soon after birth a family member may write ‘OM’ (representing the Supreme Spirit) on the baby’s tongue in honey or ghee (clarified butter). The baby may be wrapped in a special cloth. On the sixth day, the women of the family may gather to pray and give presents. This is also when the baby’s fate is written by the goddess of destiny (Vidhata).

The first letter of the baby’s name is chosen by the person who makes out the baby’s horoscope. The name is chosen by a senior family member, traditionally on the tenth day.

It is believed that the soul enters the body in the seventh month of pregnancy. If a baby dies before this time there are no special religious requirements. Babies and children are usually buried.

Names

In the traditional system most people have three names; a personal one, a complementary one (e.g. Behn, Devi for women, Bhai, Dev for men) and a family name (e.g. Patel). Women and children take the husband’s/father’s family name.

Diet

Many Hindus do not eat meat, and some will not eat eggs. However, milk from cows is acceptable to most Hindus. Vegetarian Hindus cannot eat off a plate on which meat has been served, so nurses need to find an acceptable alternative - such as plastic plates - where requested.
Care of the dying and what to do after death

A devout Hindu who is very ill or dying may receive hymns and readings from the Hindu holy books, especially the Bhagavad Gita. Some may wish to lie on the floor, symbolising closeness to Mother Earth.

The patient’s family may wish to call a Hindu priest to perform holy rites, and if no family is available the local Hindu temple should be approached for advice, if the patient wishes it.

The dying person’s relatives may wish to bring money or clothes for him to touch before distribution to the needy. If they cannot go to the bedside themselves, they will appreciate it if a health care worker will do this for them.

Hindu patients prefer to die at home. Funerals must take place as soon as possible. The family will usually want to wash the body before cremation.

Wear disposable gloves before touching the body.

You may remove jewellery, sacred threads or other religious objects.

Wrap the body in a plain sheet

A Hindu is cremated.
ISLAM

Islam is the Arabic name for the Moslem religion. The term means ‘surrender to God’s will’, and includes acceptance of those articles of faith, commands and ordinances revealed through the Prophet Mohammed.

Over 1.2 billion people profess Islam, three quarters of them are widely scattered from the Adriatic to Malaysia. The rest live mostly in North Africa. There are 90 million Muslims in India alone.

Mecca, near the Red Sea coast of Saudi Arabia, is the religious centre for Muslims and a place of pilgrimage from all parts of Islam. It was here that Mohammed was born and began his teaching.

There are five chief religious duties for a Muslim: declaration of faith; prayer - five times a day - with associated purification rituals as necessary preparation; alms giving; fasting; a pilgrimage to Mecca.

Key issues and special considerations

Muslims may wish to pray five times per day facing Mecca (South East) in order to do this. Muslims in hospital will appreciate being able to have the bed curtains drawn. Muslims wash their hands, face and feet in running water before prayer. Strict modesty; men must be covered from the navel to the knee; only the hands and face of women should be visible. Treatment by a medical attendant of the same sex is preferred.
Post-mortems should take place only when there is a legal requirement. Muslims attach great importance to cleanliness. Hands, feet and mouth are washed before prayer; after menstruation, women are required to wash the whole body. In hospital the use of a shower rather than a bath will be appropriate. Most Muslims are accustomed to having water in the same room as the toilet. If a bedpan has to be used, then a bowl of water must be provided for washing.

Religious Festivals

Eid-ul-Fitr
Eid-ul Adha

Issues around birth

For many parents, the baby should be washed immediately. The father may then whisper the Azaan (call to prayer) into the baby’s ear. The baby’s name may be given on the sixth or seventh day, when the baby’s head may be shaved, and rubbed with oil. Please contact local Mosque re question of ritual washing.

Names

South Asian Muslims do not have a shared family name. Women traditionally have a personal name followed by a title (e.g. Bibi, Begum). Men have a religious name (e.g. Mohammed, Allah) followed by a personal name. The religious name should never be used alone; however this is acceptable in Muslims from the Middle East, for example. Children will not usually have the same name as either parent.
Diet

Some meat is permitted as long as it has been slaughtered according to the Halal ritual. Halal lamb, beef and chicken are eaten, but pork meat, carrion and blood are forbidden. Fish and eggs are allowed. Nurses should discuss dietary requirements with Muslim patients.

