Spiritual Care
A multi-faith resource for healthcare staff
Multi-faith resource for healthcare staff

NHS Education for Scotland (NES) produced this booklet through its Spiritual Care and Chaplaincy Programme. It was prepared with input from Interfaith Scotland, individual faith and belief communities in Scotland and Hospital Chaplains.

A copy of this resource can be found:

Online at https://learn.nes.nhs.scot.
Find it in the Person-centred Care Zone.
Scotland is a religiously and culturally diverse country and this resource is designed to assist NHS staff and volunteers to address some of the spiritual and religious needs of people in their care.

The Scottish Government has stated that spiritual care, which includes but is not limited to religious care, is a necessary and integral part of the whole person care offered by the NHS in Scotland and must be provided in an equal and fair way for those of all faith communities or none.

There are many religious faith traditions practised within Scottish society. While perhaps not as prevalent as in other parts of the UK there is a rich variety of smaller faith communities alongside the generally more numerous Christian groups.

The main groups include: Jewish, Muslim, Christian, Bahai’, Sikh, Buddhist, Hindu and Pagan. Other belief groups such as the Humanist Society of Scotland do not regard themselves as religious but are part of the spiritual care spectrum.

People who practice their faith or religion as part of their regular life and as part of their identity have a right to continue to express this identity while undergoing healthcare.

There is in fact a strong tradition within most faiths of rituals or prayers or other activities which are particularly for, or relevant to those suffering from ill health. The very purpose of most religious traditions is in part to enable people to achieve as far as possible a state of well-being in relation to God, to self, to others, in caring relationships with the poor and with the whole of creation. The ideas of respect, patient focus and equality and diversity, all suggest very positively that the NHS should be careful and well-motivated to treat people appropriately whatever their cultural or religious situation.

**Ongoing religious practice**

As far as is reasonably possible a person should be allowed and encouraged to continue to practice their religion, if they so wish, within a healthcare situation. The public nature of many hospitals and the numbers being dealt with can make this problematic, but attempts should be made to enable people to use such religious resources they wish to express their faith. This might include rituals such as prayer, reading holy texts and short acts of worship or meditation. It should normally be possible to arrange for a faith or belief leader
or representative to visit if a patient so wishes and to share such rites which are possible within the environment. Healthcare units should, as far as is possible, provide a quiet room which can be used for the purpose.

**Religion and Health**

Religious practice has a long history of being linked to health matters. In days when medical services were hardly existent, people turned to their religion as a way of coping and to seek healing. Religious practice is still important for many people. For some, their understanding of their illness is related to their faith perspective. It can be that a certain religious perspective can add to the anxiety of ill health, but it is far more common that the support of a religious community and the practices of religion can be of considerable help in the healing process. Research shows that using a holistic approach of treating mind, body and spirit can aid the recovery of a patient.

Different faiths and belief groups have particular needs to do with their care. A proper needs analysis which includes a person’s faith or belief will be more likely to result in appropriate and high-quality care. Practical things like the wearing of articles of faith, diet, washing facilities, ways of addressing people – which name to use, birth rites, death rites, modesty and communication issues are often important to religious people.

The NHS in Scotland recognises that the healthcare challenges faced by the people it cares for may raise their need for spiritual and religious care and is committed to addressing those needs. To enable this, most Health Boards have a Department of Spiritual and Religious Care staffed by a chaplaincy team, who
are a good source of knowledge and experience on how to serve the needs of a multi-faith population.

Often the chaplaincy team will be the first place people call when seeking advice or help in finding the right care. Chaplaincy teams help to facilitate spiritual or religious care for all, whatever their faith or life stance happens to be. They will usually know who to contact when a person asks to see someone from a particular faith community.

**A note on mental health**

Mental illness is but one of many diagnostic areas: it has therefore not been picked out for special mention in the separate sections on individual faiths. However, sometimes a person’s mental illness is expressed in a religious way or with religious terminology. A faith or belief system or faith community can be a major help in supporting people through the healing process.

When considering the religious and cultural needs of patients, please bear in mind that people from Black, Asian and Minority Ethnic communities are more likely to be diagnosed with mental illness problems and more likely to be admitted to hospital. They are also more likely to stop attending mainstream mental health services during or after treatment.

There is also some evidence that mental illness in such minority groups sometimes goes unrecognised. There are many possible reasons for this—but cultural and religious factors may well be involved. In these circumstances, healthcare staff will need to be aware of differences in culture and faith when assessing the mental illness and well being of patients, whatever their background or community.
Research into clinical outcomes has shown that patients benefit when their care plans take account of their faith, religious practices and other personal beliefs.

**When in doubt, ask the patient**

You can resolve many of the issues arising from caring for people from a faith community or culture unfamiliar to you by simply asking the patient, or their visitors, how they wish to be looked after. It is polite, for example, to ask how a patient wishes to be addressed. This is important because not all cultures have a pre-name then a surname. When in doubt, ask.

It is also worth noting that, in some cultures, it is not acceptable for men and women to shake hands in greeting.

This booklet may not cover all faith communities and relevant issues therefore it is essential to talk to the patient about their health needs. All NHS Boards should offer access to interpreting services and it is essential to use these services when a patient has difficulty communicating their needs.

When you know a person’s faith community or group, you should be able to use this document to deal with the main areas which may be relevant.

**NHS Chaplaincy and Spiritual Care Services**

NHS chaplains are there for people of all faiths and none. Everyone, whether religious or not, needs support, especially in times of crisis.
NHS Chaplains are available to patients in a number of different ways, to:

- Support people at difficult times.
- Listen to their stories.
- Work in one to one situations and understand relationships.
- Help people (re-)connect with what really matters to them in times of illness in ways that promote recovery and wellbeing.
- Provide training to help you develop skills in spiritual care.
- Provide information about different faith and belief groups and about bereavement.

Sections of this text have been replicated from ‘Spiritual Care Matters’ by NHS Education for Scotland (2021).

How do I find a chaplain?

Every Health Board has a spiritual care policy which will tell you the type of spiritual care service you can expect in your hospital. Every Health Board will have a department of spiritual care and the details of this should be easily available on the intranet, notices, leaflets, through the switchboard.

Every hospital should have a chaplain. They may work whole or part-time, but it is important you get to know them because you need to know who you are referring people to or whose advice you are asking.

Are chaplains available 24/7?

Whole-time chaplains will mainly work office hours. Part-time chaplains will work in a pattern which suits the hospital. However, chaplains are usually available on an on-call rota providing 24-hour cover. The areas they cover will vary from place to place but this is usually for acute hospitals. Information should be clearly displayed if this service is available where you work.

Are chaplains only a phone call away?

Yes, each hospital will have its own referral system, and this is undergoing review in many areas, but the simplest way is always the best. Telephone the chaplains’ office.
Navigating this document

This document gives information, in the same order, for each of the communities listed on this page.

The format of each section on the communities follows the colour-coded infographic, also on this page, titled ‘Information areas’.

1 Although ‘Chinese’ does not represent a religious community—we decided to include a Chinese section as various religions are found in the Chinese community and there are particular practices that are specifically Chinese.
Bahá’í faith
The Bahá’í faith is an independent world religion that originated in Persia (now Iran) in the middle of the 19th century. Its founder is called Baha’u’llah (Glory of God).

Baha’u’llah announced that he was a messenger from God sent to help bring about a new age of global civilisation which would be characterised by unity and peace. Baha’u’llah was persecuted and finally exiled to Akka (Acre) in Palestine where he died in 1892. The spiritual and administrative centre of the Bahá’í faith is in present-day Israel.

Key Bahá’í beliefs:
- There is one God
- Each person has a soul which comes into being at, and develops from, the time of conception and that lives on after death
- All religions have a common foundation
- Men and women should have equal opportunity
- Prejudice of all kinds should be challenged
- Extremes of wealth and poverty should be abolished
- Religious and cultural diversity should be respected

Religious practices

Bahá’ís usually recite daily prayers—some may pray quietly, some may chant. Although in illness Bahá’ís are exempt from these prayers, some may still wish to recite them, and would therefore appreciate privacy.

Diet

Bahá’ís have no specific dietary requirements. Some Bahá’ís may be vegetarian, but this is a personal choice, not a religious requirement. The use of alcohol and habit-forming drugs is strictly prohibited except when prescribed by a physician. Smoking is discouraged.

