A guide to cultural and spiritual awareness
Contents

3 African/Caribbean
3 Asian
5 Chinese
5 Travellers
7 Buddhism
7 Christianity
9 Hinduism
10 Islam
11 Judaism
13 Sikhism
13 Baha’i
14 Christian Science
14 Jehovah’s Witnesses
15 Mormons
15 Rastafarianism
16 Seventh Day Adventists
17 Other faiths
18 Contacts

Written by Jean Serge Mootoo
BSc(Hons), CertED, FAECT,
MIVA, CertHSM, RGN, RMN,
RNLD, professional and
vocational development
teacher at Somerset Academy,
East Somerset NHS Trust

© Copyright RCN Publishing Company Ltd 2005.
All rights reserved. No part of this book may be
reproduced, stored in a retrieval system, or trans-
mitted in any form or by any means, electronic,
mechanical, photocopying, recording or otherwise,
without prior permission of the publisher.

Nursing Standard
The Heights, 59-65 Lowlands Road,
Harrow, Middlesex HA1 3AE
To subscribe call 08457726 100
www.nursing-standard.co.uk
NSEG CUL
Cover picture by Corbis
Given the immense diversity between different cultures and religions, this guide can only offer general useful advice. Please refer to the list of contacts on page 18 to find further information.

AFRICAN/CARIBBEAN

The term African/Caribbean is used here to include people of African and Caribbean origin (for example, from Nigeria, Gambia, Uganda, Jamaica, Trinidad, Tobago, St Lucia, Grenada or the Bahamas). Some cultural and traditional patterns are likely to be common among those with roots in Africa and the Caribbean islands, but it is important that patients are consulted individually about how they wish to be referred to.

Religion
Religious days are important in the lives of many African/Caribbean people; religions include Christianity, Islam and Rastafarian, among others, and ritual practices vary widely.

Modesty
Patients are likely to have a strong preference for a doctor or nurse of the same sex when being examined or treated.

Clinical procedures
Blood transfusion There is no religious objection to receiving blood (except for Jehovah’s Witnesses or Rastafarians).
Organ transplantation There is not usually religious objection to the reception of a transplanted organ, but those with belief in the sanctity of the body are unlikely to agree to organ donation.

Death and dying
At death, religious differences are likely to be minimal, and cultural identity is of paramount importance. Burial is preferred; funeral and mourning customs vary depending on culture or religious belief. It is customary among some African/Caribbean cultures to express emotions freely when a relative dies; privacy should be given whenever possible.

Post-mortem Older members of the community may believe the body must be intact for the afterlife and will be deeply offended by its disfigurement. They are unlikely to give consent for post-mortems except for coroner’s cases.

ASIAN – Indian Subcontinent

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

Religion
Bangladeshis – majority Islam, some Hindus.
Indians – majority Hindus, Sikhs and some Muslims; also Christians.
Pakistanis – majority Islam.

Diet
Neither Hindus nor Muslims will eat anything that has come into contact with forbidden food or utensils (see specific religions).

Personal care
Hygiene/cleanliness Handwashing is considered essential before and after eating. Water for washing is needed in the same room as the toilet, so patients should be provided with bowls, jugs of water or a bidet. Asian patients prefer to wash in free-flowing water, as baths are considered unhygienic. If a shower is not available, the patient may like a jug to use in the bath.
Modesty
Asian patients, particularly women, are likely to have a strong preference for a doctor of the same sex when being examined or treated. Sensitivity and care are needed in situations that may cause the patient embarrassment, for example, wearing a gown that the patient may consider too short. In some Asian cultures, direct eye contact is avoided, particularly with the opposite sex.

Family planning
There is no objection to family planning from a religious point of view. It is acceptable to ask the patient whether she wishes to involve her husband or any other family member in the discussion. Orthodox Muslims may refuse family planning.

Death
People from some Asian cultures may express their emotions freely when a relatives dies. Wherever possible, they should be given privacy to do so without unsettling other patients.

Naming
Ask patients for their family name and most used personal name (Figure 1). Most Asians are not Christians, so the term ‘Christian name’ has no significance in most cases. Use the family name as a ‘surname’ for writing purposes.

**Figure 1. The procedure for recording Asian names**

- Request patient’s full name
- Patient gives two or three names
- Verify family name
- Verify personal name
- Verify religious/titular name
- Enter family name as surname
- Enter as surname
- If it is the family name, enter as a second name
- If the family name is not verified, enter religious titular name as surname
Recording unfamiliar names can be difficult and may lead to serious errors. Staff should be aware of the different naming systems so that patients are accurately identified.

