

RELIGIONS AND CULTURES



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IN GRAMPIAN

A practical guide for health and social care staff to the diversity of beliefs, customs and cultures of the people of Grampian.

RELIGIONS AND CULTURES IN GRAMPIAN

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'Religions and Cultures in Grampian' is a practical guide for health and social care staff to the diversity of beliefs, customs and cultures of the people of Grampian.

NHS Grampian is committed to providing safe, effective and person-centred care with good clinical outcomes. This means that we want to meet the physical, psychological, emotional and spiritual needs of every patient in a way that is unique and personal to that individual.

Our staff members each bring their own personal experience of diversity to NHS Grampian; this guide is designed to build on that and to support our staff in providing culturally sensitive care to patients and carers across our acute and community settings.

The content has been developed by our Equality and Diversity Team under the guidance of our Spiritual Care and Engagement and Participation Committees, which have a particular interest in how we, as a Board, attend to the health care experiences of our patients.

I thank them for their continued commitment to ensuring our system engages fully with the many cultures that make up our local population.

Dr Lynda Lynch
Chair
NHS Grampian

May 2019



Religions and Cultures in Grampian

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Religions and Cultures in Grampian

A practical guide for health and social care Staff

Introduction

NHS Grampian is committed to providing holistic healthcare, which is responsive to the physical, psychological, emotional and spiritual needs of its patients. Appropriate spiritual, pastoral and religious care will be offered to patients, their relatives and carers and to staff. This care is available to people with or without specified religious beliefs.

NHS Grampian Spiritual Care Policy

In Our National Health, a Plan for Action, a Plan for Change, the Scottish Government committed to developing a patient centred approach to care. The White Paper, Partnership for Care committed us to 'extending the principles set out in Fair for All to ensure that our health services recognise and respond sensitively to the individual needs, background and circumstances of people's lives'. More recently Government documents Delivering Care, Enabling Health (Scottish Government 2006) and Better health, Better Care (Scottish Government 2007) have emphasised the development of a patient focussed service which both improves care and upholds the rights of individuals.

An important element of this approach is the provision of appropriate spiritual support to patients, their families and the staff who care for them as required by HDL (2002) 76, *Spiritual Care in NHS Scotland*. This initiative led to the creation of the NHS Grampian Spiritual Care Policy and the Spiritual Care Committee, based on the principle of 'respect for the wide ranging beliefs, lifestyle and cultural backgrounds of the population served by NHS Grampian.'

The purpose of this Guide is to help healthcare staff to improve their knowledge of providing for the religious and cultural needs of those in their care. Some basic information is provided about the major faith and cultural groups present in Grampian. However this information is a general guide only. Staff should always check everything with the patient or their relatives. If in doubt, ask them for advice. Sensitivity and some basic knowledge of the beliefs, customs and practices of religious and cultural groups will lead to better patient care and can bring a great deal of comfort to the patients and the families involved.

The work of producing this guide was done by a small working group of the NHS Grampian Spiritual Care Committee. The group drew on a number of previously published guides from other parts of Scotland and the text of each section has been checked where possible with the faith group concerned.

Practising health care in the realms of different faiths and cultures should be looked at as a stimulating challenge to healthcare rather than an additional problem. Staff awareness, good communication and some basic knowledge is the key.

Baha'is

The information below is a general guide only. Always check everything with the patient or their relatives. If in doubt, ask them for advice.

Beliefs, Way of Life, History

The Baha'i Faith originated in Iran in the middle of the nineteenth century. The Founder is Baha'ullah (Glory of God). He was exiled and persecuted and finally sent to Akka in the Holy Land, where he passed away in 1892. The spiritual and administrative centre of the Faith is thus in the Holy Land.

Baha'is believe in the oneness of mankind and in one God, who has revealed His purpose progressively to mankind. There are followers in over 112,000 centres in the world and over 170 national bodies. Baha'is come from many diverse nationalities, cultures and backgrounds. Thus Baha'is accept the validity of all religions and it is the individual's responsibility to investigate the truth in all matters. Women and men are equal and should enjoy equality of opportunity.

The Baha'i Faith is an independent world religion with its own laws and ordinances. Baha'is have a great respect for physicians and are exhorted to consult the best possible medical advice when ill. Baha'is have a great respect for life. Each person has a soul, which progresses after death. The soul comes into being at conception. Since Baha'is believe that a child before birth has a soul, abortion is strongly discouraged.

Worship

Baha'is have no fixed worship services and no ordained priesthood or clergy. They are required to say an obligatory prayer each day and read from the scriptures of the faith each morning and evening. When praying they turn in the direction of Bahji, near Akka in Israel. In illness, they are exempted from obligatory prayer.

Diet

Baha'is do not have specific dietary prohibitions. Some may be vegetarians, but this is of their own choosing and not a religious requirement. Baha'is do not use habit-forming drugs (e.g. opiates, amphetamines) and do not drink alcohol, except when prescribed by a physician. Smoking is discouraged.

Fasting

The Baha'i period of fasting is 2-20 March. It occurs at the same time each year. Baha'is may not take food or drink between sunrise and sunset during this period. Fasting is not obligatory in sickness, pregnancy, menstruation, nursing mothers or people under the age of 15 or over 70.

Washing and Toilet

Washing, bathing and toilet present no unusual problems. Baha'is should have access to private washing facilities whilst in hospital in order to comply with the requirements for ablutions prior to the recital of obligatory prayers.

Modesty

Baha'is are not opposed to being examined by doctors of either sex.

Attitudes to Medical Staff

Baha'is have a great respect for medical opinion. As well as taking prescribed medication, they also believe greatly in the power of prayer in healing.

Blood Transfusion, Transplants, Organ Donation

There is no objection to blood transfusion or organ transplantation. Baha'is may leave their bodies for scientific research or donate organs for transplantation.

Birth Customs

This is a happy time and Baha'is may wish to express their gratitude to God with prayer. There are no particular rituals associated with birth.

Family Planning

This is left to the personal conscience of individuals. Sterilisation, in either sex, is strongly discouraged. However, appropriate medical advice is followed.

Contraception – this is according to personal preference. However methods which involve prevention of implantation of the fertilised ovum are improper, as Baha'is believe that the soul comes into being at conception.

Since Baha'is believe that the soul comes into being at conception, abortion would be seen as being totally unacceptable. In the event of the mother's life being at risk, then the option of abortion may be possibly considered by some, after consultation with medical staff.

Death Customs

There is no ritual to be performed either prior to or after the death of a Baha'i. The nurse should act in accordance with the customary hospital procedure. Baha'is treat the body of a deceased person with respect, as it has been the vehicle of the soul during life. Relatives will wish to say prayers for the dead. The family will arrange a Baha'i funeral or it may be arranged by the local Spiritual Assembly.

Baha'is may not be cremated or embalmed. They may not be buried more than an hour's journey from the place of death. Any funeral director may be used. Further clarification in individual cases may be obtained from the local Baha'i contact. Baha'is may leave their bodies to scientific research or donate organs according to their own personal wishes.

Post-mortem

There are no objections to post-mortem examination.

Contact

Baha'i Council for Scotland

Tel: 0800 038 1844

Email: bcs@bahai.org.uk

Web: www.bahai.org.uk

Local Contact

Audrey & Keith Mellard

Tel: 01224 571444

or

Contact the **hospital chaplains**: Tel: 01224 553316 (ext 53316).

Out of hours (including weekends), ask the Communications Centre (Tel: 0345 456 6000 or dial 0 from within the hospital network) to page the on-call chaplain.

Buddhists

The information below is a general guide only. Always check everything with the patient or their relatives. If in doubt, ask them for advice.

Beliefs, Way of Life, History

Buddhism inspires the religious outlook of a fifth of all humanity. The ancient civilisations of India and China were profoundly affected by it and it remains influential in South East Asia, Korea, Japan and the Himalayan area.

The religion known in the West as Buddhism was founded around 500 BCE in northern India by Siddhartha Gautama, a young prince who became disillusioned with his wealthy lifestyle and the religious teachings of the day. He abandoned his riches and wandered throughout northern India seeking the causes of human suffering. After a long and arduous quest lasting many years, he was successful in his search. From that point on he became known as the 'Buddha', which means 'Awakened One'. He spent the remaining forty years of his life teaching the way to overcome suffering in all its forms. After his death, his teachings (known as the 'dharma') spread throughout Asia. Because Buddhism does not persecute other religions, Buddhist teachings mixed with local ideas and customs in these new countries, so the beliefs of Buddhist patients may vary considerably according to which country they are from.