Attitudes to healthcare staff and illness

Most Bahá’ís have a positive attitude towards healthcare staff and are willing to seek medical help and advice when sick. Staff of either gender may care for Bahá’í patients. As well as taking prescribed medication, Bahá’ís believe in the power of prayer in healing. In general, Bahá’ís believe it is for God alone to determine when a life should end, although it is recognised and accepted that steps to ease suffering may, as a side effect, shorten life.
Fasting

The Bahá’í fast takes place every year from 2–20 March, prior to Naw-Ruz, the Bahá’í New Year. At this time Bahá’ís may not take food or drink from sunrise to sunset. Fasting is not obligatory during sickness or pregnancy, while breastfeeding or menstruating, during hard physical labour, or on long journeys, and people under the age of 15 or over 70 are exempt from fasting.

Death customs

Staff of either gender may care for the body. The Bahá’í faith has no clergy. At the end of life, it would be hoped that family and loved ones would be present with the patient to provide comfort, support and prayer. Bahá’ís believe the body has been “the temple of the spirit” and treat the body of a deceased person with great dignity and respect. After death, the body is washed and wrapped in silk or cotton cloth and, for those over 15 years, a special burial ring is placed on the finger. Relatives may wish to do this themselves or may leave it to the funeral director. It is preferable that burial should take place as soon as possible, but no time limit is specified. Bahá’í law prescribes that burial should take place at a distance of no more than one hour’s journey from the place of death. The body should not be cremated or embalmed. Funerals are normally arranged by the family of the deceased if available, or on occasions by the Bahá’í Assembly (usually listed in the phone book).

Autopsies and post-mortem examinations are acceptable if necessary, preferably in the hospital where the patient died so that the body will be transported as little as possible.

Because Bahá’ís believe life begins at conception, a miscarriage is a great loss and the foetus should be treated with respect. Wherever possible the remains should be returned to the parents or local Bahá’í community for burial.

Birth customs

The birth of a child is a time of joy and Bahá’ís may wish to express their gratitude to God with prayer; but they have no rituals associated with birth.

Washing and toilet

Washing and toilet present no unusual problems for Bahá’ís, although they prefer to have access to water for ablutions before prayers.

Ideas of modesty and dress

There are no particular points to be noted in this area and most Bahá’ís would accept being examined by doctors of the opposite sex.
Blood transfusions, transplants and organ donation

Most Bahá’ís would have no objection to blood transfusions and may receive transplants or donate organs for transplant. Organ donation after death has been described as being of “service to mankind in death” and “a noble thing to do”.

On completion of the removal of organs for transplant, the donor’s remains should be buried in accordance with Bahá’í burial laws.

Family planning

Family planning is left to the personal conscience of a Bahá’í, however, irreversible sterilisation in either sex is discouraged unless there is a medical condition relevant to the decision, in which case the individual would seek qualified medical advice.

Abortion is permitted only where there are strong medical grounds such as risk to the mother’s life and health. Abortion is not regarded lightly and is not permitted as a contraceptive measure. Many Bahá’ís will not use an intra-uterine device for contraception as they regard it more as an abortive measure than a contraceptive.
Brahma Kumaris
Brahma Kumaris is a worldwide spiritual movement dedicated to personal transformation and world renewal.

The Brahma Kumaris World Spiritual University (BKWSU) was founded in 1937 in Hyderabad Sind (then in India) by Brahma Baba, a businessman and philanthropist. Brahma Baba had a vision of how people of all cultural backgrounds could come together to rediscover and develop the spiritual dimension of their lives, and cultivate a deep, collective consciousness of peace and of the individual dignity of each soul.

The BKWSU (UK) teaches Raja Yoga as a way of experiencing peace of mind and a positive approach to life. The University provides opportunities for people from all religious and cultural backgrounds to explore their own spirituality and learn skills of reflection and meditation derived from Raja Yoga, which will help develop inner calm, clear thinking and personal well-being. Across the UK the BKWSU works with national and local organisations and community groups in such areas as inter-religious dialogue, youth programmes, prison outreach, social work and women’s and men’s groups. BKWSU (UK) was established as a UK charity in 1975.

### Attitudes to healthcare staff and illness

Most Brahma Kumaris have a positive attitude towards healthcare staff and would be willing to seek medical help and advice when sick. Decisions about where to seek advice and the type of treatment are left to the individual.

### Religious practices

The Brahma Kumaris practise meditation regularly, health permitting, especially in the early hours of the morning, and it may be helpful for them to have access to a quiet area for this.

### Diet

Brahma Kumaris are encouraged to eat a lacto-vegetarian diet (dairy products permitted) and discouraged from using alcohol, tobacco and other recreational drugs. Most Brahma Kumaris do not use onions or garlic in cooking and prefer to have their food cooked and blessed by fellow Brahma Kumaris.

### Ideas of modesty and dress

As Brahma Kumaris teachers live a celibate life they may prefer medical examinations to be undertaken by someone of the same sex. Dedicated Brahma Kumaris women often dress fully in white if officially representing the BKWSU.
Washing and toilet

Brahma Kumaris take a shower each morning (showers are preferred to baths wherever possible). Brahma Kumaris also observe the discipline of bathing or showering after a bowel movement and would prefer to do this in hospital too, wherever possible.

Fasting

There is no religious obligation for Brahma Kumaris to fast.

Death customs

Brahma Kumaris favour cremation over burial. Dedicated Brahma Kumaris would prefer the body to be in special white clothes although there is some flexibility in this. Details of the funeral arrangements are always discussed with the family of the deceased so that the family’s wishes are honoured.

Birth customs

Dedicated Brahma Kumaris live a celibate life so it would be unusual for someone from the Brahma Kumaris tradition to be giving birth.

Blood transfusions, transplants and organ donation

Brahma Kumaris would have no objection to blood transfusion or organ transplants. Decisions about the donation of organs are left to the individual.
Buddhism
The word ‘Buddha’ means ‘the awakened one’ and Buddhism (which can be understood as both a religion and a philosophy with clear ethical foundations), stems from the teachings of the historical Buddha, Siddhartha Gautama (lived 6th-5th century BCE\(^1\) in present-day Nepal).

The Buddha was a human being, not a god, and is not worshipped as a god, but is revered as an inspiration of how people can transform their lives and follow a path of awakening, to end suffering.

There are various Buddhist traditions. The ancient civilisations of India and China were profoundly affected by Buddhism and today it remains deeply influential in Sri Lanka, Myanmar, Thailand, Vietnam, Korea, Japan and the countries of the Himalaya (Tibet, Nepal and Bhutan); as well as many areas of India. There are over 500 million followers worldwide, around 8% of the world’s population.

The Buddha’s words were transmitted orally through his followers and later formulated into teachings called the Dharma. These teachings were eventually written down and became more widely available to anyone who wished to hear them. Buddhism encourages its followers to develop wisdom and to have compassion towards all forms of life.

A Buddhist’s intention is to follow a path of spiritual practice, including ethics, meditation and wisdom, which leads to freedom from suffering, sometimes referred to as ‘Spiritual Awakening’, ‘Enlightenment’ or ‘Nirvana’. This path is known as “The Noble Eightfold Path” and teaches eight principles to be understood and followed in daily life.

Today Buddhism has spread across the globe and, as well as ethnic Buddhist communities, there are a large number of convert communities practicing the essential Buddhist teachings in ways which are appropriate to the modern westernised world, including being part of a Sangha.

Religious practices

Most Buddhists practise veneration of the Buddha which can include honouring a Buddha figure and making offerings to an image of the Buddha, and it may be helpful to facilitate a space for a shrine. Most Buddhists also practice meditation, and it may be helpful to offer access to a quiet area for this, or to allow chanting of prayers or sacred texts.

The Three Refuges

Following Enlightenment, and shortly before his death, the Buddha brought together a group of his followers and founded a religious order known as “The Sangha”—which has remained both the guardian and the embodiment of his teachings to this day. These three aspects, the Buddha, the Dharma and the Sangha, are known to Buddhists as the “Three Refuges” or “The Three Jewels” and for many Buddhist they point to the practical path of spiritual awakening.

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\(^{1}\) Before the Common Era. This is often referred to as BC (before Christ).
**Attitudes to healthcare staff and illness**

There are a range of Buddhist traditions and, similarly, a range of perspectives around health issues. It is always best practice to check with the patient and not presume an understanding on any particular issue. Most Buddhists have a positive attitude towards healthcare staff and are willing to seek medical help and advice when sick. Buddhists generally are willing to take any medicine that helps. Some Buddhists will be wary and will wish to know the effects of any drug that alters their emotional state or clarity of mind, because of the fifth precept. However, the idea of the fifth precept is to prevent people carrying out harmful acts while intoxicated, so they usually accept prescribed medication that may be intoxicating but also heals or reduces suffering. Nevertheless, some Buddhists may favour alternative health remedies or may be reluctant to accept sedating medication.