CHINESE

Religion
Taoism, Buddhism and Confucianism are the main religions, with some Christians.

Diet
The Chinese believe that equilibrium between ‘hot’ and ‘cold’ in terms of food, herbs or medicines needs to be maintained for good health. Foods are classified as hot or cold – this does not refer to temperature – and a special diet may be needed to restore balance:
- Hot – most pulses, garlic, ginger, eggs, nuts, lamb, honey, onions, dates, tea and coffee.
- Cold – cereals, rice, wheat, fruit, potatoes, white sugar, chickpeas, green leaf vegetables and milk.
Rice is the staple food, which is eaten with a variety of meat, fish and vegetable dishes.

Personal care
Hygiene/cleanliness Soaking in a bath is believed to be bad for the body in later life; showers are preferred.
Modesty In general, women prefer to be examined by a female doctor, although medical care takes priority. Some women may find wearing short, open-backed gowns unacceptable.

Naming
The family name tends to come first (for example, Cheung), followed by a one or two-part personal name (for example, Hung Yum, resulting in Cheung Hung Yum). Family origin is important; hence women tend to keep their maiden name. Many Chinese people have reversed this order so that it corresponds to the British naming pattern.

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

Death
Funeral and mourning customs vary widely depending on culture or religious belief. Some people are buried; others are cremated.

Special considerations
Traditional remedies are sometimes used for certain diseases – it is important to consult the individual. The most important festival is the New Year or Spring Festival, celebrated in February; the dates will vary as they are based on the lunar calendar.

TRAVELLERS

The general term ‘travellers’ includes several ethnic groups such as Romany (‘Gypsy’), Irish and New Age travellers. Romany travellers trace their origins to the Indian subcontinent. Irish travellers likewise have a long history. New Age travellers emerged more recently as people who adopted a nomadic lifestyle for reasons ranging from ecological concerns to enforced homelessness. The following notes apply mainly to Romany people but
Religion
Many Romany travellers are Christian, and many Irish travellers are Roman Catholic Christians. Superstition features strongly in Romany culture. A wide range of religious beliefs is to be found among New Age travellers, including Christianity, Buddhism and Paganism, including such affiliations as Druidism. To non-Gypsies, Romany culture appears very male-dominated, which has implications for care in hospital. The Gypsy way of life is dominated by family connections, and admission to hospital can create an intensely painful sense of isolation.

Diet
Generally, all foodstuffs are acceptable, but the method of preparation is important. Non-Gypsies are considered to be ritually unclean, and the hygiene rules (see later) stipulate which washing vessels must be used. For these reasons it is unlikely that a strict Romany would find food prepared in the hospital to be acceptable, and the patient’s family may wish to prepare and supply food. Sensitive review of the suitability of this food to the patient’s medical condition may be needed.

Personal care
Hygiene/cleanliness Romany households have several washing bowls, each for a specific purpose, such as the upper part of the body, the lower part, the interior of the mouth, and for utensils. Non-Gypsies using the toilet facilities on a Romany settlement would render those facilities ritually unclean and unable to be used by that community. Disposable bottles and bedpans overcome some of these concerns in hospital, but a sensitive discussion of hygiene arrangements with the patient may be helpful. Modesty Strictly, a Romany woman may not remain alone in a room with a man who is not her husband. Nor may another man look a Romany woman in the eye. However, many Romany women will consent to examination by a male doctor. Below the waist, the body is considered ritually unclean and should therefore be covered, with implications for gowns and some other clothing supplied by the hospital. Romany men may feel extremely uncomfortable being directed by female staff, even on such routine matters as when to eat, wash and sleep, and discouragement from smoking. Valuables are typically kept on the person, which can present difficulties when disrobing is required.

Death and dying
When death is imminent, a Romany traveller must not be left alone. The immediate family will usually summon the extended family and many friends to the bedside. It may become necessary to explain sensitively to the family that visitor numbers need to be restricted for the wellbeing of nearby patients. Strictly, the dying patient should be taken outdoors and a candle lit under the bed to light the way to the after-life. It may be possible to offer a substitute – for example, the chaplaincy can supply an electric flicker candle. There may be a strong wish to take a dying patient home. Death will usually be followed by burial rather than cremation. Post-mortem A strong belief in the afterlife dictates that the body must be kept whole. For this reason, post-mortem examinations will generally be strongly resisted. If a post-mortem
is necessary, reassurance that all body parts have been returned will be necessary.