Teachings

Briefly, the Buddha taught everything is subject to change and that suffering is an unavoidable part of being a sentient being. It is our response to it that matters. Imagining that permanent happiness can be found in possessions, relationships or in another world somewhere only makes things worse as we are chasing illusions. But since everyone suffers, understanding suffering can also lead to understanding of others. Buddhists try to identify with all beings rather than just their own experience. This leads to compassion and a loss of fear as we see ourselves as a part of a much greater whole.

Karma and rebirth

The word 'karma' has different meanings in different Indian religions. In Buddhism, it means that all our actions have moral consequences, both for ourselves and for others. Many Buddhists also believe in rebirth. This means that when we die, our karma causes our rebirth and influences how we experience things in this next life. Traditional Buddhist practice is based on creating positive habit or influence on the mind, known as creating merit and reducing the negative effects of our actions. Different Buddhist traditions have different teachings on the exact process of dying and rebirth. Tibetan Buddhists, in particular, believe that the consciousness stays within the body for three days after clinical death, during which time the body is left undisturbed and prayers said. However it is understood that this may not be possible and will depend on the circumstances within the hospital or institution.

Ethics

A Buddhist tries to live by five precepts or vows. If a patient is a Buddhist monk, they will have taken a large number of additional vows. The emphasis is on the intention

and result of actions rather than the 'letter of the law', so it is always worth discussing ethical questions with the individual patient.

The precepts are:

1. To refrain from harming living things
2. To refrain from taking that which is not given
3. To refrain from misuse of the senses and sexual misconduct
4. To refrain from false or harmful speech
5. To refrain from taking drink or drugs which cloud the mind.

Diet

Because of the first precept, many Buddhists are vegetarian or vegan, although not all are. Monks (and occasionally lay people) take a vow not to eat after midday.

Fasting

In some traditions on certain days, possibly Full Moon days, fasting may be observed. There are also other festival days including the Buddha's birthday, death day, his enlightenment and the first sermon.

Attitudes to Medical Staff and Illness

Helping people is fundamental to a Buddhist practitioner and so Buddhist patients will always respect the doctor or nurse for the help given. Drugs taken for medical reasons are not considered a problem in relation to precepts, but best to check with the patient as they may have views particular to them.

Blood Transfusion, Transplants Organ Donation

It is unlikely that there will be problems with blood transfusion. Transplants can be more complex. Many Buddhists believe organ donation to be a commendable act of compassion. But Buddhists from some traditions believe that clinical death is not the end of consciousness, so removing organs or otherwise disturbing the body in the three days after clinical death is seen as harmful to that person. Many Buddhists would have ethical problems with receiving organs 'donated' by animals. As always, the individual patient's view should be sought.

Birth Customs

Birth customs vary according to local tradition. In some cultures a basket containing some tools may be prepared for a baby boy and if the baby is a girl, her cradle will contain needles and thread. There may be a request for the umbilical cord to be salted and placed in an earthenware pot.

Family Planning and Abortion

Family planning is widely accepted in Buddhist countries. Most Buddhists would want to avoid abortion as it involves killing a living being. However, since Buddhist ethics aim to minimise suffering, abortion would usually be accepted where there would otherwise be harm to the mother or the baby. The degree of development of the foetus would be taken into account by many Buddhists in decisions about abortion.

Death Customs

Death customs vary according to local tradition, In general, there is no ritual requirement, but the normal hospital procedures are accepted. However, some Buddhist traditions have strongly held views concerning the way in which the body should be treated after death. It would be helpful to ascertain such views before death occurs so that unnecessary distress to relatives and friends can be avoided.

Consideration for the dying will vary depending on the Buddhist group. The most important consideration relates to the state of mind at the time of death for this will influence the character of rebirth. The state of the mind should be one of peace therefore the patient may wish to meditate and ask for a quiet place. They may wish for a Buddha image to be in close proximity and a candle or incense stick may be used. Some may wish to receive counselling from a fellow Buddhist. Some form of chanting may be used to help reach the desired state of serenity. Some Buddhists may express a strong wish to die at home rather than in hospital. If possible, this should be granted. Full discussion on the practical implications of this decision should be explored with the patient and relatives.

Death of a child

When a child of a Buddhist family dies, special prayers usually take place for a period of time before burial. This period depends on the lunar calendar and varies between three to seven days in most schools of Buddhism.

Funeral

Traditions vary according to culture. Most Buddhists are cremated and the body should be disposed of (buried/cremated) within 3-7 days.

Post Mortems

There are no religious objections but some may consider that post mortems interfere with the process of dying and should be avoided.

Contacts

Nilupul

Venerable Gelong Karma Jiga

Tel: 01382 872020

E-mail: info@nilupul.org

Website: nilupul.org

The Buddhist Hospice Trust

1 Laurel House

Trafalgar Road

Newport

Isle of Wight

PO30 1QN

Tel: 01983 526945

Local contacts

Friends of the Western Buddhist Order
Alan Carter Tel: 01224 276810

Buddhism (non denominational)
George Wilson Tel: 01224 587017

Thai Buddharam Temple & Cultural Centre,
East Lodge,
Queens Road,
Aberdeen AB15 6YX

Tel: 0844 800 8441

Varapunya Meditation Centre,
Easter Mains Cottage,
Kinmundy,
Kingswells
AB15 8RB

Tel: 07949 219241

or

Contact the **hospital chaplains**: Tel: 01224 553316 (ext 53316).
Out of hours (including weekends), ask the Communications Centre (Tel: 0345 456 6000 or dial 0 from within the hospital network) to page the on-call chaplain.

Chinese and Vietnamese

The information below is a general guide only. Always check everything with the patient or their relatives. If in doubt, ask them for advice.

Beliefs Way of life, History

There have been Chinese people in some parts of the UK since the early 1800s. However most immigrants arrived in the 50s and 60s – this was a time of great political uncertainty in China following the Communist Revolution and traditional fishing and agriculture industries in Hong Kong were in a state of decline. The majority of Chinese people in the UK originated from the New Territories in Hong Kong.

Although amongst Chinese and Vietnamese there are a number of belief systems from Ancestor Worship to Islam to Christianity, the most prevalent influences on the way of life and philosophy of Chinese and Vietnamese are based on three schools of thought: **Buddhism**: seeing life as a process of birth, ageing, illness and death in which people seek enlightenment.

Confucianism: an ethical system that emphasises law and respect for rules and authority as central to making life possible.

Taoism: seeing life as a balance of metal, wood, water, fire and earth.

Amongst the older generation, especially women, belief in the traditional religion is still strong. In some cases, due to the growth of modern education and influences exerted by Westernisation, religious scepticism amongst many of the younger generation has increased. However there is a large number of Chinese and Vietnamese who still hold onto their traditions and customs.

Vietnamese

During the 70s and 80s, some 15-20,000 Vietnamese people came to UK, partly because of political and social upheaval following national and civil war and the Chinese invasion in 1979. It is estimated that up to 80% of all Vietnamese who fled were in fact of ethnic Chinese origin.

Languages

The main language in the People's Republic of China is Mandarin, referred to as Pu Tong Hua. In the South and Hong Kong, Cantonese is spoken.

The written word is in the form of characters, which are the same for all languages and dialects, although they have been simplified in the People's Republic of China, whereas in Hong Kong, traditional characters are used. It is important to note that the two are not interchangeable and people from Hong Kong cannot read simplified characters.

Worship

Set forms of worship are not usually used by Chinese or Vietnamese unless they belong to a formal faith community such as Christianity. Altars may be set up temporarily for specific weddings or funerals.

Festivals

Chinese New Year (Yuan Xiao)
Ching Ming Festival
Dragon Boat Festival
Mid-Autumn Festival
The Arrival of Winter
Vietnamese New Year (Tet)

Names

Chinese and Vietnamese names often (but not always) have three parts. Usually the family name comes first followed by the personal names. Sometimes in the UK this is reversed so that the family name comes last. If in doubt, ask for the family name. Married women do not always take the husband's name.

Diet

The Chinese and Vietnamese have very definite customs of their own concerning foods, its preparation, its service and the manner in which it is eaten. The older generation hold the belief that rice is the only form of staple food which can give them energy and vitality. It is not uncommon to find that Chinese patients appear to have lost their appetites during their stay in hospital, or complain about the meals served to them in the Western style. Complaints are seldom made directly to the medical staff; however patients may indirectly request food and rice to be brought in to them by their relatives during their visits. This happens in Hong Kong hospitals and reflects a strong preference for home cooking.