**Ideas of modesty and dress**

There are no particular points to be noted in this area and most Buddhists would not object to being examined by doctors of the opposite sex. However, members of some Buddhists Monastic communities may be uncomfortable in settings alone with the opposite sex. Monastics observe modesty of dress, wearing full-length robes and Buddhist monastics in many traditions also leave the right shoulder and arm uncovered as a mark of respect.

**Family planning**

There are a range of perspectives among Buddhists around family planning. Most will involve consideration of how to minimise harm and bring greatest benefit, individually and for the world. Celibacy, abstinence and/or the use of contraception are all generally acceptable, and used as means of protection, by many Buddhists.

**The Five Precepts**

For people following Buddhism there are basic guidelines, known as The Five Precepts. Each precept has a practice to abstain or refrain, and its opposite to cultivate. These are:

- Refrain from taking life | Practice loving kindness /reverence for life
- Refrain from taking that which is not given | Practice generosity
- Refrain from misuse of the senses and sexual misconduct | Practice stillness, simplicity and contentment /true love
- Refrain from lying or using false or harmful speech | Practice truthful, kindly and helpful speech
- Refrain from taking intoxicating drink or drugs which cloud the mind | Practice mindfulness and clear comprehension
The Noble Eightfold Path

- Right view or right understanding
- Right thought or right intent
- Right actions or right conduct
- Right speech
- Right livelihood
- Right effort
- Right mindfulness
- Right meditation or right concentration

Birth customs

Generally, there are no guidelines, although Buddhists in some South East Asian countries traditionally prepare a basket containing some tools for a baby boy, and a cradle containing needles and thread for a girl. Some may ask for the umbilical cord to be salted and placed in an earthenware pot. In the UK some Buddhists may prefer to give birth at home.

Fasting

If their health allows, some Buddhists fast on new moon and full moon days and on specific festival days such as the Buddha’s birth, his Enlightenment, his first sermon, his death and others. Some may also eat only one main meal a day (see below).

Death customs

The manner of consideration for the dying will depend on the Buddhist group. If you need specific guidance about a patient’s particular school of Buddhism, or want to arrange counselling from a fellow Buddhist practitioner, then you should find out from the patient or family which specific form or school of Buddhism the patient practises. You can then seek out local contact details.

A person’s state of mind at the moment of death is considered important across all Buddhist traditions. Practitioners in Tibetan traditions believe that the state of mind at the time of death influences how they experience the intermediate or ‘bardo’ states and thereafter the character of rebirth. In these traditions, the belief is that the body and mind, or consciousness, separate at the time of death—the mind is not dependent on the body for its existence and it does not die at the time of physical death but continues in an intermediate state of “bardo” (customarily assumed to be around 7 weeks) before (generally) taking rebirth into another body. Thus the time before and after physical death is a critical period for influencing the outcome of rebirth, into a higher or lower form.

Buddhists may like to have full information about their imminent death, to enable them to make preparations, although this may vary. Nearing the time of death, the state of mind should ideally be one of peace, so the patient may wish to meditate and ask for a quiet place. They may wish for a Buddha figure close by and may use a candle or incense stick.
Continued from previous page.

Some patients and relatives may object to a postmortem due to the belief that the consciousness may stay in/around the body for some time after the heart has stopped, and that interfering with internal organs may determine the optimal dissolution of consciousness. A postmortem may be less of an issue if three days have passed since death.
Diet
The principle of non-harm is an important consideration in a Buddhist’s diet and, if their health allows, many will be vegetarian or vegan. Some may follow a precept that involves eating only one main meal a day. This is usually eaten before midday. When their body may need additional sustenance, some Buddhists will eat non-vegetarian, or whatever is offered, as the Buddha encouraged gratitude for whatever was received.

Blood transfusions, transplants and organ donation
There are no religious objections to blood transfusions or organ donation, since helping others is fundamental to Buddhist belief—and all consider blood and organ donation during life, acts of compassion.

Washing and toilet
Washing and toilet present no unusual problems for Buddhists.
Chinese faiths
Although there is a great variety of Chinese belief systems (including Christianity and Islam), the most prevalent influences are Buddhism (see above), Confucianism, Taoism and veneration of ancestors.

Confucianism was founded by K’ung Fu Tzu, who was born in 551 BCE. Confucianism deals mainly with individual morality, ethics and the proper exercise of political power. It emphasises respect for rules and authority.

The founder of Taoism is believed to be Lao-Tse (604-531 BCE). Taoism is broadly based on the key concepts of yin and yang, ch’i and the five elements of matter (water, fire, earth, metal and wood).

Confucianism, Taoism and Buddhism are often blended to form a set of complementary, peacefully co-existent religions.

In traditional Chinese families, sons and daughters must be dutiful towards older family members, particularly their parents. Reverence for ancestors is regarded as a matter of great importance. Children are expected to carry out rituals and obligations in respect to the living and the dead, however, religious scepticism among the younger generation of Chinese is common.

### Attitudes to healthcare staff and illness

Many Chinese are accepting of western medicine, however, this can vary with age and upbringing. Traditional herbal remedies given by Chinese physicians are still used and you should check whether the patient is taking Chinese herbal medicine in combination with western medicine. Some prefer injections over pills in the belief that they are more effective.

Chinese can be quiet, polite and unassertive and tend to suppress feelings such as anxiety, fear, depression or pain. Recognising non-verbal cues and their cultural meaning is important.

Many Chinese are shy to ask the doctor questions about their condition. Some feel embarrassment when they cannot communicate well and can experience stress in a healthcare setting. Always ask if an interpreter, not a family member, is needed during consultations.

### Religious practices

Chinese religious practices vary according to background and tradition (see the religious practice section in Buddhism, Christianity and Islam for guidance for Chinese patients from those backgrounds).

### Ideas of modesty and dress

Chinese women are generally modest and would probably be more relaxed and content if attended by female professionals. In practice, however, the great majority of Chinese people today are used to being treated by doctors of the opposite gender.

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3 Before the Common Era. This is often referred to as BC (before Christ)
Diet

The Chinese have definite customs concerning food, its preparation, its service, and the way it is eaten. The older generation often believe that rice is the only form of staple food which can give them energy and vitality. (Northern Chinese eat little rice and more wheat, maize and other cereals).

Patients often ask relatives to bring in rice and other food when they visit. A traditional Chinese belief relating to diet in hospital concerns drinking soup that has been boiled for a long time (six to seven hours). Many believe that consuming well-boiled soup will help clear one’s system and promote a speedy recovery.

Soya milk is often preferred to cow’s milk as some Chinese are dairy intolerant.

Beef and cheese are the least preferred foods.

Fasting

There is no specific guidance on fasting for the Chinese community (see Buddhism, Christianity and Islam for Chinese patients from those backgrounds).

Buddhist and Taoist Chinese will often eat a vegetarian diet before major festivals.

Washing and toilet

Chinese cultures place great emphasis on physical cleanliness. Most Chinese wash by pouring water over themselves or sponging. Showers are preferred rather than baths with some worrying that baths could make them ill.

Death customs

Funeral and mourning customs vary widely in the Chinese tradition, often dependent upon wealth and status, making it very difficult to generalise for all Chinese.

In the case of adults, the body is often simply bathed and covered in a white sheet, although some Chinese still follow the custom of clothing the body in white or traditional Chinese dress.

In the case of a child some Chinese prefer things to be kept quiet and simple, with little or no fuss. In some instances, a coffin may not be used – simply a sheet. There is no formal funeral service for a child and many Chinese do not like to mention a child who has died at all, so counselling may be difficult. Chinese families do not like to be given back any of the child’s belongings as it is considered bad luck. On the death of a child, the burial takes place at once with no special ceremony.

Muslim Chinese may object to a post mortem.
Birth customs

Often women eat a lot of root ginger before the birth, boiled with vinegar for several weeks. Eggs may be added to ‘cleanse’ one’s insides. They may eat this mixture every day for a month after delivery. When a child is born, relatives will visit and bring presents such as chicken soup, clothing, a cap and shoes for the baby, and eggs dyed red.

A Chinese woman may ask not to wash her hair for one month after the delivery of a baby. This is an important tradition and she may be unwilling to go for a shower or sit in a bath. She will take great care of her body and will not take any form of exercise.

Family planning

Generally, there are no problems with family planning although there is often a certain reserve in talking about it, and it should not be mentioned in the presence of other Chinese. Family-planning devices, sterilisation and abortion are acceptable.