Special considerations
Illiteracy is more widespread among Romanies than in the community at large. It may be necessary to offer help and guidance in matters such as the completion of consent forms and the self-administration of medication.

BUDDHISM

Buddhist faith centres on the Buddha, who is served not as a god but as an example of a way of life. Buddhists believe in reincarnation and so accept responsibility for their actions. The chief doctrine is that of ‘karma’ – good or evil deeds resulting in an appropriate reward or punishment either in this life or through reincarnation along a succession of lives. Buddhism has always been culturally adaptable, and a variety of forms and movements have developed, each with different traditions. Ask the individual and/or family and friends what is required.

Diet
As Buddhism encourages its followers to practise non-violence, most Buddhists will be vegetarian.

Family planning
Buddhists believe life begins at conception and so do not agree with contraception or abortion.

Death and dying
Care of the dying Buddhism believes the state of mind of a person at the moment of death is important in determining the state of rebirth after death. They like to have full information about their imminent death to enable them to make preparation. Some Buddhists may not wish to have sedatives or pain-killing drugs at this time. Peace and quiet for meditation and visits from other Buddhists will be appreciated. Some form of chanting may be used to influence the state of mind at death.

Procedure at death If other Buddhists are not in attendance, a Buddhist minister should be informed of the death as soon as possible. Routine last rites are appropriate. Cremation is preferred.

Special considerations
Vesak is a celebration of the enlightenment of Buddha and is held on a night with a full moon in May.

CHRISTIANITY

The individual person’s denomination should be recorded in his or her notes – for example, Church of England or the Anglican (Wales, Ireland) or Episcopalian (Scotland) Church.

All churches
Although the doctrines of Christian churches vary greatly both within and between countries, there are firm features of Christianity that are almost universal: initiation (baptism), worship, ministry and ‘good works’. The sacred writings of the Christian religion are in the Bible.

Diet
There are no general dietary requirements. Some Christians observe Friday as a day when they do not eat meat; some may wish to abstain
from food (fast) before receiving the ritual of Holy Communion. This can also be referred to as the Lord’s Supper or mass, whereby bread and wine, symbolising the body and blood of Christ, are taken in his memory. Some abstain from alcohol.

**Family planning**
Attitudes to family planning vary from denomination to denomination.

**Death**
Routine last rites are appropriate for all Christians.

**Special considerations**

**Baptism/christening** There is no age limit for baptism. When babies or children are very ill, baptism should be offered. In the absence of a minister of religion, anyone may perform a baptism. To do this, the minister makes a sign on the person’s forehead. A little water is poured on the forehead (or another accessible part of the body), with the words ‘John Smith, I baptise you in the Name of the Father, and of the Son, and of the Holy Spirit, Amen.’ The chaplain should be informed as soon as possible. If a child dies unbaptised, the chaplain will offer a blessing and naming service, and a certificate to commemorate this will be given to the parents. This is particularly appropriate following a miscarriage or stillbirth.

Patients may wish to see a chaplain, priest or minister from the local church, especially before an operation or anything else that is of concern to them. They may wish to receive Holy Communion and be prayed with. They may request a Bible or wish to attend services in the hospital chapel.

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

**Roman Catholic**
The patient will probably wish to be visited by a Catholic priest and to receive Holy Communion and the Sacrament of the Sick. This is not only for the dying but also for the sick, especially before an operation. The sacraments are very important. The Catholic priest must be called to dying patients or, if the death is sudden, immediately afterwards.

**Church of England (Anglican)**
Always ask the individual and/or family or friends if they would like to see a chaplain or their local minister. Prayers may be said at the bedside of the dying patient. Sometimes the family or the patient will ask to receive the Sacrament of the Sick. This involves anointing with special oil. After death, some families may like to offer prayers of thanksgiving for the person’s life.

**Free churches**
- Baptist.
- Independent churches and missions.
- Methodist.
- Moravian Brethren.
- Plymouth Brethren.
- Presbyterian.
- Salvation Army.
- The Religious Society of Friends (Quakers).
- United Reform Church.

Free Church patients may like to receive a visit from a minister or a member of their own church or the church chaplain. Ceremony or sacraments may not be observed as strictly as in the Anglican

---

8 nursing standard january 5/vol19/no17/2005
and Catholic Religions. However, patients may welcome prayers being said with them.