A traditional Chinese belief relating to diet during hospitalisation concerns the consumption of soup which has been boiled for a long time (3 hours). Many believe that the consumption of well-boiled soup will help clear one's system and promote speedy recovery, particularly after surgical operations.

The women, following birth, need to be given hot food. This is a tradition, even in the height of summer. Cold meat, salad and ice-cream are unacceptable.

Ideas of Modesty

Chinese and Vietnamese women are generally shy and modest; there is a great need to explain routine procedures and to gain trust and co-operation. They would probably be more relaxed and contented if attended by a female professional. Any fear expressed by the patient can often be due to ignorance of what is happening around them.

Attitudes towards Medical Staff & Illness

Western medicine has become established in Hong Kong due to western influences over the last two or three decades and it has now been accepted by the majority of the Chinese as the most advanced form of treatment. However, traditional herbal remedies given by Chinese physicians are still used by a minority who are still accustomed to this, when they fall ill. Staff need to check to see if the patient is taking Chinese herbal medicine in combination with traditional western medicine. Most Chinese now feel it possible to reconcile aspects of traditional and western medicine.

Many Chinese are too embarrassed or shy to pursue questions about their condition with doctors. Always use an interpreter, not a family member.

Traditional Chinese Medicine

Chinese traditional medicine is still very prevalent within the community. It is broadly based on the key concepts of yin and yang, ch'i and the five elements of matter that are described in the Taoist belief. Illness is seen as an imbalance of these elements and therefore treatment is focused on restoring balance and harmony. Many of these medicines are available in the UK.

Antibiotics

In Vietnam, a much higher dosage is prescribed. Vietnamese may feel that the lower dosage prescribed here does not have the same effect.

Blood Transfusion, Transplants, Organ Donation

Although Chinese and Vietnamese have no specific religious objections to these, there is frequently a great apprehension about operations of any kind and there is a widespread dislike of giving blood samples.

Birth Customs

A lot of root ginger is eaten for several weeks after the birth, boiled together with vinegar, pig's knuckles and eggs. It is a very dark mixture and may be eaten every day for up to a month after the delivery as it is believed to cleanse the body's system and replenish the nutrients in order to regain strength quickly.

A Chinese woman may request not to wash her hair for one month after delivery. She will also not participate in any form of exercise.

When a child is born the relatives will visit and bring presents such as chicken, soup, clothing, a cap and shoes for the baby. About a month after the birth, the baby's head may be shaved.

Family Planning

Chinese and Vietnamese accept family planning and even abortion. However family planning matters should not be mentioned in the presence of other Chinese/Vietnamese and may not be a matter normally discussed openly between the sexes.

The idea of having a balance of male and female children is growing, though the preference for male descendants is still strong among more traditionally minded parents.

Death Customs

Funeral and mourning customs vary widely in the Chinese tradition, making it very difficult to generalise for all Chinese. Factors to be considered include the position and wealth or poverty of the family concerned.

In the case of a baby or child, some groups 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 baby and many do not like to mention the dead person at all - hence counselling may be difficult but always give the option. Even with a child, there may be no request for any formal ceremony or coffin. Check with individual families. Chinese families do not like to be given back any of the baby or child's belongings as it is considered 'bad luck'. On the death of a baby or child, the burial takes place at once with no special ceremony.

In the case of adults, the body is simply bathed and covered in a white sheet. The custom is still for some Chinese to clothe the body in white or in old-fashioned Chinese clothing. Relatives and friends will wish to see the body before the coffin lid is closed.

Post Mortems

Most Chinese are adverse to the idea.

Contact

Aberdeen Elderly Chinese Association
Mrs Hermia Donaldson
Mobile: 07879 894034

or

Contact the **hospital chaplains**: Tel: 01224 553316 (ext 53316).
Out of hours (including weekends), ask the Communications Centre (Tel: 0345 456 6000 or dial 0 from within the hospital network) to page the on-call chaplain.

Christians

The information below is a general guide only. Always check everything with the patient or their relatives. If in doubt, ask them for advice.

Beliefs, Way of Life, History

Christianity is a world-wide religion followed by people of many different cultures and backgrounds. It is still the main religion of the UK, residually affecting language, literature, values, beliefs, laws and culture. At the centre of Christianity is the belief that the nature and purpose of God have been revealed in the life, teachings, death and resurrection of Jesus Christ, a Jewish teacher and healer who lived in Palestine nearly 2,000 years ago. The followers of Jesus established churches whose members sought to continue Jesus' work, in particular by preaching the gospel of love and by helping the sick, injured and dying. Many hospitals in the UK had their origin in Christian belief and practice. In its institutional forms, Christianity divided first between Catholic and Orthodox, later between Roman Catholic and Protestant and later still into a large number of Christian denominations.

Though Christians hold much in common, there is a wide diversity of beliefs, ethical standpoints and forms of worship found within the many denominations and groups, which make up the Christian Church.

Common Features

There are certain features common to all or most Christians:

The Bible

Christians will look to the Bible as a source of comfort, encouragement and inspiration. Wards should have copies of those parts of the Bible known as the New Testament and the Psalms. If not, copies can be obtained from one of the hospital chaplains.

Prayer

Christians do not need to pray at special times of the day, or adopt a particular posture. At times of stress, prayers said by a chaplain, visiting priest or minister may be requested.

Worship

As with other faiths, certain festivals are of particular importance, especially Christmas and Easter. Sunday is the day of worship. Details of Christian worship are circulated throughout the hospitals by the hospital chaplains, or the information can be obtained by contacting the Chaplains' Office at Aberdeen Royal Infirmary. (Tel: 01224 553316)

After-life

A belief in an after-life – or eternal life – is important to all Christians.

Churches in Scotland

In Scotland, the two major groups of Christians are **Protestants** and **Roman Catholics**. There are many faith communities which are **Protestant**, for example: **The Church of Scotland, Baptist, Salvation Army, Methodist, Free Church, Pentecostal, Christian Brethren and Scottish Episcopal Church** (part of the world-wide Anglican communion). **The Roman Catholic Church** is world-wide and diverse and is centred on the leadership of the Pope and the Bishops, and the importance of the Sacraments, especially Mass.

The other main Christian group in the world are the **Orthodox Churches**, found mainly in Greece and Russia. There are not many Orthodox churches in Scotland. It is not possible to describe all the Christian Churches. Further information is available from the hospital chaplains. There will also be a number of patients who, while not belonging to any particular church, will see themselves as being Christian.

Worship

Worship may be usual for many Christians and patients should be helped to attend where possible. If unable to attend, please offer a visit from the hospital chaplain.

Visits from Clergy

The NHS Grampian Spiritual Care Policy requires that the religious needs of patients should be met. They should be given the opportunity to meet with their minister, priest or pastor in quiet, without interruption.

If a patient is a member of a particular church they may request that their own priest, pastor or minister be contacted. The chaplains will do this and will seek to co-operate with them to provide the appropriate spiritual support.

Hospital Chaplains

Hospital chaplains seek to meet the particular spiritual needs of individual patients and will endeavour to respond to specific requests from patients, visitors and staff. For example, requests for prayer, confession, Bible readings, anointing of the sick, Holy Communion, or simply to talk. The Chaplains can be contacted via the Communication Centre. The larger hospitals have Hospital Chapels, which are open at all times and available for those wishing to pray, or simply to have time to sit quietly.

Pre-operative Patients

Roman Catholic patients may request the **Sacrament of the Sick** prior to surgery (this Sacrament is not restricted to those who are dying).

Patients from other denominations may request a visit from a chaplain for prayers to be said. Such a visit can be suggested by ward staff, especially if the patient seems extremely worried. Occasionally, patients may request baptism prior to surgery. Parents of children may also make this request.

Spiritual Healing

Occasionally patients may have visits from ministers/pastors who practice spiritual healing. These visits should be respected but it is recommended that clinical and chaplaincy staff are made aware of patients who are receiving such a ministry.

Holy Communion (Also known as the Eucharist)

Holy Communion is an important part of spiritual devotion for Christians, but especially for Roman Catholics and Anglicans/Episcopalians. Please inform the chaplains about all requests for Communion.

Baptism

Baptism is not only for babies and there are occasions when a person of adult age, who has not been baptised, will make a request to discuss baptism for themselves; or

the request may be made by a family member on behalf of an adult patient. Please inform the chaplains about all requests for baptism.

Diet

There are no universal dietary regulations.