Blood transfusions, transplants and organ donation

Most Chinese will agree to blood transfusion. Organ transplant can cause difficulty as traditionally the body should be buried whole, so they may be reluctant to donate organs or tissue.
Christianity was founded around 2000 years ago in the area of modern-day Israel and Palestine. It is based on the teachings of Jesus of Nazareth, known as Christ (the anointed one).

Christianity is a world-wide religion followed by people of many different cultures and backgrounds. Although Christians hold much in common, there is a wide diversity of beliefs, ethical standpoints and forms of worship among the many denominations and groups which make up the Christian Church.

The two major groups of Christians in Scotland are Protestants and Roman Catholics. Within the Protestant group there are a number of distinct denominations such as Church of Scotland, Baptist, Episcopalian, Methodist, Free Church of Scotland and many more. These have a common core of beliefs but also a number of distinctive practices.

At the centre of Christian belief is Jesus, who is regarded as the revelation of God. For many Christians this revelation is such that he is understood to be the incarnation of God. The Christian holy book is called the Bible and key Christian practices are baptism and Holy Communion, Confession, Absolution and the anointing of the sick. The relevant hospital chaplain would be able to offer these sacraments to Christians on a hospital ward. Prayer is also very important to Christians and they would appreciate some privacy for this.

Most Christians have a positive attitude towards healthcare staff and are willing to seek medical help and advice when sick.

There are no universal Christian dietary regulations.

For many Christians, family planning is an individual choice. All Christian churches uphold the sanctity of life and every effort is made to preserve life. Certain churches discourage their members from using artificial means of contraception. Roman Catholics believe that every human being has a divine right to live, and that life begins at conception, so abortion is forbidden. Abortion is also strongly condemned in some other Christian denominations.
Fasting

There are no universal Christian fasting regulations. Some Christians fast on particular days and at particular times of the year. Some Christians give up certain foods during Lent (a 40-day period between Ash Wednesday and Easter). Other Christians observe Friday as a no-meat day or may fast before receiving Holy Communion.

Death customs

Dying patients of all Christian denominations may wish the pastoral support of their own faith leader or welcome the services of the appropriate chaplain. It is important that, whenever possible, Roman Catholic patients be offered the sacrament known as the Sacrament of the Sick – this can usually be arranged by contacting your Chaplaincy Team.

If a baby is seriously ill, parents may wish to be offered a service of blessing or baptism for their baby. A chaplain or minister usually performs the service, although a member of staff may perform an emergency baptism in their absence if requested. Some Christians do not practise infant baptism and may prefer that sick or dying babies receive a blessing instead.

If a baby is still born, or a child has died, many parents will also seek a service of blessing or baptism.

Many Unitarian Christians support the right to assisted dying and may decline certain treatments or have an ‘advance directive’ in place declining some interventions.

Birth customs

There are no specific or universal Christian customs relating to birth itself, although many Christian traditions practise infant baptism. This may be significant for a new-born child who is dying, as the family may request that the baby is baptised.

Ideas of modesty and dress

There are no particular points to be noted in this area and most Christians would not object to being examined by doctors of the opposite sex.

Washing and toilet

Washing and toilet present no unusual problems for Christians.

Blood transfusions, transplants and organ donation

Most Christians do not object to blood transfusions and may receive transplants or donate organs for transplant. Jehovah’s Witnesses are an exception to this (see the relevant section for further details).
Church of Jesus Christ of Latter-day Saints

Mormon
The Church of Jesus Christ of Latter-day Saints (LDS) was founded in America in the early 19th century by Joseph Smith. The Bible and Book of Mormon are essential scriptures for Latter-day Saints.

The Church views the Holy Trinity (Father, Son and Holy Ghost) as three separate and distinct members of a united Godhead. Members believe in pre-existence: a spirit life before birth that a person has no memory of. They view life on earth as a period in which to become worthy to return to live in the presence of Jesus Christ and God.

Family unity is of central importance epitomised by a ‘sealing’ ceremony at a Temple when man and wife are sealed together for eternity. Children may be sealed to their parents. Family members, already dead, who were not members of the Church, may be baptised into the faith and sealed to their families.

The Church encourages reverence and care for the body, and so counsels against immoral practices and the use of illegal drugs.

### Attitudes to healthcare staff and illness

Most Latter-day Saints have a positive attitude towards healthcare staff and are willing to seek medical help and advice when sick.

### Ideas of modesty and dress

Some Latter-day Saints will wear special ‘endowment’ undergarments (white knee length shorts). They believe these intensely private items to be sacred and will normally wear them day and night. They may be removed by staff in an emergency following an accident but must at all times be treated with respect. Members don’t usually wear them while in hospital.

### Religious practices

The sacrament of bread and water (Latter-day Saints abstain from alcohol) equates to the Eucharist of other Christians and is performed each Sunday. Although it may be taken in hospital, it is not regarded as essential for a sick patient.

The LDS Church administers spiritual healing to the sick. At the request of a patient two members of the LDS priesthood may visit them. One would anoint them with consecrated oil and the second would place their hands on the patient’s head and offer prayer. Some privacy for this would be greatly appreciated.
**Diet**

Church members live by a health code known as the Word of Wisdom. It warns against the use of stimulants and substances that are harmful to the body and promotes healthy eating.

LDS patients will refuse tea, coffee, alcohol and tobacco. Water, milk, fruit juice, hot chocolate, Ovaltine and other such drinks normally available on hospital wards are acceptable.

**Fasting**

All Latter-day Saints who are medically fit to do so fast for 24 hours on (usually) the first Sunday of each month. Normally the fast would last from after the evening meal on Saturday until a meal on Sunday late afternoon. They are encouraged to donate the money saved from missing two meals to help the poor. Some Latter-day Saints in hospital may feel well enough to continue with the monthly fast.

**Death customs**

There are no special rituals associated with dying or death for any age group. After death, a deceased member should be washed and dressed in a shroud according to hospital protocol. An ‘endowed’ Latter-day Saint should be buried wearing special undergarments (see above) and other special clothes, and members of the Church will dress the body before burial, by arrangement with the funeral director. Generally, cremation is not encouraged, although the family of the deceased must decide on either burial or cremation.

**Blood transfusions, transplants and organ donation**

Most Latter-day Saints do not object to blood transfusions and may receive transplants or donate organs for transplantation.

**Birth customs**

There are no specific Latter-day Saint customs relating to birth itself.

**Family planning**

Although Latter-day Saints are not encouraged to use contraception, the Church does not explicitly teach that contraception is wrong and makes no doctrinal statement about it. Latter-day Saints condemn abortion on demand but permit it where there are strong medical grounds such as risk to the life or health of the mother. The Church teaches that sterilisation should only be considered where medical conditions jeopardise life or health. The husband or wife must choose what is best for their family circumstances.
Hinduism
Hinduism originated near the river Indus over 5,000 years ago, although elements of the faith are much older. The Hindu tradition has no founder and is best understood as a group of closely connected religious traditions rather than a single religion. It represents a complete way of life and is practised by over 900 million followers. Eighty per cent of the population of India is Hindu.

Hindus believe in one God and worship that one God under many manifestations, deities or images. Examples of Hindu deities are Krishna, Shiva, Rama and Durga.

Hindus believe that existence is a cycle of birth, death and rebirth, governed by karma (a complex belief in cause and effect). Hindus believe that all prayers addressed to any form or manifestation will ultimately reach the one God. Hinduism does not prescribe particular dogmas; rather it asks individuals to worship God according to their own belief. It therefore allows a great deal of freedom in matters of faith and worship.

### Attitudes to healthcare staff and illness

Most Hindu patients have a positive attitude towards healthcare staff and are willing to seek medical help and advice when sick. Many Hindu patients may be using Ayurvedic medicine and, as this may involve the use of herbal remedies, it is important to find out.

Avoid unnecessary use of the left hand with Hindu patients as this hand is regarded as unclean.

### Religious practices

Many Hindus will make use of a shrine which can include figures of Hindu gods and it may be helpful to facilitate a space for a shrine. Hindus will usually wish to pray twice daily. Where possible they will burn incense and use holy books and prayer beads. Privacy would be appreciated for prayer times.

### Ideas of modesty and dress

A Hindu woman will much prefer a female doctor when being examined or treated. Hindu women should only be accommodated in mixed wards in emergencies. A Hindu woman may find it difficult to accept an X-ray gown because it is short. Jewellery may have religious significance and Hindu women may wear bangles or a thread and you should not remove them without permission. Some Hindus wear a red spot on their foreheads or scalp, which again should not be removed or washed off without permission.
**Diet**

Most Hindus are vegetarian. Most do not eat pork or beef (the cow is viewed as a sacred animal). Some Hindus will eat eggs, some will not, and some will also refuse onion or garlic; it is best to ask each individual. Dairy produce is acceptable so long as it is free of animal rennet, so for example the only cheese some Hindus will eat may be cottage cheese.