During the month of Ramadan a Muslim fasts between sunrise and sunset, although those who are sick are not expected to fast.

Care of the dying and what to do after death

The dying Muslim patient may wish to sit or lie with his face towards Mecca. Another Muslim, usually a relative, may whisper the Azaan (call to prayer) into the ear of the dying person and the family may recite the first Kalima out loudy around the person.

Procedure at death

After death, if the body should be handled by non-Muslim health workers, then they must wear disposable gloves.

Under normal circumstances the body should be prepared according to the wishes of the family. However, if no family members are present, the local Mosque must be contacted for advice.

Muslims are always buried, never cremated
JEHOVAH’S WITNESSES

Jehovah’s Witnesses believe in Almighty God Jehovah, Creator of the Heavens and Earth; they do regard Jesus Christ as the Son of God; and declare themselves to be Christians.

Jehovah’s Witnesses await the end of the present world system which they believe will begin with the battle of Armageddon. Jehovah and his true witnesses will be the only survivors, his true witnesses being their sect. After Armageddon there will be 1,000 years of peace and life under ‘favourable conditions’.

Jehovah’s Witnesses believe in making a positive effort to reach the public just as Jesus did when “he went journeying from city to city and from village to village, preaching and declaring the good news of the Kingdom of God”. Scriptures are offered to householders as well as Bibles and literature, if desired. Witnesses conduct meetings in Kingdom Halls on a weekly basis, and also assemble in private homes for Bible Studies each week.

The only festival celebrated is the annual memorial of the death of Christ, the date of which varies, being calculated according to the Biblical formula.

Key issues and special considerations

Jehovah’s Witnesses avail themselves of the various medical skills to assist them with their health problems. They do not adhere to so-called faith healing and are certainly not opposed to the practice of medicine. They love life and want to do whatever is reasonable and Scriptural to prolong it.
Deliberately induced abortion simply to avoid the birth of an unwanted child is the wilful taking of human life and hence is unacceptable to Jehovah’s Witnesses. If (at the time of childbirth) a choice must be made between the life of the mother and that of the child, it is up to the individuals concerned to make that decision.

Immediate intra-operative autotransfusion is permitted by many Witness patients when the equipment is arranged in a circuit that is constantly linked to the patient’s circulatory system and there is no storage.

Jehovah’s Witnesses have definite objection to blood transfusions for religious reasons, but many also have medical objections. Witnesses are deeply religious people who believe that blood transfusion is forbidden by Biblical passages.

**Issues around birth**

Babies are not baptised.

**Diet**

Jehovah’s Witnesses reject food containing blood. They do not smoke or use tobacco products.

**Care of the dying and what to do after death**

There are no special rituals or practices for the dying, but patients who are very ill will appreciate a pastoral visit from one of their elders. They do not support euthanasia, but if death is imminent/unavoidable then life should not be prolonged artificially.
The living body is dedicated to God, but the body has no particular religious significance once the breath of life has passed from it.

There are no religious objections either to post-mortems or transplants, and the Witnesses’ view is that the use of tissue for research or transplantation is a personal choice.

Jehovah’s Witnesses may be buried or cremated and there are no specific funeral rites, though a simple, personal service will probably be held in the Kingdom Hall, at the grave side or crematorium.
JUDAISM

‘Jew’ is the name given since the sixth century BC to the members of the tribe of Judah (descendants of the Patriarch Abraham from about the year 2000 BC).

Jewish religion and culture are inextricably entwined. Judaism is based on the belief in one universal God, and the religious precepts followed are simply to worship one God, to carry out the Ten Commandments, and to practice charity and tolerance toward one’s fellow human beings. The family has great importance in Jewish life.

In Britain today there is a wide spectrum of observance amongst Jews, from ‘reform’ to ‘liberal’ to the ultra-orthodox communities whose daily lives are guided by the code of laws contained in the five books of Moses, The Torah.