HINDUISM

Central to Hinduism is a belief in reincarnation, in which the status, condition and cost of each life is determined by the behaviour in the last life, making each person responsible for who he or she is and what he or she does. Hindus believe that there is one god, who can be understood or worshipped in many different forms. Every Hindu should pray, serve the old and offer generous hospitality to any visitor.

Diet

Most Hindus do not eat beef and some will not eat eggs or chicken. Dairy produce is acceptable as long as it is free of animal fat. However, it is best to ask each individual. Some Hindus are strict vegetarians and will not eat food that has come into contact with prohibited food or utensils. Tobacco and alcohol are not generally accepted.

‘Hot and cold food’ This relates to perceived medicinal properties of food and has nothing to do with either temperature or spicy qualities.

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

Personal care

Hygiene/cleanliness Handwashing is considered essential before and after eating. Water for washing is needed in the same room as the toilet, so patients should be provided with bowls and jugs of water or a bidet. If a bedpan has to be used, bowls and jugs of water should also be provided. Hindu patients prefer to wash in free-flowing water, as baths are considered unhygienic. If a shower is not available, ask the patient if he or she would like a jug to use in the bath.

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

Dress and jewellery Jewellery usually has a religious or cultural significance – for example, a woman’s bangles are removed only on her husband’s death. Some Hindu boys wear a ‘sacred thread’ over the right shoulder and around the body – this is a symbol of a male Hindu’s second birth when he starts to learn from his guru. None of these items should be removed or cut without the permission of the patient or the next of kin. If the thread has to be cut or removed it should be retained and be given to the patient later.

Family planning

Hindus have no objection to contraception. It is advisable to ask the woman whether she would like her husband or a family member or friend to be present during any discussion.

Death and dying

Care of the dying Hindu patients would very much want to die at home. This has religious significance, and death in hospital can cause great distress. The patient’s family may wish to call in a Hindu priest to read from the holy books and to perform holy rites. These may include tying a thread around the wrist or the neck, sprinkling the person with water from the Ganges or placing a sacred tulsi leaf in his or her mouth. Their belief is cremation, and the body being returned to nature may involve
a dying person asking to be placed on the floor during the final few breaths.

Procedure at death Distress may be caused if non-Hindus touch the body. The family will usually want to wash the body at home. If no family members are available, the following procedure should be followed:

- Wearing disposable gloves, close the eyes and straighten the limbs.
- Jewellery, sacred thread and other religious objects should not be removed.
- Wrap the body in a plain sheet.

In most cases the body should not be washed as this is part of the funeral rites and will usually be carried out by relatives later. If there is a delay (for example, because death has to be reported to the coroner) this must be carefully explained to the family, because it is their practice for the funeral to take place as soon as possible. If a body is to be left in a room overnight, a light or candle should be left burning throughout the night. If the family wishes to view the body, staff should ask the mortician to ensure the room is free of any other religious ‘symbols’. All adult Hindus are cremated.

Post-mortem This is generally disliked.

ISLAM

Islam is the Arabic name for the Muslim 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. 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 four chief religious duties for a Muslim: prayer (five times a day), alms giving, fasting and a pilgrimage to Mecca.

Diet

Some meat is permitted as long as it has been slaughtered according to the Halal ritual, which drains the animal of blood. Halal lamb, beef and chicken are eaten, but pork meat and blood are forbidden. Fish and eggs are allowed but must not be cooked where pork and non-halal meat is cooked.

Personal care

Hygiene/cleanliness Muslims attach great importance to cleanliness – hands, feet and mouth are always washed before and after prayer. After menstruating, women are requested to wash their whole bodies. Muslims prefer the use of a shower rather than a bath.

Modesty Muslim women may prefer to be seen or treated by a female doctor.

Organ transplantation

There are no specific rulings prohibiting transplantation, but strict Muslims will not agree to organ transplants, and the subject should not be raised unless the family initiates the discussion.

Death and dying

Care of the dying Dying Muslims may wish to sit or lie facing Mecca. Moving the bed to make this possible will be appreciated. The family may recite prayers around the bed. If the patient’s family is not available, any practising Muslim can help. The patient may wish the Imam (religious leader) to visit.
Procedure at death  After death, non-Muslims should not touch the body. Health workers who need to touch the body should wear disposable gloves. The body should be prepared according to the wishes of the family. If the family is not available, the following procedures should be followed:
- Turn the head towards the right shoulder before rigor mortis begins. This is so that the body can be buried with the face towards Mecca.
- Do not wash the body, or cut hair or nails.
- Wrap the body in a plain white sheet.