It is important to remember that strict vegetarians will be unhappy about eating vegetarian items if they are served from the same plate or with the same utensils as meat.

**Fasting**

Fasting is a regular feature of the Hindu religion, but few Hindus insist on fasting in hospital. Fasting is commonly practised on new moon days and during festivals such as Shivaratri, Saraswati Puja and Durga Puja. Some fasts may only require abstinence from certain foods. At the end of each period of fasting, visitors may bring in ‘prasad’[^4] so that the patient can join in the celebration.

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[^4]: Food that has been blessed

**Washing and toilet**

Hindus will require water for washing in the same room as the toilet itself. If there is no tap there, or if they have to use a bed-pan, they will be grateful to have a container of water provided. Hindu patients prefer to wash in free-flowing water, rather than sit in a bath. As Indian food is eaten using the fingers, hand washing before and after meals is customary.

**Death customs**

If possible, a Hindu should be allowed to die at home. If a Hindu patient is dying in hospital, relatives may wish to bring money and clothes for him or her to touch before they are given to the needy. They will wish to keep a bedside vigil – if the visitors are not allowed to go to the bedside themselves, they will be grateful if a nurse can do this for them while they wait. Some relatives will welcome an opportunity to sit with the dying patient and read from a holy book.

After death the body should always be left covered. Sacred objects should not be removed. Relatives will wish to wash the body and put on new clothes before taking it from the hospital. Traditionally the eldest son of the deceased should take a leading part in this, however young he may be.

If a post-mortem is unavoidable, Hindus will wish all organs to be returned to the body before cremation (or burial for children under five years old).
Birth customs

Some Hindus consider it crucial to record the time of birth (to the minute) so that a Hindu priest can cast the child’s horoscope accurately.

A Jatakarma ceremony welcomes the birth of a baby when the father places a small amount of honey on the baby’s tongue, whispers the name of God in their right ear and chants mantras.

If there is a need to separate mother and baby for any reason this should be done tactfully as she may prefer to keep the baby with her at all times.

Relatives will want to make sure the mother has complete rest for 40 days after birth and they will be worried if she has to get up for a bath within the first few days. This attitude is based on the belief that a woman is at her weakest at this time and is very susceptible to chills, backache etc.

Family planning

There is no objection to family planning from the religious point of view. However, there may be strong social pressures on women to go on having babies, particularly if no son has yet been born, and you should involve her husband in any discussion of family planning.

Blood transfusions, transplants and organ donation

Most Hindus have no objection to blood transfusions and may receive transplants or donate organs for transplant.
Humanism
Although humanism is not a faith, it does provide a moral framework for a life free from superstition and supernatural beliefs. Humanism rejects any notions of a life after death, believing that a person has only one life, and so humanists try to make it as worthwhile and happy as possible for everyone.

Humanists are atheists, agnostics or sceptics who either reject or at least robustly question the idea of any god or other power beyond the physical world. However, humanism is more than just a simple denial of religious belief. Humanists base their moral principles on a rational approach to life, underpinned by shared human values and respect for others, with the aim of improving the quality of life, making it more equitable for all. Humanism focuses on human beings and offers an ethical approach to life, a belief in people’s ability to solve problems, recognising that much of what happens in our world is what people cause to happen. To this end, humanists try to cooperate with people of all faiths to achieve the shared aims of a caring society, although they condemn religious adherence that harms or disadvantages others.

Humanists assert that morality comes from our ability to see that there is general benefit when we behave well towards each other; an ability that is enhanced by personal responsibility, a caring and principled upbringing and education that always insists that we treat others with consideration and unselfishness. Human rights law is important to all humanist organisations throughout the world and they endorse the principles of humanitarian ideals that are enshrined in all such declarations, covenants and conventions as well as the universal initiatives promoted by the United Nations for the peaceful co-habitation of all the world’s populations.

### Attitudes to healthcare staff and illness

Humanists have a positive attitude towards healthcare staff and are comfortable seeking medical help and advice when sick.

### Religious practices

Not relevant. However, registered humanist celebrants conduct non-religious ceremonies to observe rites of passage—for birth, marriage and death.

### Washing and toilet

No particular requirements.

### Ideas of modesty and dress

No particular requirements.

### Diet

No particular requirements. Some humanists are vegetarian or vegan, and many who eat meat will refuse it if it has been slaughtered in a way they consider inhumane.
Fasting
There is no obligation for humanists to fast.

Birth customs
No particular requirements.

Death customs
Many Humanists will have a living will or advance directive. Humanists favour cremation or green burials and would want a humanist funeral. Many humanists endorse ‘death with dignity’ and would therefore favour legal voluntary euthanasia (with appropriate safeguards) for adults. Some may refuse treatment they regard as simply prolonging suffering.

Some Humanists may appreciate the support of a fellow Humanist or secular counsellor.

Humanists may strongly resent the offer of prayer or discussion about faith or an afterlife.

Family planning
Humanists have always been strong advocates of birth control and for the right to choose in relation to abortion.

Blood transfusions, transplants and organ donation
Most humanists have no objection to blood transfusions and may receive transplants or donate organs for transplantation.
Islam
Islam is a world religion that originated in the Middle East in the seventh century CE. It is practised by about a fifth of the world’s population. Muslims believe there is only one God (Allah) and that Muhammad is his prophet.

Although Muslims revere Muhammad they do not worship him. Islam views the Biblical Patriarchs as Prophets and sees itself as a continuation and renewal of Judaism and Christianity. Islam’s sacred texts include the Qur’an (the key source), the Gospels and the Hebrew Bible.

Muslims believe that everything and everyone depends on Allah. All Muslims of whatever race are members of one community known as the ummah. Muslims are guided to follow Allah’s will by obeying their holy book, the Qur’an, and also by following the example set by Muhammad.

Every Muslim must perform duties known as the ‘five pillars of Islam’.  

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**The Five Pillars of Islam:**

- To recite a specific verse—their declaration of faith (Shahadah)
- To offer five specific prayers daily (Salat)
- To give two-and-a-half per cent of their savings once a year to the poor (Zakat)
- To undertake a pilgrimage to Mecca, if they can afford to, once in a lifetime (Hajj)
- To fast during the month of Ramadan (Sawm)

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**Ideas of modesty and dress**

In Islam the free mixing of sexes is prohibited and there should be no physical contact between a woman and any man except her husband. Generally, a Muslim woman is not allowed to be examined or surrounded by male members of medical staff. It is always preferable that a female member of the medical staff is present. In certain cases, a Muslim woman may not agree to be examined or treated at all by a male staff member.

A Muslim woman may find it difficult to accept an X-ray gown because it is short. Many Muslim women wear a headscarf when out in public (the hijab) and some Muslim women will also choose to be fully covered with only their eyes and hands showing (burka). You should show sensitivity to the needs of Muslim women to dress appropriately.

Muslims should only be accommodated in mixed wards in emergencies.

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**Family planning**

Strictly speaking an orthodox Muslim would not approve of family-planning devices. In practice individuals vary widely in their attitudes. Information about facilities should be given, but no pressure exerted. Any discussion should be in strict confidence, and never in front of visiting relatives or friends.
Washing and toilet

Muslims attach great importance to cleanliness. They must have running water (from a tap or poured from a jug) in toilets, as they consider toilet paper inadequate. If a bedpan is used a container of clean water should accompany it. Muslims prefer to wash in free-flowing water, and cannot accept the idea of a bath. After menstruation women must wash their whole bodies.

It is regarded as unclean to eat or perform religious ceremonies using the same hand that is used for toileting purposes.

Religious practices

One of the most important religious practices for Muslims is five daily prayers (Salat). The times are broadly as follows: dawn (Fajar), just after noon (Zuhur), afternoon/evening (Asr), following sunset (Maghrib), night time (Isha).

Muslims welcome privacy/a quiet space during prayer times, and they must face the Qibla (the sacred direction), the direction of the Kaaba shrine in Mecca (south-south east in the UK). Ablution (if possible using free flowing water) before each prayer is necessary. They wash their hands, face, arms and feet, cleanse their mouth, nostrils and ears, and run wet hands through the hair—each of these three times. Muslims will also wash before eating, and the Muslim holy day is Friday.