Key issues and special considerations

Orthodox Jews may wish to observe the Sabbath and will prefer not to write, travel, or switch on electrical appliances during the Sabbath. They will therefore appreciate such things as having the bedlight switched on for them.

Orthodox Jewish women will dress with modesty and, for example, will never enter synagogue with their head or arms uncovered.
In hospital they will prefer to have their bodies and limbs covered, and may be reluctant to expose themselves to others, as, for example, in teaching situations. They do not wish others to look at their hair and may wear a wig. In hospital they will prefer to keep their hair covered with a head scarf. Despite this modesty, they are unlikely to make a special request to see a female doctor.

**Issues around birth**

Strict orthodox couples are prohibited from physical contact during and after birth. Washing the baby may be very important. Boys are traditionally given their name and circumcised on the eighth day after birth. This may be postponed for health reasons. In Jewish law, life begins after forty days of pregnancy; however, if a baby dies within thirty days of birth, traditional mourning rituals are not followed. The parent’s wishes should be followed.

**Diet**

For orthodox Jews the dietary laws are strict, and only ‘kosher’ food will be acceptable. Milk and meat are not eaten at the same meal; meat must be killed according to kosher ritual, and is acceptable only from animals which chew the cud and have a cloven hoof, or from poultry. Pig and rabbit meat are forbidden. Fish must have fins and scales, and shellfish is forbidden. Jews will be offended if offered pig meat in any form. If kosher meals are not available, a vegetarian diet is preferred.

**Care of the dying and what to do after death**

A dying Jew may wish to hear or recite special psalms, particularly Psalm 23, and the special prayer (The Shema), and will appreciate being able to hold the page on which it is written.
The body should be handled as little as possible by others and burial should take place as soon as practicable, preferably within 24 hours of death, and will be delayed only for the Sabbath.

In normal circumstances, where a death certificate will be issued by the attending doctor, the eyes should be closed at, or soon after death. If practicable, this will be performed by one of the children of the deceased. The body should be covered and left untouched.

The immediate family should be notified, and asked to contact the Jewish undertaker. They will contact the synagogue and set the ritual proceedings in motion. If no family are available, the local Jewish undertaker or synagogue should be contacted.

The coroner’s officers are very helpful in expediting arrangements for Jewish bodies so that the funeral need not be unduly delayed. Orthodox Jews are always buried, but those of more liberal persuasion may choose cremation. There are usually separate Jewish burial grounds.
MORMON / LATTER DAY SAINTS

The Mormon church (properly known as the Church of the Latter-Day Saints) arose in America in the early 19th Century.

Mormons believe that God, Christ and Holy Ghost are separate personages, although united in purpose. They believe in continuing Revelation and that there is a living prophet, a man who received revelations from God and directs their churches here on earth. They also believe that we are living in a time just before the second Coming of Christ and that the Gospel should be taken through Missionary work to the whole of the world. They believe in self-sufficiency, in honouring, upholding and sustaining the Law, and in being of service in the community.

Missionary work is mainly done by young people (19 - 22 years) who travel in pairs serving full-time without pay. They spread the word of the Mormon Church visiting homes and the community.

Key issues and special considerations

Some Mormons who have undergone a special Temple ceremony wear a sacred undergarment. This intensely private item will normally be worn at all times, in life and death.

It may be removed for hygiene purposes and laundering and for surgical operations, but it must be considered private and treated with respect.
Diet

Mormons try to take care of their body, take proper rest and exercise and eat a healthy diet. They are not usually vegetarians, but will eat meat sparingly avoiding products with much blood (i.e. black pudding). There is concern over the effects of stimulants including caffeine, and Mormons drink neither tea or coffee. Some will avoid all hot drinks. In hospital, water, milk or fruit juice will be acceptable. Alcohol and tobacco are forbidden.

Care of the dying and what to do after death

Death, if inevitable, is regarded as a blessing and a purposeful part of eternal existence. There are no rituals for dying, but spiritual contact is important and active members of the church will know how to contact their Bishop. The church has home teachers who assist caring, by offering home support and by visiting church members in hospital. Routine last offices are appropriate. The sacred undergarment must be replaced on the body following last offices.