Muslims believe in the resurrection of the body after death, so they are always buried and never cremated. The family and Muslim undertakers will ritually wash the body. Muslim funerals take place as soon as practicable. If a delay is unavoidable, explain the reason carefully to the relatives.

If the death has to be reported to the coroner, he or she should be informed that the patient was a Muslim and be asked if the procedure can take place as soon as possible. If the family wishes to view the body, staff should ask the mortician to ensure that the room is free of any religious ‘symbols’.

Post-mortem  In Islam the body is considered to belong to God; strictly speaking, no part of the dead body should be cut or harmed. Post-mortems are therefore forbidden unless ordered by the coroner. This should be clearly explained to the family. The family may request that organs removed should be returned to the body after examination.

Special considerations  There are many Muslim festivals, all calculated by the lunar calendar. Ask the patient or the family if any important dates for their faith occur during their stay in hospital.

During the month of Ramadan, Muslims fast between sunrise and sunset, although those who are sick are not required to fast.

JUDAISM  
In Judaism, religion and culture are entwined. Judaism is based on the worship of one god, carrying out the Ten Commandments and the practice of charity and tolerance towards one’s fellow human beings. There are different groups within Judaism:
- Orthodox Jews are usually more traditional and observant of the religious and dietary laws.
- Non-Orthodox Jews (including Conservative, Liberal and Reformed) make their religious observance fit into modern society.

Diet  Many Jews will ask for kosher food – that is, meat that has been prepared in a special way according to Jewish Law. Shellfish, pork, rabbit and their derivatives are strictly prohibited (treifu). Milk and meat products are not eaten at the same meal, which means that they do not have milk in their drinks or cream with their desserts after their meat meal and do not use butter on meat sandwiches. The patient should be consulted about his or her level of dietary observance and the necessary arrangements made. Orthodox Jews may not be happy to take non-kosher meat.

Fasting  See special considerations below. If fasting would be a danger, even Orthodox patients will accept medical advice.
Modesty
Orthodox Jewish women prefer to have their bodies and limbs covered. They may also prefer to keep their hair covered with a headscarf. Orthodox men keep their head covered with a hat or skull cap (kappel).

Family planning
Jews forbid contraception or family planning unless the woman's health is at risk.

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

Death and dying
Care of the dying
The patient may wish to recite or hear special psalms or prayers, especially psalm 23 (The Lord is my Shepherd) and may appreciate being able to hold the page on which it is written. The relatives may say prayers and they may wish a Rabbi to be called to help the dying person with their formal confession and to bring comfort.

Procedure at death
In some cases the son, if present, may wish to close the eyes and mouth. The body should be handled as little as possible by non-Jews. Depending on the sex of the patient, a fellow male or female washes and prepares the body for burial. Usually three members of the community are present. Traditionally, Jews will arrange for this to be done by the Jewish Burial Society. If members of the family are not present, however, most non-Orthodox Jews would accept the usual washing and last rites performed by hospital staff.

The body should be covered with a clean white sheet. The family may wish for the body to be placed with the feet pointing towards the doorway and to light a candle. Some Orthodox Jewish groups may wish to appoint someone to stay with the body from the time of death to the burial, which usually takes place within 24 hours. This person is called a ‘watcher’, and he or she may need to stay with the body throughout the night. In this instance, or if the family wish to view the body, staff should ask the mortician to ensure that the room is free from any religious ‘symbols’.

Post-mortem
Post-mortems are not permitted unless legally required.

Special considerations
The Sabbath (Shabbat) begins at sunset on Friday and lasts until sunset on Saturday. On the Sabbath, ‘work’ is prohibited and includes things such as writing, travelling and switching on lights or electrical appliances. During Passover (in March or April), some Jewish patients may require special foods.

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

Sikhs, as an act of faith, wear the five signs of Sikhism, known as the 5Ks.
- Kesh – uncut hair, kept under a turban.
- Kangha – a small comb worn in the hair.
- Kara – a steel wrist band or bangle (or ring).
- Kirpan – a sword or dagger.
- Kaccha – white shorts worn as an undergarment.

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

Diet
Many Sikhs are vegetarian. Some may not eat eggs or fish. A few who eat meat will not eat beef. It is helpful to explain the ingredients of dishes with unfamiliar names, such as ‘hot pot’. Sikhs do not smoke, and alcohol is forbidden.