Death customs

A dying Muslim will wish to lie on their right-side facing Mecca. Familiar people can give comfort by reading to the patient verses from the Qur’an. Where possible, a dying person will repeat a declaration of faith (the Shahada) as their last utterance.

It is an important religious duty to visit the sick and dying, so a large number of visitors may arrive at all hours. It is customary among Pakistanis and Arabs to express their emotion freely when a relative dies. Whenever possible you should give them privacy to do so, whilst explaining the need to avoid disturbing other patients by their mourning.

It is usual for the next of kin to want to ritually wash and wrap the body in a white shroud before burial. If there are no relatives available to do this, staff should wear gloves when washing the body. The eyes should be closed and the lower jaw gently bound with cloth to the top of the head. The deceased is laid out with their arms placed straight down the side of the body.

In Islam the body must be buried as quickly as possible, preferably within 24 hours (cremation is forbidden). A post mortem must be avoided if legally possible, as this is not allowed and causes considerable distress; organs should all be buried with the body.

Should a baby die at or after four months of pregnancy or soon after birth, he or she will be named, washed, shrouded and buried in the usual manner. If the foetus dies before four months of pregnancy, then it should be wrapped in a clean cloth and buried.
Blood transfusions, transplants and organ donation

There are no particular issues relating to blood transfusions, but although organ donation has been permitted it is a complicated issue for Muslims and will often be met with reluctance. The decision would lie with the individual and their family in consultation with their local religious leader.

Birth customs

Some Muslim women will refuse to be examined internally before giving birth and may be reluctant to be attended by a male obstetrician unless in an emergency. When a Muslim child is born, as soon as possible a member of the family must recite in the baby’s ear a prayer that normally lasts a minute or two (Azaan). A Muslim boy must be circumcised as soon as possible. It is not a religious requirement for girls to be circumcised.

Diet

Muslims will eat only permitted food (halal) and will not eat or drink anything that is considered forbidden (haram). Halal food requires that Allah’s name is invoked at the time the animal is killed. Lamb, beef, goat and chicken, for example, are halal as long as a Muslim kills them and offers a prayer. Fish and eggs are also halal but they must be kept strictly separate from meat during preparation. All products from pork, carrion and blood and all types of alcohol are forbidden.

In the UK, Muslims buy their meat from a Muslim butcher whenever possible. A Muslim does not eat generally available meat or food that contains animal fats, in case it contains pork fat or fat from other animals not ritually slaughtered. When away from home many Muslims will follow a vegetarian diet unless absolutely sure that all food is halal.

Fasting

Muslims fast during the month of Ramadan (the date varies each year). At this time Muslims will not eat or drink between dawn and sunset. The sick, infirm or very old need not fast. Fasting is also excused during menstruation, for 40 days after childbirth, while breastfeeding or during a long journey. However, some Muslims will choose to fast even if ill and you should try to accommodate this. This means providing adequate and acceptable meals during the hours of darkness and, wherever possible, adjusting medication to fit in with the fast. If the doctor says a patient should eat and drink more, you should explain to the patient that this is part of the medicine to assist recovery. It is important to recognise that a decision to fast is based on different priorities, not on ignorance or being uncooperative.

Attitudes to healthcare staff and illness

Most Muslim patients have a positive attitude towards healthcare staff and are willing to seek medical help and advice when sick.
Jehovah’s Witnesses
Charles Taze Russell founded the Jehovah’s Witnesses in 1872, although it did not become known officially as such until 1931.

Jehovah’s Witnesses view themselves as Christian and regard Jesus Christ as the Son of God, but not in the sense of being equal with God or one with God.

Jehovah’s Witnesses consider their religion to be a restoration of original first-century Christianity. They accept both the Old and New Testaments of the Bible as inspired by God. They do not, however, use the symbol of the cross because they believe it to be of Pagan origin.

Jehovah’s Witnesses refuse blood transfusions and take a non-negotiable stance on this matter.

Attitudes to healthcare staff and illness
Most Jehovah’s Witnesses have a positive attitude towards healthcare staff and are willing to seek medical help and advice when sick. They may be keen to make sure that medical staff are aware they would reject blood transfusions.

Religious practices
There are no specific religious practices that would affect a Jehovah’s Witness while in hospital.

Diet
Jehovah’s Witnesses reject foods containing blood but have no other special dietary requirements. Some Jehovah’s Witnesses may be vegetarian, and others may abstain from alcohol, but this is a personal choice. Jehovah’s Witnesses do not smoke or use other tobacco products.

Washing and toilet
Washing and toilet present no unusual problems for Jehovah’s Witnesses.

Death customs
Jehovah’s Witnesses do not have special rituals for the sick or the dying. You should make every reasonable effort to provide medical assistance and comfort. Spiritual care will be provided by local Witnesses (friends, family and elders).

Ideas of modesty and dress
There are no particular points to be noted in this area.

Fasting
Jehovah’s Witnesses are not required to fast for religious reasons but must not consume blood (for example in blood sausage or in animal meat if the blood has not been properly drained).

Birth customs
There are no specific Jehovah’s Witness customs relating to birth itself.
Family planning

Jehovah’s Witnesses believe that the Bible is the inspired word of God or Jehovah. As the Bible does not directly discuss birth control, birth control is seen as a personal decision and is left to the individual’s conscience. Jehovah’s Witnesses believe that human life begins at conception and do not therefore approve of abortion. If the termination of a pregnancy is the only means of saving a mother’s life, the choice is up to each individual. Witnesses are strictly politically neutral and do not get involved in any debates or demonstrations on this issue.

Blood transfusions, transplants and organ donation

Jehovah’s Witnesses carry on their person an advance medical directive/release that states they must not receive blood transfusions under any circumstances, while releasing medical practitioners and hospitals from responsibility for any damage that may be caused by their refusal of blood. When entering the hospital, they should sign consent/release forms that reiterate this and specify the hospital care needed. Jehovah’s Witnesses’ religious principles do not absolutely prohibit the use of minor blood components such as albumin, immunoglobulins and haemophiliac preparations. Each Witness must decide individually whether he or she can accept these.

While forbidden to take blood, Jehovah’s Witnesses are not specifically forbidden to take in tissue or bone from another human. Jehovah’s Witnesses currently accept organ transplants, although any surgery would have to be performed on a bloodless basis. Some Jehovah’s Witnesses may not wish to donate their organs because someone else’s blood would then flow through them. In the case of organs that do not involve blood flow, for example corneas, they would have no religious grounds to object to donation. Therefore, whether to accept an organ transplant or donate organs is a personal decision.
Judaism
Ideas of modesty and dress
For the older generations and more Orthodox Jews, one usually exposes the body only in the privacy of the home and to a spouse. A Jewish woman may be reluctant to have any intimate physical examination, especially during menstruation. Women will probably wish to keep their arms and their legs above the knee covered at all times, or expose only those parts of their body that are to be examined.

For Orthodox patients, wherever possible the examiner should be of the same sex as the patient. However, if the only person available to do an examination is of the opposite sex, this is acceptable as a last resort. Both sexes may wish to keep their hair covered (Orthodox Jewish women may wear a wig, hat, scarf or snood and Orthodox Jewish men a skull cap called a yarmulke, kipah or kappel). If the examination is to include the head, then discuss the removal of head coverings sensitively, and where appropriate offer an alternative (a theatre cap, for example).

Birth customs
After birth, 40 days of rest is required for the mother by custom. If a baby boy is still in hospital by the 8th day the family may request the ritual of circumcision to be performed by a trained and medically certified religious functionary (although this must be delayed for a premature or unhealthy baby). A small room may be requested, and others of the family will attend. Traditionally, a baby boy’s name is kept secret until the circumcision. Traditionally a baby girl is named in the synagogue, often on the Sabbath following the birth.
Death customs

There are specific Jewish laws and customs for dealing with the dead. It is important to contact the family and the appropriate Burial Society/Committee as soon as possible. No mutilation of the body is allowed unless there is a legal requirement for a post mortem.

Jewish law forbids Jews to do anything to hasten a person’s death and at the same time requires everything possible to be done to comfort the dying. Some Jews would not touch a dying person for fear that the slightest touch might hasten their death, so the range of what you can or cannot do for a dying person may vary and you should consult a trusted rabbi acceptable to the family.

When a Jewish person dies, the following guidelines apply:

- Do not touch the body until 20 minutes after death. Some might place a feather over the mouth and nose and watch for signs of breathing.
- Do not wash the body (clean crevices if required to preserve the dignity of the deceased). Washing the body is part of Jewish ritual performed by the Burial Society/Committee whose members undertake to wash and shroud the dead and to sit with them until burial takes place.
- Do not remove false teeth or other prostheses.
- Close the eyes (a relative may want to do this). The mouth is held in position by placing a cloth under the chin and tying it above the head.
- Straighten the body out, laying it flat with the feet together and arms by the side, hands open.
- All external catheters and medical equipment attached to the body should be removed. All incisions etc should be dressed.
- Cover the body with a plain white sheet without emblems.