There is no religious objection to post-mortems or organ transplantation or donations - it is a choice for the individual.

Blood transfusion is encouraged, and the Church makes its meeting houses available for this purpose.

Burial is preferred, although cremation is not forbidden.
ORTHODOX CHRISTIANS

The Orthodox Church claims an historical unbroken connection to Christ and his Apostles and its doctrines have remained unchanged from the earliest times.

There are a number of established ethnically based Orthodox Churches in this country, which mainly support migrant communities. The largest are the Greek, Russian and Antiochian with a number of other smaller ones from mainly East European countries. There are, however, a growing number of British converts and of course many from migrant backgrounds are now second, third or even fourth generation in this country with English as their first language.

The nearest local Orthodox Church is the Community of the Holy Apostles in Preston. They are part of the Greek Orthodox Archdiocese of Thyateira and Great Britain and welcome all Orthodox Christians (several nationalities are represented in their congregation) Services are mainly therefore in English.

Basic Beliefs

All the above Orthodox Christian Churches have the same basic doctrines, beliefs and forms of worship.

The Orthodox believe in the Trinity i.e. God as three in one - God the Father, God the Son (Jesus Christ) and God the Holy Spirit.

The Orthodox Church is a sacramental church of which the Divine Liturgy (Eucharist or Holy Communion) is central to worship and Orthodox Christians (as with Roman Catholics) believe that the bread and wine do become the body and blood of Christ.

Mary, the Mother of God (in Greek Theotokos) plays a very important part in the life of the Church and as such is revered (although not worshipped as her Son is) along with the Saints of the Church who are considered as very much a part of the living Church.
Icons

Icons of Jesus and the Saints are used extensively and will be kissed and reverenced. They are seen as windows into the heavenly realm.

Festivals

A number are celebrated during the Church year with Easter (Pascha) being the most important.

Diet

Strict Orthodox Christians observe a number of fasting times during the year and also fast on Wednesdays and Fridays. These times normally involve abstinence from meat, dairy products and alcohol. At all other times there are no dietary restrictions. Those with health problems are not required to fast.

Abortion

For the Orthodox Christian, all children, born or unborn, are precious in God’s sight and a gift from Him and, as such, abortion is not normally an option. Even in the rare case in which a choice must be made between the life of a child and the life of a mother, decision making must be based upon the recognition that the lives of two human persons are at stake.

Death and Dying

It is important that special prayers are said for or with the dying. The family will normally want an Orthodox priest to perform these. These prayers could include the sacrament of anointing with oil and Holy Communion. The deceased are always buried in preparation for the bodily resurrection at the Second Coming of Christ. Cremation is therefore not permitted. There are no objections to organ and tissue donation.
PAGANISM

Paganism is a fast growing umbrella term used to signify a growing number of people, both old and young, who see themselves as returning to the ‘old ways’ of pre-Christian beliefs.

Many Pagans pay homage to ancient deities, of which there are many, and call upon aspects of their chosen deity to help or protect their everyday lives.

Very few pagans do not recognise the duality of male and female in every aspect of life. The nature basis of Paganism is paramount to all Pagan spirituality, no matter where the basis of the discipline was founded. In addition, a fundamental belief amongst Pagans is the acceptance of responsibility for your own deeds and actions.

Key Issues and special considerations

Many Pagans meditate on a regular basis, and respect without interruption would be appreciated. If an admission coincides with a major festival, the patient may wish to perform a small private ritual to mark the occasion, with or without the assistance of another friend, Pagan Priestess or Priest. Last Rites or emergency naming rituals may need the assistance of a Pagan Priestess or Priest.
Diet

Dietary issues within the Pagan community are entirely a personal choice.

Many are vegetarian, but an equal number are not. It is commonly assumed that to be a Pagan, vegetarianism goes hand in hand. This is erroneous.

Care of the dying and what to do after death

Many Pagans are very conscious of the ecological significance of death. There is a profound belief in reincarnation. The dying patient may express a wish to have dear ones around. There are a growing number of patients who will have made a Living Will, and respect in the execution of this is important. Apart from personal choices, there are no special methods of disposal of the body.
QUAKERS

Quakers believe the whole of life is sacred and the experience of God available to everyone.