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

Family planning
Contraception can be used, but is not openly spoken about.

Death and dying
Care of the dying A dying Sikh may receive comfort from reciting hymns from the Guru Granth Sahab, the Sikh Holy Book. The family or any practising Sikh may help with this.

Procedure at death Generally, Sikhs are happy for non-Sikhs to attend to the body. However, many families will wish to wash and lay out the body themselves. If members of the family are not available, the following procedures should be followed, in addition to the normal last rites:
- Special regard should be given to the 5Ks; these should be respected and should be left intact.
- Do not trim the hair or beard.
- If the family wishes to view the body, staff should ask the mortician to ensure that the room is free from all religious ‘symbols’.

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

Special considerations
Sikhs do not have a specific holy day; British Sikhs have adopted Sunday as the holy day. Prayers are said up to five times daily and patients may like to have an early bath or shower before saying prayers; perhaps as early as 3am.

BAHA’I FAITH

Although it began in a Muslim country, the Baha’i faith is a distinct religion, based on the teachings of its founder, Baha’u’llah. It is not a cult, a reform movement or a sect within any other faith, nor is it a philosophical system. It recognises the unity of God and of his prophets, and teaches that the fundamental purpose of religion is to promote concord and harmony. The Baha’i faith promotes the principles of equal opportunity, with...
rights and privileges for both sexes, and advocates compulsory education and universal peace.

Death and dying

Care of the dying  No ritual to be performed before or after death.

Death/funeral arrangements  According to Baha’i law, two conditions must be fulfilled:
- Baha’i are always buried, never cremated.
- The place of interment should be within one hour’s journey of the place of death.

Any undertaker may be used. Certain prayers and observations will be arranged either by the family or by the local Baha’i community.

CHRISTIAN SCIENCE

Established in the US in 1879, Christian Science teaches reliance on God for healing, rather than on medicine or surgery. It is unusual, therefore, for Christian Scientists to be patients in ordinary hospitals. They will usually seek nursing care at home or in a Christian Science nursing home. They may, however, be admitted to hospital following accidents, or during pregnancy and childbirth, and because of family or legal pressures. They will accept medical care for their children where the law requires it. The church does not attempt to control the actions of its members, and the decision about whether to accept medical intervention lies with the individual.

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

Diet

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

Clinical procedures

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

Blood transfusion  It is not normally acceptable for adults, but parents usually consent to blood transfusions if doctors consider this appropriate for their child.

DEATH AND DYING

Routine last offices are appropriate. Only female staff should handle a female body, and cremation is normally preferred.

Post-mortem  Christian Scientists object to post-mortems, unless required by law.

JEHOVAH’S WITNESSES

Jehovah’s Witnesses try to live their lives according to the commands of God, as written in the Old and New Testaments. They regard Jesus Christ as the Son of God.

Diet

Food containing blood or blood products is not acceptable. Jehovah’s Witnesses do not smoke.

Clinical procedures

Blood transfusions  Jehovah’s Witnesses believe that taking blood into one’s body is morally
wrong; it is therefore prohibited. This includes whole blood or its components, such as packed red cells, plasma, white cells and platelets. Jehovah’s Witnesses can choose whether to accept products such as albumin, immunoglobins and clotting factors. Blood samples may be taken for pathological testing, provided that any unused blood is disposed of. Dialysis will usually be accepted.

**Organ transplantation** This is generally not permitted, but components where blood is not involved (for example, a cornea) are more likely to be acceptable. Jehovah’s Witnesses are not likely to be willing to either donate or receive an organ through which blood flows. They will want reassurance that blood will not be used against their wishes.

**Death and dying**

**Care of the dying** There are no special rituals for the dying, but patients will usually appreciate a visit from one of the elders of their faith (there are no separate clergy).

**Procedure at death** Routine last rites are not appropriate.

**Post-mortem** This is a matter of individual choice for the family.

**Special considerations**

Jehovah’s Witnesses do not usually celebrate birthdays or Christmas. The only festival celebration is the annual memorial of the death of Christ.

---

**MORMONS**

The Mormon Church, also known as the Church of Jesus of Latter Day Saints, began in America in 1830. Mormons follow a strict health code, known as the word of wisdom, which advises against the use of tea, coffee, alcohol and tobacco, and advocates healthy living. Family unity is very important.

**Diet**

Mormons eat sparingly and avoid products that contain a lot of blood. Some Mormons will avoid all hot drinks; milk, water and fruit juices are acceptable.