Fasting

Some Christians will wish to give up certain foods during Lent (a 40 day period before Easter). Some will wish to observe Friday as a no-meat day. Some may wish to fast before receiving Holy Communion. Some refrain from consuming alcohol. There are no general rules, but the wishes of the patient should be observed.

Birth Customs

Baptism

For many Christians the baptism of their baby is important, especially if there is a possibility of their child dying before leaving the hospital. Baptism is a visible sign of God's love for a child. Christians from the Baptist Church and the Pentecostal groups do not practise the baptism of babies, but will still appreciate prayers. If parents wish their child baptised the appropriate chaplain, or the family's own minister or priest, should be contacted as soon as possible.

In extreme circumstances, when it is thought that the child will die before a chaplain, minister or priest will arrive, any member of staff may perform the baptism. This is done by sprinkling water on the baby's head, making the sign of the Cross, and saying 'I baptise you in the name of the Father and the Son and the Holy Spirit.' In such a case, the chaplain should be informed in order that pastoral support may be given to the family and for the recording of the baptism.

Naming and Blessing

In circumstances of stillbirth or miscarriage, baptism is not appropriate but chaplains can offer a simple act of Naming and Blessing.

Family Planning

All 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 Catholic teaching is that every life has a divine right to life, including the foetus. Therefore abortion is forbidden.

Death Customs

Dying patients and their carers of all Christian denominations should always be offered 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'. Some practising Anglicans may wish the sacrament of Communion, anointing, laying on of hands or bedside prayers. Most Christians in UK have no formal objection to cremation.

Terminal Care and Death

Christians of all denominations should be offered the support of a chaplain in situations of terminal illness, especially when visitors are with a patient awaiting their death.

- Roman Catholic patients, or their visitors, may request 'The Sacrament of the Sick' (sometimes referred to as the Last Rites). The administration of this sacrament may be recorded in patient records.
- Scottish Episcopal Church/Anglican patients, or their visitors, may request prayers.
- In the event of a patient from an Orthodox Church, contact the hospital chaplain.

Many relatives appreciate the presence of a chaplain in situations where a patient has been declared brain dead and a ventilator has to be switched off. The relatives or carers of a dying or deceased patient may also welcome contact with a chaplain.

Post mortem

There are no general religious rules. Decisions regarding post mortem examinations are taken by the next-of-kin according to their individual beliefs and circumstances.

Contact

Hospital Chaplains

Acute Sector

Aberdeen Royal Infirmary

Ext 53316

Aberdeen Maternity Hospital

Ext 53316

Royal Aberdeen Children's Hospital

Ext 54905

Roxburghe House

Ext 57077

Woodend Hospital

Ext 56006

Dr Gray's Hospital, Elgin

Contact 0345 4566000

Out of hours or in case of difficulty

Ask the Communications Centre to page the on-call chaplain.

Mental Health

Royal Cornhill Hospital

Ext 57293

Out of Hours

Contact Reception at Royal Cornhill Hospital

Ext 57201

Community Hospitals

Each Community Hospital will have contact details for their own chaplain.

Roman Catholic Chaplains

Ask the Communications Centre to contact the Roman Catholic chaplain.

African-Caribbeans

The information below is a general guide only. Always check everything with the patient or their relatives. If in doubt, ask them for advice.

Beliefs, Way of Life, History

The family structure may be complex but the family influence is strong. Every member, no matter how distant a relation, is acknowledged to have a contribution to make to the family and is regarded as important. Some fathers and mothers may not be married and may not even live together. Grandparents are very important in the family structure and often play a major part in the upbringing of the children. The extended family tends to maintain good relations with one another and comes together at the death of one of its members. For those African-Caribbeans born in Britain, the Caribbean influence may be less strong.

In Hospital

African-Caribbeans would probably wish to be treated no different than others. However, those who attend church will feel the need for privacy so they can pray and sing hymns. It is important that the dying person is visited by close and extended family members and also by church and community leaders. Visits may be frequent and prolonged.

At Death

Routine last offices are appropriate and there is no religious objection to staff handling the body. Clothes will be the choice of the parents.

Post Mortems

Some older members of the community are likely to have a firm belief in the sanctity of the body and will be offended by the idea of a post mortem.

Organ Transplants

There is unlikely to be any objections to the receiving of a transplanted organ. However, as older people are likely to believe that the whole body is necessary for the next life, they are unlikely to consent to the removal of an organ. Younger members may have different views.

Funerals

Some are cremated, some are returned to their homeland for burial but most are buried in Britain. The funeral is elaborate and attended by the whole community. It may be delayed for some time to allow everyone to gather together. The body may be viewed many times prior to the funeral either at home or at the church. The funeral service may be longer than some with flowers, carefully chosen hymns and tributes. There may be a steel band, a choir or even gospel singers. At the graveside, the family will fill up the grave themselves only leaving when it is completely filled. The singing may continue throughout and the congregation then return to church for an ongoing gathering. The family home then becomes open for people to call and for prayer and would remain so for about a week.

Contact

Advice may be available from *The Father's House & the Aberdeen Afro-Caribbean Fellowship*

African & Caribbean Christian Fellowship (ACCF) Aberdeen,
c/o Oldmachar Church of Scotland,
Ashwood Park,
Bridge of Don,
Aberdeen
AB22 8PR

Email: accfabdn2001@hotmail.com

Website: www.accfaberdeen.org.uk

or

Contact the **hospital chaplains**: Tel: 01224 553316 (ext 53316).

Out of hours (including weekends), ask the Communications Centre (Tel: 0345 456 6000 or dial 0 from within the hospital network) to page the on-call chaplain.

Christian Scientists

The information below is a general guide only. Always check everything with the patient or their relatives. If in doubt, ask them for advice.

Beliefs, Way of Life, History

The Church of Christian Science began in the late 1800s in Boston, Massachusetts, now the home of its international headquarters. It was founded by an American woman, Mary Baker Eddy. She rediscovered the healing ministry of the early Christian Church when, after a life-threatening accident, she was completely healed as she read her Bible. She wrote of her discoveries in *Science and Health with Key to the Scriptures* which seeks to explain the Bible – the King James Version. Followers of Christian Science base their life and faith upon this book and upon the Bible. The name Christian Science represents the healing laws of God which are available to all who follow Jesus Christ.

- Christian Scientists see God as Divine Love and the source of all healing. They do not believe that this is restricted to any one religion or group of people.
- The real nature of humans is spiritual.
- Christian Scientists are free to depend totally on prayer for healing, or to choose medical treatment.

Worship

Baptism and Holy Communion are not seen as ceremonies but as everyday spiritual renewal through prayer.

A Christian Science practitioner, by law, is not allowed to conduct a marriage ceremony but can conduct a funeral service.

Diet

There are no special dietary requirements based on religion. Christian Scientists do not smoke, drink or take social drugs.

Fasting

There are no particular issues.

Attitudes to Medical Staff and Illness

If a Christian Scientist is admitted to hospital, it can mean that they have agreed to medical treatment but often they request that medication be kept to a minimum. There are no rules to forbid medical treatment. The decision about the type of treatment is left up to the individual. For example, the individual may wish to rely entirely on prayer for healing and may get in touch with a Christian Science Practitioner for help. These are men or women in full time healing ministry of Christian Science with a proven ability to heal. UK law requires that all children up to the age of 16 years receive medical treatment if necessary. Prayer is seen as an important part of healing.

Birth Customs

Minimum medical intervention is appreciated.

Death Customs

Life is seen as eternal and infinite. Heaven and Hell are states of thought and the true nature of all is seen as spiritual, reflecting God.

Contact

There are currently no contacts for Christian Science in Grampian.

Below are contacts in Glasgow and Edinburgh.

First Church of Christ, Scientist, and Reading Room
87 Berkeley Street
Glasgow
G3 7DX

Tel: 0141 248 1698

First Church of Christ, Scientist
11, Young St
Edinburgh
EH2 4HU

Tel: 0131 225 7676

Christian Science Reading Room
15 Waterloo Place
Edinburgh
EH11 3BG

Tel: 0131 556 1860

or

Contact the **hospital chaplains**: Tel: 01224 553316 (ext 53316).

Out of hours (including weekends), ask the Communications Centre (Tel: 0345 456 6000 or dial 0 from within the hospital network) to page the on-call chaplain.

Church of Jesus Christ of Latter-Day Saints

(Sometimes known incorrectly as 'Mormons')

The information below is a general guide only. Always check everything with the patient or their relatives. If in doubt, ask them for advice.