Quakerism is a group of insights, attitudes and practices which together form a way of life, rather than dogma or creed. It rests on a conviction that looking into their inmost hearts, people can have direct communication with their creator. This experience cannot ultimately be described in words, but Quakers base their whole life on it.

The Religious Society of Friends (Quaker) movement arose in the mid 17th Century, its followers call themselves Friends of Truth, or more simply Friends. There are no ministers or pastors. Elders and Overseers are appointed to oversee the spiritual and pastoral well being of Quakers meetings and its members. In their meetings for worship Quakers do not sing hymns, or use set prayers, but wait on God in silence, with a member occasionally speaking briefly, praying or reading from the Bible or other religious work.

A Quaker may like to be visited by another Quaker.

Diet

No special considerations, although some Quakers are vegetarian, and a few are vegan.
Care of the dying and what to do after death

There are no special rituals or practices for the dying. Patients will appreciate a visit from an Elder or other Quakers who may sit in silent worship. A number of people are appointed to support and advise families after a death and to assist with practical arrangements. There is no religious objection to post-mortems or organ transplantation or donations.

The deceased may be buried or cremated.
RASTAFARIANISM

Rastafarians prefer “Principles” rather than “Beliefs”, holding that the latter infer doubt. Rastafari was founded in Jamaica in the 1920’s, but only took the name with the Coronation of Emperor Haile Selassie of Ethiopia in 1930. It is linked to early Christianity and Judaism. Rastafarians try to follow the Nazarite Vow of Separation, which forbids the cutting of the hair, proscribes certain foods, and also requires the shunning of the dead, emphasising life, not death. The body is regarded as a Temple of God.

Haile Selassie is seen as a personally revealed Christ. Prior to Haile Selassie’s death, many Rastafarians joined the Ethiopian Orthodox Church, because the Emperor was responsible for its establishment in the Caribbean. Most Rastafarians do not belong to this Church, as they do not make a distinction between it and other orthodox Churches.

Many Rastafarians in Britain belong to an organisation known as the Twelve Tribes of Israel. They seek to educate the young to help in the advancement of black people, the liberation of Africa, and the promotion of Ethiopian and African culture.

Key issues and special considerations

Hair is worn in dreadlocks (uncut hair, washed but not brushed), covered with a woolly hat often in the Ethiopian colours of red, green and gold, in that order, called a Tam. Rastafarian men uncover their dreadlocks during worship, but women cover their heads during worship, when in public, or when receiving visitors.
A variety of Rasta hats are called “Crowns”, an alternative name for a Tam. Clothing may be conventional, or more elaborate and distinctive; Khaki outfits, with sandals or African styles. Women wrap their hair, and wear colourful dresses concealing the body, as required by Rastafarian beliefs.

Herbal treatment is favoured, but conventional medical treatment is acceptable. Blood transfusion may be refused. Contraception is rejected, and birth control should be by self control. Departure from this is considered a compromise, and is unlikely to be openly discussed.

Visiting the sick is important, and visits are often made in groups, which may be frowned on by hospital staff. Rastafarian visitors therefore often feel they are made unwelcome in the hospital environment.

**Issues around birth**

There is no special ceremony to welcome a baby, which is named by the parents. When the baby is three or four months old a religious ceremony may be held when a spiritual name is given.

**Diet**

Most do not eat meat, but fish with scales may be acceptable. Pork is absolutely forbidden.

Fresh natural (ITAL) foods are preferred to processed food. Natural herbs and spices are liberally used. Many Rastafarians follow Mosaic dietary restrictions, and they will not eat grapes, currants or raisins.
Care of the dying and what to do after death

Family members may pray at the bedside of the dying person, but there are no rites or rituals before or after death. At death, routine last offices are appropriate.

Post-mortems and organ donation or transplantation would be extremely distasteful to most Rastafarians, and few would agree to a post-mortem unless it is ordered by the Coroner.