**Death and dying**

**Care of the dying** There are no rituals for the dying, but spiritual contact is important. The church has ‘home teachers’ who offer support and care by visiting church members in hospital.

**Procedure at death** Routine last rites are inappropriate. The sacred garment, if worn (see ‘Special considerations’), must be replaced on the body after the last rites. Church burial is preferred.

**Post-mortem** There are no religious objections. It is a decision for the individual family.

**Special considerations**

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

---

**RASTAFARIANISM**

Rastafarians are followers of a movement that began in the 1930s in the West Indies among the descendants of slave families who had
come from Africa. The Old and New Testaments are still regarded as scriptures, but Rastafarians do not consider themselves to be Christians.

Rastafarianism is a personal religion; it places emphasis on personal dignity and a deep love of God. There are no churches, services or clergy. For some, legal marriage is unnecessary and thus extended families may be complex.

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

**Modesty**
Rastafarian women dress modestly. There is a taboo on wearing second-hand clothing, so the patient may be unwilling to wear hospital garments that have been worn by others. A disposable theatre gown may be preferred.

**Family planning**
Most Rastafarians do not believe in contraception.

**Clinical procedures**
- **Blood transfusion** There will probably be anxieties about this because of concerns about contamination of the body. Assurance will be necessary.
- **Organ transplantation** Not generally acceptable.

**Death and dying**
- **Care of the dying** Among Rastafarians, visiting the sick is important. Visits are often made in groups. Family members may wish to pray at the bedside. Apart from this there are no rites or rituals, before or after death.
- **Procedure at death** Routine last rites are appropriate, and burial is preferred.

**Post-mortem** A post-mortem will only be agreed to if the coroner has ordered it.

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

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

**SEVENTH DAY ADVENTISTS**
Seventh Day Adventists are a worldwide Christian denomination whose members very much believe that their faith is a way of life. They have strong health principles, worship weekly from Friday sunset to Saturday sunset and live daily in service to God and humanity.

Seventh Day Adventists believe in caring for the body God has given them. They uphold health principles, which has on occasion singled them out as a group for health studies. Hundreds of health clinics and hospitals around the world have been founded by Adventists, and they are noted for their holistic attitude to life.

**Diet**
Many Seventh Day Adventists are ovo-lacto vegetarians, which means they eat no meat products but do eat eggs, cheese and milk foods. Others are not vegetarian but do not consume pig products, and some also avoid red meats. A few are vegans, eating only fruits, pulses, nuts...
and grains. Most Adventists avoid stimulants such as tea and coffee. Adventists also promote an alcohol-, nicotine- and drug-free lifestyle.

Death and dying
There are no death rituals as regards to the body. Calling the minister, next of kin and family members would provide an opportunity for acceptance and goodbyes.

For Seventh Day Adventists the funeral service is one of celebration of the person’s life, and they believe the body remains in the grave until the second return of the Saviour Jesus Christ.

OTHER FAITHS

WICCA

Wicca has its roots in old, pre-Christian earth-based religions, Goddess traditions and witchcraft. At the core of Wiccan beliefs is the last line of the Wiccan Rede: ‘An it harm none, do what thou will.’ In other words, do whatever you please, as long as it does not harm anyone, including yourself. They also believe that what you do comes back to you three times as intensely. Wiccans also believe in reincarnation. They believe the soul goes to Summerland between death and rebirth, to reflect on the life that has just passed and to prepare (and wait) for the next.

BAPTISTS

Baptists are a group of Christians who may hold the following beliefs as outlined by the Baptist Church:

- The centrality of the Bible and the importance of personal prayer and sharing in fellowship together.
- The baptism of believers on profession of faith in Jesus Christ.
- A gathered community of believers who meet regularly to discern the mind of Christ.
- The whole church of God expressed in several distinct ways, wishing to be committed to the ecumenical life of God’s people, as well as associating with fellow Baptists locally and internationally.
- Supporting the Baptist Missionary Society and the work of Christian Aid, believing that everyone has a responsibility to live out the call of Christ in their own daily lives.
- Religious freedom for everyone and a tolerance of differences of outlook and practice of the spiritual life.