Beliefs Way of Life, History

The Church of Jesus Christ of Latter-Day Saints is sometimes incorrectly referred to as the Mormon Church. The Book of Mormon is central to the beliefs of the church and is regarded as scripture in addition to the Old and New Testaments of the Bible. The Church arose in America in the early 19th century. It has a growing membership of over 7 million worldwide with some 152,000 adherents in the UK. Their headquarters are in Salt Lake City, Utah, USA.

Central to the beliefs of the church is an account of the revelations of many prophets, whose works were written on gold plates and largely compiled by the prophet historian Mormon. Subsequently, Mormon's son, Moroni, added to the plates before concealing them in a hill where they lay for some 14 centuries. In 1823, the resurrected being of Moroni appeared to Joseph Smith and instructed him about the plates. Smith translated the plates into the English language. The plates were then returned to the heavenly messenger Moroni.

The church has no paid ministry and members serve in a Church 'calling' for a period of time as e.g. a teacher or leader. There is no distinction between priests and laymen. The local lay minister is known as a Bishop or a Branch President (depending on the size of the community). 'Home Teachers' and for women 'Visiting Teachers' are given a special assignment to care for Church members and will wish to visit a member in hospital.

Worship

The sacrament of bread and water (Latter-day Saints abstain from alcohol) equates to the Eucharist in other Christian traditions. It is performed each Sunday. All members who feel worthy may participate. Although it may be taken in hospital, it would be regarded as essential for a sick patient.

Administering to the Sick

It is the custom for generally two members of the local congregation who hold the Priesthood to administer to a member who is ill. One would anoint the head of the patient with a small amount of consecrated oil. The second would place their hands on the head of the patient and offer prayer. Some privacy for this practice would be greatly appreciated. Administering to the sick is given to all who request it and is not specifically reserved for the terminally ill. Many members will find comfort in a visit from their Bishop or their Home Teachers.

Baptism

Baptism provides entry into the Gospel. It is very important to the faith and is carried out with immersion. Children are required to be baptised after the age of eight which is

regarded as the 'age of accountability'. Before that, they are deemed incapable of sin. A child who is seriously ill would therefore not require emergency baptism. Baptism is followed by confirmation as a member of the church and as one who has received the gift of the Holy Ghost. This gift provides comfort and guidance throughout life.

Special Garments

Latter-day Saints who have undergone a special Temple ceremony called endowment wear a sacred undergarment. This intensely private item will normally be worn at times, in life and death. It may be removed for hygiene purposes, laundering and for surgical operations, but it must at all times be considered private and treated with respect.

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. Because of this, patients will abstain from tea, coffee, alcohol and tobacco. Some may bring in other beverages (e.g. Barley Cup), which simply require the addition of hot water. Hot chocolate, Ovaltine and other such drinks normally available on a hospital ward are perfectly acceptable. Any prescribed drugs may be taken.

Blood Transfusions, Transplants, Organ Donation

There is no religious objection to transfusion. The church encourages blood donation and makes its meeting houses available for this purpose. There is also no religious objection to donation or receipt of organs. Members are counselled that the decision is one for individuals and families to make, coupled with competent medical advice confirmed through prayer.

Family

Latter-day Saints oppose 'abortion on demand' but recognise that there may be rare cases in which an abortion might be considered (e.g. rape or incest or where the health of the mother is at risk.) Sterilisation should only be considered where medical conditions threaten life or health or where birth defects or serious trauma have rendered a person mentally incompetent and not responsible for his or her actions.

Death Customs

There is no ritual for the dying. Spiritual contact is important. Members of the Melchizedek priesthood may give a 'priesthood blessing' and minister to the sick, both at home and in hospital. Church members will know how to get in contact with their own bishop. There are no special requirements to observe with 'routine' last offices, but the sacred garment if worn, must be replaced on the body. The church teaches that a living being has two elements: the physical body and the spiritual body. Death is the separation of these two elements.

Burial is preferred. Cremation is not encouraged because of important symbolic references to burial in the doctrines of the church but it is the responsibility of the family to decide. The bishop will assist with the funeral service and the arrangements. The body may be viewed prior to the funeral followed by family prayer at the service. At the cemetery, a simple prayer to dedicate the grave site is offered by a bearer of the Melchizedek priesthood who is chosen in consultation with the family.

Post Mortem

There is no religious objection and this would be a matter of family choice.

Contact**Church of Jesus Christ of Latter-Day Saints**

North Anderson Drive,
Aberdeen
AB15 6DD

Tel: 07800 614742

or

Pansport Road,
Elgin
IV30 1HE

Tel: 01343 546429

or

contact the **hospital chaplains**: Tel: 01224 553316 (ext 53316).

Out of hours (including weekends), ask the Communications Centre (Tel: 0345 456 6000 or dial 0 from within the hospital network) to page the on-call chaplain.

Gypsy/Travellers

The information below is a general guide only. Always check everything with the patient or their relatives. If in doubt ask them for advice.

Beliefs, Way of Life, History

The Gypsy/Traveller community in Scotland consists of several distinct groups with different histories and heritage. The four main groups are Scottish Travellers, Irish Travellers, Roma and Romany Gypsies. The common factor between all of these groups is that most members consider the travelling lifestyle to be part of their ethnic identity. Gypsy/Travellers were recognised as an ethnic group in the 2011 Scottish Census. While these groups have much in common, they also have very distinctive cultures.

Not all Gypsy/Travellers travel, some older Gypsy/Travellers and some with young children live in flats or houses but still identify themselves as Gypsy/Travellers. It is estimated that there are approximately 450 Gypsy/Travellers in Grampian at any one time. This number increases in Summer when many Irish Travellers come to Grampian seeking seasonal work. There is reference to Gypsy/Travellers in Scotland dating back to the 12th century.

Gypsy/Travellers have a very strong sense of their own culture, traditions and community. Gypsy/Traveller music, story-telling and art have long been part of Scotland's wider cultural heritage.

Extended family ties are very important to many Gypsy/Travellers. Recent peer research by young Gypsy/Travellers showed that nearly half of those surveyed identified being close to their family or other Gypsy/Travellers as being the 'best thing' about life.

Religion

In the 2011 Census, over 50% of Gypsy/Travellers in Scotland identified themselves as Christian while 37% stated they had no religion.

Language

The 2011 Census showed that 93% of Gypsy/Travellers in Scotland are English speaking.

Attitudes to Medical Staff & Illness

Gypsy/Travellers have a generally positive attitude towards healthcare staff. Local involvement events have shown that nearly all Gypsy/Travellers have had positive experiences when accessing healthcare services in Grampian.

The involvement events also highlighted that female Gypsy/Travellers, especially those with young children, will actively seek out NHS GP registration in each area they visit.

Male uptake of healthcare is generally less frequent and males tend to present later, even with serious health problems. Many males do physically demanding outdoor work in all weathers which can give rise to serious health problems in later life and a life expectancy of anything up to 10 years less than the settled community.

The main issue facing Gypsy/Travellers in Grampian is the chronic shortage of permanent and temporary halting sites. This leads to Gypsy/Travellers being regularly moved on from unofficial halting sites, which makes continuity of healthcare very difficult. It also makes many Gypsy/Travellers wary of officialdom.

Frequent hostility from members of the settled communities over issues such as the use of unofficial halting sites often causes Gypsy/Travellers anxiety and stress and can lead to mental health issues. The media also plays a part in projecting a negative image of Gypsy/Travellers.

Contact

The **hospital chaplains**: Tel: 01224 553316 (ext 53316). Out of hours (including weekends), ask the Communications Centre (Tel: 0345 456 6000 or dial 0 from within the hospital network) to page the on-call chaplain.

Jehovah's Witnesses

The information below is a general guide only. Always check everything with the patient or their relatives. If in doubt, ask them for advice.

Beliefs, Way of Life, History

Jehovah's Witnesses are a Christian religion whose members accept the Bible as the word of God and try to live by its laws and principles.

Jehovah's Witnesses view life as sacred. They are often known for their non-negotiable stand to refuse blood transfusions and for their calling on people at their homes, or wherever they are to be found, to share the good news of God's Kingdom with them.

Jehovah's Witnesses have faith in God but do not believe in faith healing today. Miraculous healing was God's arrangement for a limited time.

In an effort to be helpful, they have established a network of Hospital Liaison Committees who are able to assist in locating sympathetic consultants for the alternative non-blood medical management of their members.