The fear of contamination of the body will influence the attitude to transfusion and transplantation. There is also the belief that to do so is to interfere with God’s plan for mankind. Organ donation and reception to and from other family members may be considered. Burial is preferred, but cremation is not forbidden.
ROMANY ORIGIN

Includes English, Irish, Scottish and Welsh. Travellers, and those who live on a permanent site, those in transit, and Travellers who are settled in houses (although a Traveller may have relinquished their nomadic lifestyle, this does not mean the loss of their ethnic identity).

Many people of Romany origin are Christians. Travellers often experience difficulties in seeing a GP, and when this happens, will present themselves at A & E departments, as this is their only means of gaining the health care needed.

Romanes (the Romany language) is still spoken today. However the majority of Travellers speak English, but may need assistance with filling in forms.

Key issues and special considerations

Romanies do not believe in washing clothes in the same bowl that vegetables or food is prepared. A separate bowl is kept for washing face and hands etc. - many feel it is mochardi (unclean) to do otherwise.

From the age of eleven, and throughout adulthood, people of Romany origin do not like undressing in front of others (out of modesty). In addition to this they prefer to keep legs and feet covered - it is considered rude to do otherwise.
Patients may wish to see a Chaplain, and/or request a Bible. Catholicism does forbid the termination of pregnancy and indeed many Travellers (irrespective of religion) do not agree with abortion other than on medical grounds.

**Diet**

There are no general dietary requirements.

**Care of the dying and what to do after death**

If a Traveller is dying, then the family will visit wanting and needing to see and be with the patient before they die. This often means that there will be a large number of people visiting.

After death, the family will request that the person be laid out in clothing of their choice.

Family and friends will often place items in the coffin - things that the deceased was fond of - jewellery, photographs, children’s toys. The family will also want to take the deceased back with them in order to sit up all night with him/her allowing family and friends to pay their last respects before the funeral the following day.

Burial is preferred, although cremation is not forbidden.

There is no religious/cultural objection to the giving or receiving of blood or organs.
SEVENTH-DAY ADVENTIST

The Seventh-day Adventist Church grew out of the world-wide religious revival of the mid-nineteenth century. People of many religious persuasions believed Bible prophecies indicated that the second coming or advent of Jesus was imminent.

Basing their faith and practice wholly on the Bible, the Seventh-day Adventist Church has developed 27 fundamental beliefs that unify the world-wide church and define its members as Christian. The beliefs might be summarised by stating that Seventh-day Adventists are a people who keep the commandments of God and have faith in Jesus.

Key Issues and Special Considerations

A strong element in their faith is the Biblical teaching that the body is the temple of the Holy Spirit This means that most Seventh-day Adventists are very concerned about their health. In hospital this would generally result in strong support being offered to members in hospital by visitation from the Minister and members of the local congregation.

Patients would prefer to be examined by doctors of the same sex. Although not mandatory this should be considered during treatment.

The Sabbath, lasting from sunset on Friday until sunset on Saturday, is the high point of the week. Seventh-day Adventists keep this in normal circumstances by avoiding unnecessary work. In hospital this would convert to a desire for nursing staff to avoid unnecessary work in their behalf. If possible the television should be turned off, or turned down during the Sabbath hours in the area the patient is resting.
Patients may request that they be offered Communion by the Minister or elders of the Church. This would be a simple service held, ideally, in a side room or ward. Some patients, regardless of the seriousness of their condition, may request the Biblical practice of anointing with oil. This is another simple service that would ideally be held in a side room.

The practice of elective abortion is not condoned by the Church, although therapeutic abortions are permitted.

Diet

To conform with Biblical practices pork, or any pork derivatives will not be chosen by members. This restriction does not include treatments derived from the pig (including the enzymes taken by sufferers from Cystic Fibrosis). For the same reason shellfish and scaleless fish, are not eaten. Many members are ovo-lactarian vegetarians although a few are vegan. Alcohol, tea and coffee are avoided.

De-caffeinated alternatives are often acceptable although many take fruit teas or grain based drinks. Medications containing alcohol would be permitted.

Care of the dying and what to do after death

There is generally no objection to the giving or receiving of blood or blood product transfusions. This freedom extends to organ transplant and donation, although this could be affected by personal or cultural considerations.