Acknowledgements
Thanks to all those who contributed to this guide: James Scott, chief executive; John Rothwell, chaplain; John Ward, director of human resources; Gillian Powell, communications officer; Jean Hill, head of library; Linda Foote, assistant; Julie Vance, deputy director of nursing; Simon Chase, deputy manager clinical governance; and also the staff development administration – Jess Perry, Sam Thomas and Sid Hawkins.
CONTACTS

African/Caribbean
Afro-Caribbean Mental Health Association
35-37 Electric Avenue
London SW9 8IP
Tel: 020 7737 3603

African-Caribbean Mental Health Project
Zion Centre
Zion Crescent
Manchester M15 5BY
Tel: 0161 226 9562

Asian
Asian Language
Tel: 020 7713 7867

Baha’i
Natural Spiritual Assembly of Baha’is
of United Kingdom
27 Rutland Gate
London SW7 1PD
Tel: 020 7584 2566

Buddhism
London Buddhist Centre
51 Roman Road
London E2 0HU
Tel: 0845 458 4716

The Buddhist Society
58 Eccleston Square
London SW1V 1PH
Tel: 020 7834 5858

Chinese
Chinese Health Information Centre
First Floor
39 George Street
Manchester M1 4HJ
Tel: 0161 228 0138

Hinduism
Hindu Centre
5-7 Cedars Road
London E15 4NE
020 8361 4484

Islam
Islamic Cultural Centre
London Central Mosque
146 Park Road
London NW8 7AG
020 7724 3363

The Islamic Foundation
Markfield Darah Centre
Ratby Lane
Markfield

Leicester LE67 9RN
Tel: 01530 244944 or 01530 244945

Islamic Universal Foundation
(Shia Mosque)
20 Penance Place
London W11 4PG
Tel: 020 7602 5273

Muslim Women’s Help Line
Unit 3
GECE Estate
East Lane
Wembley HA9 7PX
Tel: 020 8904 8193 or 020 8905 6715

Jehovah’s Witnesses
Jehovah’s Witness Hospital Information Services
GBA House
The Ridgeway
London NW7 1RN
Tel: 020 8906 2211

Judaism
(Orthodox Jews)
The Office of the Chief Rabbi
Adler House
735 High Road
London N12 0US
Tel: 020 8343 6301

(Progressive Jews)
Union of Liberal and Progressive Synagogues
21 Maple Street
London W1T 4BE
Tel: 020 7580 1663

Board of Deputies of British Jews
Woburn House
Upper Woburn Place
London WC1H 0EP
Tel: 020 7387 3952

Sikhism
Sikh Missionary Resource Centre
346 Green Lane
Small Heath
Birmingham B9 8DB
Tel: 0121 772 5360

General
National Health Service Ethnic Health Unit
7 Belmont Grove
Leeds LS2 9NP
Tel: 0113 246 7336

Sickle Cell Society
54 Station Road
London NW10 4UA
Tel: 020 8961 7795
ns online
your one-stop resource for archived articles

> more than 3,000 key research and CPD articles from Nursing Standard and RCN Publishing’s specialist journals

the archive is fully searchable by key word and by date, giving you quick access to the information you need

> FREE, UNLIMITED access to the archive if you subscribe to any of the following journals:

- Nursing Standard
- Cancer Nursing Practice
- Emergency Nurse
- Evidence-Based Nursing
- Gastrointestinal Nursing
- Learning Disability Practice
- Mental Health Practice
- Nurse Researcher
- Nursing Management
- Nursing Older People
- Paediatric Nursing
- Primary Health Care

> take advantage of your FREE archive access today by registering online

> subscribe online to one of our indispensable journals from just £3.30 a month to secure your FREE archive access

for all this and much more visit www.nursing-standard.co.uk

Please note: Free access to the Nursing Standard Online archive is only available to personal subscribers.

www.nursing-standard.co.uk

January 5/Vol19/No17/2005 Nursing Standard 19
The UK’s no.1 subscription nursing weekly

Every week *Nursing Standard* helps you to:

✔ **Stay in touch and increase your understanding** – with a round-up of the week’s most important news and expert insight into the issues behind the headlines

✔ **Keep up with best practice and learn about new treatments** – with ground-breaking research papers and summaries of the most important developments and latest scientific reports

✔ **Advance your career** – with more for PREP than any other weekly journal, including solutions to common problems and easy-to-read CPD articles

✔ **Keep your options open and stay informed** – with all the best nursing vacancies, whatever your specialty, as well as findings from key conferences and advance notice of upcoming events

Subscribe today from just **£3.30 a month**

To subscribe call **0845 7726 100**, quoting reference **NSHBKL4**

www.nursing-standard.co.uk