Worship and Festivals

The only festival which is observed is an annual memorial of the death of Christ (the date of which varies) being calculated according to the biblical formula.

Jehovah's Witnesses do not have special rituals that are to be performed for the sick, or for those dying. Every reasonable effort should be made to provide medical assistance, comfort and spiritual care needed by the sick patient.

Diet and Fasting

Jehovah's Witnesses, in harmony with their scriptural beliefs (Acts 15:28,29), are required to abstain from eating blood, i.e. blood sausage and from animal meat if the blood has not been properly drained. Apart from this, there is no restriction on what is to be eaten and fasting is not carried out.

Moderate use of wine and other alcoholic beverages is not condemned in the Bible, but drunkenness is. (1 Timothy 5:23, Deuteronomy 14:26, Ephesians 5:18). Similarly, Bible principles of moderation and respect for one's life and mental faculties would rule out taking drugs for 'highs' and thrills or to produce a form of drunkenness. The taking of mind-altering medications and drugs, including narcotics for severe pain, under the supervision of a medical practitioner, would be a matter for personal decision, though one would not want to resort too quickly or without good cause to drugs that were addictive or hallucinatory if other effective methods of treatment were available, or if endurance of temporary pain would be the wise and preferable course.

Attitudes to Medical Staff

Blood Transfusions

Jehovah's Witnesses believe that blood transfusion is forbidden by biblical passages such as 'Abstain from . . . fornication and from what is strangled and from blood' (Acts 15:19-21) (Gen 9:3,4) (Leviticus 13:13,14). Witnesses view these scriptures as ruling out transfusion of whole blood, packed red blood cells, white blood cells, plasma and platelets. However the Witness' understanding does not absolutely prohibit the use of minor blood fractions, such as albumin, clotting factors and immunoglobulins. Each Witness must decide individually whether he or she can accept these.

Refusing blood does not make Jehovah's Witnesses anti-medicine. There are many effective medical alternatives to allogenic/homologous blood. For example, non-blood volume expanders are acceptable and reinfusion of their own blood is permitted by many Witnesses when the blood is not stored and when the equipment is arranged in a circuit that is constantly linked to the patient's circulatory system.

Every one of Jehovah's Witnesses will carry on their person an Advance Medical Directive/Release document. This document directs no blood transfusions to be given in any circumstances, while releasing the doctors/hospital of responsibility for any damages that might be caused by their refusal of blood. Many Witnesses have also prepared a comprehensive 'Healthcare Advance Directive'. When entering the hospital, consent forms should be signed that state matters similarly and deal more specifically with the treatment required.

In a rare emergency situation where doctors may feel the need to obtain a 'Specific Issue Order' to impose medical care to which the parents - in the case of a child - have not given consent (such as administering a blood transfusion), the parents should be informed of such intended action as early as possible so that they also can be represented in court.

Immunoglobulins, Vaccines

The religious understanding of Jehovah's Witnesses does not absolutely prohibit the use of minor blood fractions such as albumen, immunoglobulins and haemophiliac preparations. Each Witness must decide individually whether he can accept these. Accepting vaccines from a non-blood source is a medical decision to be made by each one.

Organ Donation and Transplantation

While the Bible specifically forbids consuming blood, no biblical command pointedly forbids the taking in of tissue or bone from another human. Therefore, whether or not to accept an organ transplant is a personal medical decision. The same would be true of organ donation.

Decision-Making and Treatment

Information

The patient (particularly in obstetric emergencies) or the parents/guardians of young children should be fully informed on diagnosis, prognosis and treatment

recommendations so informed health care decisions can be made. Parents have the natural and legal right to make such decisions for their children. In a rare emergency situation where doctors may feel the need to get a 'Specific Issue Order' to impose medical care to which the parents have not given consent (such as administering a blood transfusion), the parents should be informed of such intended action as early as possible, so that they also can be represented in court.

Birth Customs

There are no special requirements. Any particular requests or practices will be due to individual preference.

Baptism

This is carried out in harmony with Matthew 28:19,20 which mentions baptism for those who have been taught.

Family Planning

Deliberately induced abortion simply to avoid the birth of an unwanted child is wilful taking of human life and hence is unacceptable to Jehovah's Witnesses. If, at the time of childbirth, a choice must be made between the life of the mother and that of the child, it is up to the individuals concerned to make that decision.

Death Customs

Jehovah's Witnesses do not have special rituals that are to be performed for the sick, or for those dying. Every reasonable effort should be made to provide medical assistance and comfort. Spiritual care will be provided by local Witnesses (friends, family and elders).

Seriously Ill, Dying Patients, Prolongation of Life and Right to Die

Life is sacred and the wilful taking of life under any health care circumstance would be wrong. For this reason, reasonable effort should be made to sustain and prolong life. This does not mean that extraordinary, complicated, distressing or costly measures be taken to sustain a person if the medical consensus is that this would merely prolong the dying process and/or leave the patient with no quality of life. Obviously, any advance directions by the patient that specifically defined what was or was not wanted should be respected. (This would usually be stated in the comprehensive 'Health-Care Advance Directive').

Post mortem

Unless there is a compelling reason, such as when an autopsy is required by a governmental agency, Jehovah's Witnesses generally prefer that the body of a beloved relative is not subjected to a post mortem dissection. The appropriate relative(s) can decide if a limited autopsy is advisable to determine cause of death, etc.

Contact

For pastoral requests for patients who are Jehovah's Witnesses, contact local ministers:

George Price
Tel: 07450 597182

Hugh Watt
Tel: 07709 330310

For clinical matters, please contact the Aberdeen Hospital Liaison Committee:

Michael Hurley
Tel: 07770 440164
Email: mhurley@jw-hlc.org.uk

David Gilmour
Tel: 07862 799775

or

Contact the **hospital chaplains**: Tel: 01224 553316 (ext 53316). Out of hours (including weekends), ask the Communications Centre (Tel: 0345 456 6000 or dial 0 from within the hospital network) to page the on-call chaplain.

Hindus

The information below is a general guide only. Always check everything with the patient or their relatives. If in doubt ask them, for advice.

Beliefs, Way of Life, History

The Indian community in Britain consists of people from different parts of India. There are differences in customs, habits, languages, food, worship, dressing/clothes etc. between these parts. Many Indians are from Gujarat State who came directly from India or East Africa in the 1950s and 60s. Others come from Punjab, Bengal and South India. Hinduism is the majority religion in India.

For Hindus, the purpose of human life is to make a conscious effort to realise/merge with God by living a moral and ethical life, serving fellow human beings and creatures. People can make spiritual contact with God the Creator and Supreme Spirit and therefore realise God. The *Divine* is worshipped through 3 images: Brahma, Vishnu and Shiva. Hindus also believe that if they are not able to realise God in this life, they will be born again (through reincarnation) in this world to continue their pilgrimage until Moksha (salvation/no more births). A Hindu's destiny in life is known as Dharma and their situation in life is determined by *consequences of actions* in previous lives - this is known as Karma.

Care and concern for all beings is fundamental to Hinduism and is often shown through individual acts of kindness. For example, every pious Hindu is expected to keep aside some food for the arrival of an unexpected guest - no one should be turned away hungry from his door. 'Guests invited or not should be treated like the Lord Himself.' Because of the sacredness of all life, 'ahinsa' (non-injury) is cherished as one of the highest principles. This makes Hindus reluctant to consume other creatures as food.

Worship

Worship (Pujah) can take place in a temple (Mandir) or at home, where a family altar or shrine exists. Hindus will usually wish to pray twice or more daily. Where possible, incense will be burnt and holy books and prayers beads are used. Hindus worship God through different symbolic deities and images, used to personify divine qualities. The 'gods and goddesses' worshipped are symbols of the Divine. Depending on what a person wants to achieve, they worship that particular form as a facet of the One Reality – God. God is symbolised by the monosyllable word *Om* or *Aum*, the sound of creation. Hindus believe only in one God and he is omnipotent, omnipresent and omniscient. All deities are different manifestations of the one God. Hindus draw great comfort and confidence in having a picture of their favourite deity near them (at the bedside in a hospital) and offer flowers/fruits and light a candle/oil lamp in a mode of worship to assist in quick recovery from illness.