• All external catheters and medical equipment attached to the body should be removed. All incisions etc should be dressed.

Some families will want to ensure that someone from the Jewish community remains to sit with the body. Psalms may be recited during this time. While Orthodox Jews are buried, not cremated, Reform and Liberal Jews may choose either method of disposal of the body. Immediately after death, close relatives may make a tear in one of their garments.

If a child dies, the body should be treated in the same way as an adult. Jewish law requires the burial of miscarried foetuses, which should be delivered to the family or Burial Society Committee.

Attitudes to healthcare staff and illness

Most Jewish patients have a positive attitude towards healthcare staff and are willing to seek medical help and advice when sick.
**Religious practices**

One of the most important Jewish practices is Sabbath observance. The Jewish Sabbath (Shabbat) begins at dusk on Friday and ends with full darkness on Saturday night, a period of approximately 25 hours. It is a day of rest and begins and ends with ceremonies in the home. Before dusk on Friday candles are lit, and a prayer of blessing is said over wine and bread before a festive meal. After dark on Saturday night, a prayer of farewell is said over a candle, wine and spices. If at all possible, you should make arrangements to enable Jewish patients to observe these rituals.

On the Sabbath creative work is prohibited, and this includes things such as travelling. If you are arranging travel for a Friday discharge, make sure you leave adequate time for all discharge procedures, such as collecting prescriptions, so that the patient has enough time to get home before dusk. Similarly, some Jews will not travel to hospital for admission on the Sabbath except in an emergency, and if discharged on a Sabbath will wait in hospital until nightfall before travelling home.

Many Jews pray three times a day in the morning, afternoon and evening, and would appreciate privacy for this. Men will wrap themselves in a prayer shawl, and during weekday morning prayers will wear phylacteries (leather boxes containing scriptural passages) strapped to their head and arm. Any room or area provided for prayer should be clean and contain no religious items on display which may offend or distract them in their act of worship. It would be helpful to indicate which way is east.

Many Jews will wash and say a brief blessing before eating.

**Family planning**

Contraception is not banned in the Jewish religion, but there are guidelines that need to be followed as to when and how it is appropriate. Couples may wish to consult their chosen rabbi, together with guidance from medical staff, before making a decision.

Jews believe that until the head of a baby has left the womb of its mother, it does not gain full status as a living person. This means that where the mother may die if the pregnancy continues, Jewish law permits a therapeutic abortion to save the life of the mother at the expense of the child. In cases of rape or where the mental health of the mother is at risk if the pregnancy continues, the mother may wish to discuss the medical advice with her rabbi before making a decision.

**Blood transfusions, transplants and organ donation**

Jewish law approves of blood transfusion in order to achieve the desired medical outcomes. Jewish law permits organ donation from dead bodies where there is a high chance of success for the specific recipient. Relatives of a potential donor will wish to consult an appropriate rabbi before making a decision, and this should obviously be facilitated.
Diet

Judaism lays down strict guidelines concerning some aspects of their diet. Acceptable food is called kosher. Continuing to eat a kosher diet while in hospital or on a medically restricted diet poses a major problem for Jewish people. However, as there is a wide range of religious practice by Jewish people, observance of the dietary laws will vary from patient to patient and patients should be consulted about their level of dietary observance.

It is important that staff ensure that Jewish patients are given meals bearing the word kosher. Religious Jews will not wish to use hospital crockery and should be served the Kosher meal in its original wrapping, together with plastic cutlery. If help is required to open the container, it should be done in full view of the patient.

Milk should not be offered to Jewish patients along with a meal of meat or chicken. Most Jews observe a period of at least three hours before having milk or products that contain milk. Simple items like jelly or yoghurts can be a problem for Jewish patients as they can contain gelatine, which is of animal derivation. Since most cheese contains rennet, cheese must display a rabbinical seal of approval. Many Jews will not eat cheese which is described as vegetarian. While most Jews will take regular milk, some religious Jews will only use supervised milk. Fish without scales or fins are also forbidden.

The Festival of Passover, which occurs in the spring, is a time when there are additional dietary stringencies and food is strictly ‘unleavened’. The label on the kosher hospital meals must indicate that they are specifically approved for Passover. In particular, no leavened bread or cakes are permitted, and instead, unleavened bread called matzah is eaten. At this time, Jewish patients may wish to eat and drink only products approved for Passover. They may require to store food in their locker or in a refrigerator. Some patients may only take food and drink brought in by relatives and every effort should be made to accommodate them.

Washing and toilet

On waking, orthodox Jews will want to wash their hands as they may not eat or drink before doing so. A brief blessing is recited before eating any food, and Orthodox Jews will want to wash before eating bread. Some Orthodox Jews do not bathe or shower during major festivals or Shabbat and some men prefer to be bearded or will only use an electric razor (a modern circumvention of a ruling against shaving).

Spiritual Care
Fasting

Yom Kippur (late September/early October) is the most important holy day of the year for most Jews. Many Jews who do not observe any other Jewish custom will fast during Yom Kippur. It is a 25-hour fast beginning before sunset on the evening before and ending after nightfall.

These restrictions can be lifted where a threat to life or health is involved. Children under the age of nine and women in childbirth (from the time labour begins until three days after birth) are not permitted to fast, even if they want to. Older children and women from the third to the seventh day after childbirth are permitted to fast but are allowed to break the fast if they feel the need to do so. People with other illnesses would consult a physician and rabbi for advice.

There are five further fasts, four of them minor, that last from dawn to nightfall, and a person is permitted to eat breakfast if up before sunrise. There is a great deal of leniency in the minor fasts for people who have medical conditions or other difficulties with fasting. The fifth fast is Tisha B’Av, a fast that takes place in July or August and begins in the evening at sunset and finishes at nightfall.
Paganism
Paganism has its roots in the indigenous, pre-Christian religions of Europe and derives its meaning from the Latin “paganus” (country dweller) and “pagus” (the land). The name referred to a follower of the ‘old religion’ or ‘earth spirituality’. Its re-emergence in Scotland parallels that in other western countries, where it has been growing rapidly since the 1950s. Neo-paganism covers a wide range of beliefs including Wicca, Druidry, Odinism and Witchcraft. Pagans practice a life-affirming, earth-respecting and nature orientated belief path.

The social infrastructure of Paganism reflects the value the Pagan community places on unity in diversity; it consists of a network of inter-related traditions and local groups served by several larger organisations. In Scotland the Pagan Federation acts as an educational and representative body.

Pagans understand the divine to be manifest within nature and recognise divinity as taking many forms, finding expression in goddesses as well as gods, with goddess worship being a central aspect in Paganism and the earth itself being the primary Goddess. Pagans believe that nature is sacred and that the natural cycles of birth, growth and death observed in the world around us carry profoundly spiritual meanings. Human beings are seen as part of nature, along with other animals, trees, stones, plants and everything else that is of this earth. Most Pagans believe in some form of reincarnation, viewing death as a transition within a continuing process of existence.

**Attitudes to healthcare staff and illness**

Most Pagans have a positive attitude towards healthcare staff and are willing to seek medical help and advice when sick.

**Washing and toilet**

Washing and toilet present no unusual problems for Pagans.

**Ideas of modesty and dress**

There are no particular points to be noted in this area and few Pagans would object to being examined by doctors of the opposite sex.

**Fasting**

There are no organised fast days, but some Pagans choose to fast in preparation for Ostara (Spring Equinox).

**Diet**

For ethical reasons, most Pagans strongly prefer foods derived from organic farming and free range livestock rearing, while many are vegetarian or vegan.
Religious practices

Most Pagans worship the old pre-Christian gods and goddesses through seasonal festivals and other ceremonies. The seasonal festivals are known as the Wheel of the Year.

Observance of these festivals is very important to Pagans, and those in hospital will generally wish to celebrate them in some form. Some Pagans may wish to have a small white candle or a small figure of a goddess on their locker. Ritual jewellery is very common and may have deep personal religious significance. In some traditions the wearing of a ring, which symbolises the person’s adherence to Paganism or a particular Pagan path, is common. The removal of such a ring may cause considerable distress.

As there are many diverse traditions within Paganism, you should ask individual patients if they have any special requirements. Most Pagans will be offended if their faith is recorded ‘none’.