It would be helpful to the family of the dying patient if the Minister of the local church were called to attend the last hours of the patient.
There are no objections to post-mortems and funeral rites allow either cremation or burial. West Indian Seventh-day Adventists will prefer burial. As Seventh-day Adventists believe that the dead are asleep and do not go straight to heaven, comforting words offered by hospital staff should not include references to “being with Jesus” or “going to heaven”.
SIKHISM

Sikhs (disciples) are members of the religious faith which originated in the 16th century in the Punjab in Northern India as a reformist movement of Hinduism. After much persecution, Sikhs eventually became a people with military organisation (Khalsa Panth) in defence of their faith.

The founder, Guru Nanak, tried to combine the best features of Hinduism and Islam. He and the nine succeeding Sikh gurus are revered as saints. The Sikh holy book, the Guru Grant Sahab is a collection of writings of the 10 gurus, the last of whom commanded that Sikhs should use the Guru Grant Sahab as their teacher.

Sikhs believe in one God. Each makes his/her personal relationship with God and worships in his/her own way, aiming, after many cycles of rebirth, to achieve true understanding and unity with God. Sikhism preaches the equality of all people, irrespective of caste, colour or creed.

Some Sikhs have chosen to ‘take Amrit’ (a kind of confirmation) and are then bound to observe special rules, such as daily attendance at the temple, special prayers, dietary rules, and the wearing of the ‘five K’s’. These are Kesh - uncut hair; Kangha - the wooden comb; Kara - iron wrist band; Kirpan - a short sword; and Kach - short trousers/breeches. These symbols should not be disturbed unless it is absolutely necessary.
Key issues and special considerations

Female doctors for female patients whenever possible.

The Five K’s worn by men should NOT be disturbed. If it is necessary to cut the hair, the reasons should be carefully explained to both patients and family.

The Kara should only be removed from the right wrist, for surgery or X-ray, otherwise it should be sealed with tape.

Most Sikhs are accustomed to having water in the same room as the toilet. If a bedpan has to be used, then a bowl of water must also be provided for washing.

Issues around birth

When a baby is thirteen days old, a ceremony may be held where prayers are said, and mother and child blessed with sweetened water. A larger celebration may be held on the fortieth day. The baby may be named on one of these days; before this a pet name may be used. Babies are usually buried, not cremated.

Names

Traditionally there is no family name, but a personal name and a title; Singh for men, Kaur for women. To call a woman Mrs Singh may be offensive, however some do now use family names.
Diet

Many Sikhs, especially women, are vegetarians. They may exclude eggs and fish from their diet. A few Sikhs who eat meat will not eat beef. It will be helpful, in this case, to explain to patients the ingredients of dishes with unfamiliar names, such as ‘hotpot’.

Care of the dying and what to do after death

The family will normally be present and will say prayers.

At death, routine practices may be performed, but do not remove the five K’s.

The body may be covered with a plain white sheet.

There is no religious objection to post-mortem or transplantation.

The body should be released as soon as possible to enable the funeral to take place.

Sikhs are always cremated.
WEST INDIAN COMMUNITY

The Caribbean community is one of the oldest ethnic groups in Preston, mainly arriving in the 1950’s from Jamaica, Dominica and some of the Windward Islands.

The West Indian communities have been, over the years, very heavily influenced by the British way of life, as well as French presence; in a number of areas including language, religion, education, politics and social family systems, thus interlinking with the Western culture, although traditional island customs are the main differences. For this reason, it has been relatively easy for this ethnic community to settle and establish themselves in Britain.

The majority of West Indians are followers of Christianity within its subgroupings, i.e. Roman Catholic, Anglican, Pentecostal and Seventh-day Adventist. The other religious group associated with the Caribbean population is Rastafarians.

The Seventh-day Adventists have strict rules (see separate entry).

Key issues and special considerations

West Indian dress is typical western clothes and the only major feature which does not associate with Western society is the appearance of the Rastafarian hairstyles.

Diet

Dietary needs are the same as the white British, except that rice, sweet potatoes, yam and some spices are consumed