Religious Festivals

There are many Hindu festivals, the main ones are:
Ram Navami (March/April) - birthday of Lord Rama
Shivaratri (night of Shiva)

Krishna Jayanthi (birthday of Lord Krishna)
Navaratri - nine-day celebration with Durga Puja
Diwali or Deepawali (Festival of Lights)
Holi (Spring festival)

Diet

Amongst Hindus, food and its preparation are linked with concepts of purity and pollution. These in turn are linked with the concept of class in which the priestly class (Brahmin) is thought to be the most pure by virtue of their clean habits, spiritual practices and strict adherence to the code of conduct laid down in the scriptures and therefore in most danger of being polluted. In general, Brahmins (of which there are several sub-types) are permitted to eat food that is prepared by the members of their own class and the lower classes, being the most polluted have fewer restrictions on what they eat. However these restrictions depend on the orthodoxy of the individual family and will be manifest in hospital as the refusal of hospital food in the extreme case.

- Most Hindus, especially older men and women, are happier with a vegetarian diet although they may eat fish, chicken, lamb or egg dishes. Some may choose not to eat eggs (Vegan). There are no restrictions on how the slaughter has to take place. Dairy products are acceptable so long as they are free of animal fats.
- **Beef is never eaten** as the cow is considered to be a sacred animal and dairy products are considered to be auspicious as they are used in all forms of worship. In modern times and amongst *some* Hindus, pork will be taken but this is rare.
- **Special Days** – meat or fish or even eggs will not be consumed at all on sacred days, which are dependent on the phases of the moon. Hindus follow a lunar calendar, which is different from the Islamic lunar calendar. On such days, there may be restrictions on the type of food eaten, whether it is cooked or not or whether it is prepared in a certain way. At such times, milk and yogurt, fresh fruit and certain vegetables such as potato or sweet potato may be consumed. Certain foods, such as sago cooked in milk or coconut milk are also permitted.

Certain Foods / Medicine

Some Indians may have strongly held traditional ideas about taking certain foods at particular times – for example, it is considered unwise to take milk or any citrus fruit when suffering from a cough.

The beneficial aspects of certain foods, for example, chewing of sugar cane and the eating of mung beans during the recovery from hepatitis, will depend on the region the individual comes from. Ginger is thought to be very beneficial to digestion and will be used widely to combat nausea. Other variations of **Ayurvedic (Indian)** medicine may occur and it is advisable to ask patients if they are currently engaging in these.

There is no rule against the consumption of alcohol, but in general terms it is frowned upon, especially amongst women.

Fasting

Fasting is not uncommon among Hindu women, especially widows and elderly. For special festivals and sacred days, men and women fast. This can interfere with fluid

balance, pain control, etc. and it is worth trying to get the family to discourage the patient from fasting. Very few Hindus would insist on fasting when in hospital. At the end of a period of fasting, visitors may bring in 'prasad' so that the patient can join in the celebration. This will be in the form of a small quantity of food, perhaps sweets, which has been offered to God in thanksgiving and is now shared amongst those present.

Washing and Toilet

Hindus will need water for washing in the same room as the toilet itself with a plastic bucket and a plastic cup-like container. If there is no tap, or if a bed-pan has to be used, they will be grateful to have a container of water provided. Patients much prefer to wash in free flowing water, rather than sitting in a bath. As Indian food is taken using the fingers, the washing of hands before and after meals is customary. It is regarded as unclean to use the same hand that is used for toileting as that for eating or performing religious ceremonies. Washing hands before handling or consuming food with fingers and washing the mouth a couple of times with water after every meal is a must for Hindus. Most Hindus will take a bath in the morning and change their clothes.

Ideas of Modesty

Modesty is a cultural attitude. A Hindu woman is likely to have a strong preference for a female doctor when being examined or treated. They should be accommodated in mixed wards only in an emergency situation. Hindu women particularly are often reluctant to undress for examination. Disregard for modesty can cause extreme distress. Discomfort, pain and problems in genito-urinary and bowel areas are usually not spoken about by Hindus. These areas especially are not spoken of if the spouse is present. A female patient will find a short hospital gown embarrassing.

Dress

Dress codes are observed mainly by older women. They tend to wear a Sari or Punjabi suit (2 piece dress worn over trousers). Men tend to wear western clothes. Women may also wear bangles or a thread – these should not be removed without permission. Some Hindus wear a red spot on their foreheads or scalp. These should not be removed or washed off without permission.

Names

A Hindu patient is likely to have three names – personal name first, a complimentary name in the middle, then a family name: e.g. Arima Kumari Chopra. For Gujerati men, the middle name is the surname for records - father's personal name plus an ending e.g. Mohanas Karamchand Gandhi. Women do not usually use their father's personal name as a middle name, so they have only personal and family names.

Attitudes to Medical Staff & Illness

Hindus will in general accept the authority of medical staff and be co-operative during treatment. However, it is as well to ask if any alternative medicines or home remedies are being used at the same time and what they are in case they clash with treatment.

Blood Transfusions, Transplants, Organ Donation

There are no religious objections for Hindus to blood transfusion or organ transplants. Some Hindus may be averse to organ donation because of their belief in re-incarnation.

Birth Customs

This is a joyous time for all Hindus; male children are generally likened to Krishna and female children to the goddess of wealth and prosperity, Laxmi.

- Family members may visit the mother very soon after the birth and sweets are distributed to friends and family alike. Some Hindus may give alms to temples or to Brahmins and distribute money to the poor.
- The time of birth is crucial to the minute and will be taken down in order to cast a child's horoscope, which will be done by the family astrologer. In casting the horoscope, the priest will come upon an auspicious consonant or vowel that is to begin the name of the child. The child will then be named accordingly on the 10th or 12th day post-natal in a non-religious ceremony where friends and relatives are invited to attend. Naming ceremonies vary from region to region in India.

The mother rests at her maternal home for three months. Traditionally, the first child is always born at the maternal grandmother's house where the expectant mother has been staying since she was seven months pregnant. The mother and baby are massaged with oil and bathed with hot water every day. Certain special foods are prepared for the mother in order that her milk production is at an optimum.

It is an important part of Hindu motherhood to be as clean as possible from the continuing period of menstruation after birth. Menstruation in general is thought to be a pollutant.

There may be reluctance to get up for a bath within the first few days after birth, as this is based on the belief that a woman is at her weakest at this time and very susceptible to chills, backaches, etc.

The child's head is shaved in the first, third or fifth year of age. A sacred thread ceremony may be performed for a 7-year-old boy.

Family Planning

There is no objection to family planning on religious grounds. However, there may be strong pressure on the woman to conceive – particularly if no son has yet been born – and it is advisable to involve her husband in any discussions of family planning.

Death Customs

In general, Hindus prefer not to have medical intervention after death but will accept it if it is legally or medically unavoidable. Hindu beliefs and practices vary considerably. It is helpful to ask the patient or his family the nature of their religious observances. If a Hindu patient is dying in hospital, relatives may wish to bring money and clothes for him to touch/bless before distribution to the needy. If the visitors are not to go to the bedside themselves, they will be grateful if a nurse can do this for them while they wait. Some relatives will also welcome an opportunity to sit with the dying patient and read from a holy book.

Hindu priests, called *pandits*, will often help dying patients with their acts of worship and to accept their death philosophically. This includes tying a blessed thread (*Yagyopavit*) around the neck or wrist of the patient. The priest may also sprinkle blessed water from the Ganges over the patient, or place a sacred Tulsi leaf or drops of ghee (butter) in the dying person's mouth. To avoid great distress, a Hindu patient should be allowed to die at home if appropriate.

After Death – Adults:

The body should always be left covered in white. Relatives may wish to wash the body and put on new clothes before taking it from the hospital. If the deceased is a married woman whose husband is still alive, she is considered to be blessed and will be bedecked as a bride. Traditionally the eldest son of the deceased should take part in this. Customs in death vary. Some place the body on the floor and light lamps while incense burns; others do neither. There are no restrictions on non-Hindus handling the body provided it is wrapped in a plain sheet.

In the absence of family, the health staff should wear disposable gloves and close the eyes and straighten the limbs of the deceased. Sacred objects should not be removed. Relatives would use drops of holy water (from the Ganges) and mix it with the water used to wash the body during the funeral ceremony. Most Hindus will prefer cremation. Ashes can be scattered in any flowing river but the Ganges is ideal.

Death of a Child

Gloves should be worn by non-Hindus when touching the body. The family normally wish to perform the Last Offices themselves, so wrap the child in a plain white sheet and await the arrival of the relatives.

Ideally, Hindus are cremated on the day of death but the formalities in Britain make this impractical. However many families will wish to have a death certificate issued as quickly as possible so that they may take the body home or to the funeral directors on the day of death. Children under age of five years are not cremated, but buried.