Wheel of the Year events:
- Samhain (Oct 31)
- Midwinter/Yule (Dec 21)
- Imbolc (Feb 2)
- Spring Equinox/Ostara (Mar 21)
- Beltane (Apr 30–May 1)
- Midsummer (Jun 21)
- Laghnasadh/Lammas (Aug 1)
- Autumn Equinox (Sep 21)

Birth customs

As Paganism celebrates life, birth is viewed as sacred and empowering. Pagan women will wish to make their own informed decisions regarding prenatal and neonatal care.

Death customs

Most Pagans believe in some form of reincarnation, viewing death as a transition within a continuing process of existence. Pagans accept death as a natural part of life and will wish to know when they are dying so that they may consciously prepare for it. Most Pagans would not welcome prayer at the bedside at the time of death.

Blood transfusions, transplants and organ donation

Most Pagans would have no objection to blood transfusions and may receive transplants or donate organs for transplant.

Family planning

Pagans will generally plan pregnancies and use contraception as appropriate. Paganism emphasises women’s control over their own bodies, and the weighty decisions relating to abortion are seen as a personal matter for the woman concerned, who will be supported in the choices she makes.
Sikhism
The Sikh faith is a distinct religion revealed through the teachings of ten Gurus (messengers of God), the first of whom was Guru Nanak Dev Ji who was born in 1469 CE\(^6\) in the Punjab, India. In 1708 the tenth and the last human Guru, Guru Gobind Singh Ji, vested spiritual authority in the Holy Sikh Scriptures (Guru Granth Sahib Ji) and temporal authority in the community of baptised Sikhs (Khalsa Panth).

Sikhs strictly believe that there is one god, who is both transcendent and immanent (present in all things and everyone). Although above human comprehension, God can be realised and experienced through prayer, contemplation and service. The object of a Sikh’s life is to develop consciousness of God and to receive God’s grace through truthful living and selfless service in the context of a family life. Sikhs seek the equality of all people regardless of caste, colour, creed or sex.

A Sikh’s way of life is guided by the following principles; remembering and praying to God at all times, earning a living by honest means, sharing with the poor and needy, selfless service to God and His Creation, treating all human beings as equal.

Sikhs who choose to go through the initiation rite of baptism wear five articles of faith, commonly known as the ‘Five Ks’. Each of these articles have deep spiritual and moral significance, forming part of the Sikh Code of Ethics and Discipline. The articles of faith must not be removed.

Sikhism is a very community oriented faith with a deeply devotional, poetic base, combined with a strong emphasis on service and social action within the community.

A Sikh is likely to have a personal name (common to both sexes), a middle name (‘Singh’ for all males and ‘Kaur’ for all females), followed by a family name. Sikhs may use the term Sikhi, rather than Sikhism, to describe their faith.

\(^6\) Common Era

**The ‘Five Ks’:**
- **Kesh:** uncut hair—symbolising the importance of living in harmony with nature
- **Kangha:** a small wooden comb—to manage their hair and symbolising the importance of controlling one’s thoughts
- **Kara:** an iron/steel bangle—as a reminder to do good deeds
- **Kirpan:** a short sword—as a reminder to fight for justice
- **Kacchera:** special shorts—to maintain modesty

**Attitudes to healthcare staff and illness**

Most Sikhs have a positive attitude towards healthcare staff and are willing to seek medical help and advice when sick.
Religious practices
Sikhs pray in the early morning, at sunset, and before bed. They are also expected to recite hymns whenever they have time in the day. Some privacy for prayers will be appreciated.
Although not one of the Five K’s, the dastaar (turban) is often worn to maintain the sanctity of the hair and is treated with utmost respect.

Washing and toilet
Sikhs prefer to wash in free-flowing water, rather than sitting in a bath; and they will appreciate having water provided in the same room as the toilet, or with a bedpan when they have to use one. Sikhs will want to wash their hands and rinse their mouth before meals. The uncut hair is kept clean and neat by washing regularly and combing, normally twice a day. If the patient is not well enough, nursing staff may assist in washing and combing, and such help will be welcome.

Ideas of modesty and dress
Some Sikh women would prefer a female doctor when being examined or treated. Sikh women should only be accommodated in mixed wards in emergencies. A Sikh woman may find it difficult to accept an X-ray gown because it is short.
As mentioned above, ideally the five articles of the Sikh faith should not be removed. If the Kacchera (shorts) need to be removed they should be replaced by another pair. The patient should be consulted on the method of removal and replacement.
Baptised Sikh men always have their uncut hair in a turban, and baptised Sikh women will also cover their hair. You should be particularly sensitive about removing the turban, as it is worn to maintain the sanctity of Kesh (hair) and is treated with the utmost respect. Sikh women wear a long Punjabi scarf (chunni) for the same purpose.

Birth customs
The birth of a baby is a happy occasion. The baby may not be named for several days as the initial for the name is obtained from the Guru Granth Sahib Ji (the Sikh Scriptures). The family may also have Amrit (holy water) placed on the tongue by a family member or baptised Sikh.

Blood transfusions, transplants and organ donation
Most Sikhs would have no objection to blood transfusions and may receive transplants or donate organs for transplantation. However, with regard to transplants, especially the donation of organs, the decision rests with the individual or their family, or both. In the absence of close relatives, a medical officer in charge may take whatever action he or she considers necessary to save the patient’s life.
**Diet**

Practising Sikhs will refrain from alcohol, tobacco and other intoxicants. The use of tobacco or alcohol in any form is strictly forbidden to Sikhs who have taken Amrit (are baptised).

Many baptised Sikhs are vegetarians. They will exclude eggs, fish and any ingredients with animal derivatives or cooked in animal fat from their diet. Dairy produce is acceptable providing it is free from animal fat e.g. cheese made from non-animal rennet. It is essential to avoid contamination with meat at all stages of preparation, storage and serving. Some Sikhs will only eat food prepared by their own families. Non-vegetarian Sikhs will only eat meat that has been slaughtered according to their own rites (jhatka) and not halal or kosher rites.

**Fasting**

Sikhs do not fast.

**Death customs**

In the final stages of illness a Sikh patient will be comforted by reciting hymns from the Sikh Holy Scriptures. A Giani (priest) from the local Gurudwara (Sikh place of worship) or another practising Sikh may do this with the patient. The family will normally be present.

Nursing staff must ensure that none of the five articles of faith on the body of a Sikh is disturbed. It is also important not to trim the hair or beard, and the hair on the head should be kept covered. After death, the eyes and mouth should be closed, and limbs straightened with arms placed straight beside the body and the body should be covered with a plain white sheet or shroud. Typically the body will be washed and dressed in clean clothes by members of the family.

Most Sikhs are cremated as soon as possible after death although babies who are stillborn or die around the time of birth may be buried. The body of a stillborn baby should be given to the parents to perform the funeral rites. The child should simply be wrapped in a plain white sheet to await the arrival of a relative who will perform the Last Offices.

Sikhs do not like the idea of a post mortem but will accept it if it is legally unavoidable.
Appendices
Sources

The sources listed below have been used in preparing this document and may be of further interest.

**BBC Religion**
https://www.bbc.co.uk/religion/religions

**Essex Cancer Network: Catching the concept of spiritual care**

**Greater Manchester Mental Health NHS: Respecting the Religious and Cultural needs of patients**
https://www.gmmh.nhs.uk/download.cfm?doc=docm93jjjm4n901

**Interfaith Scotland: A Guide to Faith Communities in Scotland**

**The Mental Health Foundation: Executive Briefing—Spirituality and Mental Health**
https://www.mentalhealth.org.uk/sites/default/files/spirituality_mental_health_briefing.pdf

**Merseyside and Cheshire Cancer Network: Opening the Spiritual Gate**
https://www.openingthespiritualgate.net/all-faiths

**Religion Media Centre—Fact Sheets (various)**
https://religionmediacentre.org.uk/factsheets

**West Lothian Faith Group: Faith Handbook (Updated 2017)**
Thanks

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- Baptist Union of Scotland
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- Church of Scotland
- Confucius Institute for Scotland
- Kagyu Samyeling Ling Tibetan Monastery, Langholm
- Interfaith Scotland
- International Society for Krishna Consciousness
- Methodist Church in Scotland
- Muslim Council of Scotland
- NHS Fife Spiritual Care
- NHS Lothian Spiritual Care
- NHS Orkney Spiritual Care
- OneSpirit Interfaith Foundation
- Quakers
- Salvation Army
- Scottish Council of Jewish Communities
- Scottish Unitarian Association
- Sikh Council of Scotland