Post Mortem

Post mortems are not generally approved of but are accepted if required. Hindus will be anxious that all organs are returned to the body before cremation (or burial for children under 5 years old) – to safeguard peace in the afterlife.

There are currently no facilities for Hindu in Grampian.

Contacts

Mr Allagappan Nachiappan,
President Aberdeen Hindu Association
Email: contactus@aberdeentemple.co.uk

Tayside Hindu Cultural and Community Centre
(Open Sunday and feast days only)
10 Taylor's Lane
Dundee

DD2 1AQ
Tel: 01382 669652
Email: info@taysidehinducommunity.org

or

Contact the **hospital chaplains**: Tel: 01224 553316 (ext 53316).
Out of hours (including weekends), ask the Communications Centre (Tel: 0345 456 6000 or dial 0 from within the hospital network) to page the on-call chaplain.

Humanists

The information below is a general guide only. Always check everything with the patient or their relatives. If in doubt, ask them for advice.

Beliefs, Way of Life, History

Humanism is a broad term covering a wide range of ideas and concepts; however, most humanists would class themselves as being atheists or agnostics. Atheists deny the existence of God, or gods and agnostics assert the impossibility of having any knowledge of God or ultimate things. Naturally, these definitions do not say anything about positive beliefs or values, Humanism does. Humanism is an optimistic and ethical approach to life, a belief in the abilities of human beings to overcome problems by drawing on the creativity and compassion that exists in each human being so building a better and fairer society for all. In doing this, Humanists look to reason and rationality in trying to explain our existence and solve our problems, they reject the use of supernatural beings or phenomena in accounting for the world in which we live, or the fortunes and misfortunes which affect our lives.

Humanism draws on a great many philosophical strands but has no fixed doctrine. Instead Humanists have an open-minded and tolerant attitude to most issues. They tend to judge individual situations compassionately, looking at short and long term consequences for themselves and other individuals involved. Personal freedom and choice are important values because they are essential to personal happiness, as long as in exercising those freedoms and choices an individual does not interfere with anyone else's freedom, happiness or security. Essentially, there is a strong element of 'common sense' in Humanism.

There are many issues which exercise the Humanist mind from fair-trade and global warming to the elimination of poverty, racial and sexual discrimination and political and religious intolerance. However, among the issues relevant to healthcare, Humanists would be in favour of legal voluntary euthanasia (with appropriate safeguards) for adults. Given the values and attitudes of Humanists, it is not surprising that Humanists have always been strong advocates of birth control. Unlike some opponents of birth control, Humanists do not believe that contraception is wrong because it 'interferes with nature'. If contraception results in every child being a wanted child and in better, healthier lives for women, it would be seen as a good thing.

Although all these issues are important to Humanists, they are only part of the Humanist objective that is to live a good and full life believing that this is the one life there is, there being no 'second chance' through resurrection, reincarnation or any form of 'after-life'. In doing this, Humanists believe they create a better world for themselves, for those around them and for the generations to come. Much of this can be summed up in the Chinese proverb 'If there is light in the soul, there will be beauty in the person. If there is beauty in the person, there will be harmony in the house. If there is harmony in the house, there will be order in the nation. If there is order in the nation, there will be peace in the world'.

Diet

There are no special requirements, diet is left to an individual's own choice.

Blood transfusions, Transplants, Organ Donation

There are no special requirements or practices.

Birth Customs

There are no special customs; however, Humanists can provide a non-religious naming ceremony.

Death Customs

There are no special customs. Humanists do not believe in life after death because they believe there is no evidence for this. Humanist funerals are a celebration of a person's life carried out by trained and experienced celebrants, the ceremony being constructed around the 'life-story' of the deceased and containing a mix of music, poetry and personal contributions from friends and family of the deceased. Funeral ceremonies are highly individual and are usually held in a crematorium, cemetery or woodland burial ground but more unusual locations such as the home, village hall or even pub have also been requested. The tribute to the deceased is nearly always based on an interview with the next-of-kin, however, celebrants do when requested meet with the terminally ill to help prepare a funeral and this can be arranged through the contacts listed below.

In the event of a query, the Humanist Society Scotland will forward the inquiry to the most appropriate person to respond.

Contact

Humanist Society Scotland

Tel: 0300 302 0680

Email: admin@humanism.scot

Website: www.humanism.scot

Jews

The information below is a general guide only. Always check everything with the patient or their relatives. If in doubt, ask them for advice.

Beliefs, Way of Life, History

Judaism has been in existence for 5,500 years and was founded by the prophet Abraham. It is based on the belief in one universal God seen by Jews in a purely personal relationship. The love of God and the wish to carry out the Ten Commandments as given to Moses on Mount Sinai is central to the teaching of the Pentateuch, the first 5 books of the Old Testament, a portion of which is read every Sabbath in synagogues. The religious precepts followed are to worship one God, to obey the Ten Commandments and to practice charity and tolerance towards fellow human beings.

Jewish religion and culture are inextricably mixed. There are a number of different Jewish traditions present in the UK, each with different styles of observance, from the most observant (Orthodox, Hasidic, Haredim) to Masorti, Reform and Liberal. After many centuries of dispersal from Israel (their land of origin) many Jews have adopted food habits, dress and modes of behaviour of the host countries. Most Jews in Scottish hospitals will be totally European.

Worship

Observant Jews pray three times a day and privacy at prayer times would be appreciated. The provision of a room for prayer is welcome but not essential. Men are required to wear prayer shawls and phylacteries (a small leather box containing biblical texts) at some sessions.

The Jewish Sabbath (Shabbat) begins 1 hour before nightfall on Friday evening and ends with the first sighting of three stars on Saturday night. For Orthodox Jews, this is a complete day of rest and there are synagogue services on Friday evenings and Saturday morning and afternoon. In emergencies, any necessary activity is permitted on Shabbat if life or health is threatened.

Religious Festivals

The Jewish calendar follows a lunar cycle and the dates of the festivals changes from year to year. The main festivals are:

Rosh Hashana – New Year (September/October)

Yom Kippur – Day of Atonement (10 days after Rosh Hashana)

Pesach – Passover (March/April)

Shavuot – Pentecost (May/June)

Sukkot – Tabernacles (October)

Diet

There are strict Jewish laws of Kashrut (commonly called Kosher). Food regulations are complex. Jews will only eat meat which is killed and prepared by their own religious-trained personnel. (This ensures that as much blood as possible is drained from the meat before it is prepared and cooked, by soaking and salting it for some time).

Jews who are observant will not take milk and meat in the same meal and will generally wait three hours between these kinds of foods. (Some very orthodox people wait six hours; others only one). A Kosher household will keep meat and milk utensils, crockery and cutlery rigidly separate. Most Jews will eat eggs and some fish. Only fish with fins and scales are permitted. There are prohibitions on shellfish and fish without fins and scales, such as eel and shark. However, many religious Jews will not eat any food prepared in the hospital kitchen.

Orthodox Jews only use food which is rabbinically certified to comply with these regulations. Many seemingly innocuous items contain meat products, such as rennet in cheese or gelatine in jellies and yoghurts. Therefore, very observant Jews may refuse any food, which is not certified, including milk and cheese; they will also not regard product labelling as reliable evidence, since often different products are produced using the same equipment.

At Passover time (March/April), restrictions are even stricter. Only unleavened foods may be eaten, that is those that do not swell when water is added. This means that no bread or products containing starch are taken for 8 days. Many Jewish patients including those who may be less observant at other times may only eat food brought in by family at that time or especially rabbinically certified for Passover (Kosher for Passover/Pesach).

Kosher food is available through the hospital catering services who purchase this from companies which have all the relevant accreditation to produce kosher food. Meals should be heated and served in the containers provided, as religious Jews may not use the crockery or cutlery provided by the hospital. In the absence of Kosher meals, a vegetarian diet may be acceptable to most patients in the short term.

Fasting

There are several minor fasts in the religious calendar but the most prominent is the Day of Atonement (Yom Kippur). It is the holiest day in the Jewish calendar and one that is considered to set the pattern for the year to follow. If health permits, most Jews would prefer to observe that fast and spend a day in quiet penitential prayer, but if medication is essential, the religion allows for this, although the patient may wish to consult a Rabbi first.

Washing and Toilet

On waking, Jews are religiously enjoined to wash their hands and 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.

Modesty

Modesty in dress is important. Observant Jewish women would rather be examined and treated by female doctors. However if this is not possible, treatment by male staff is acceptable. Very orthodox Jews prefer to keep their head covered, men by a skull-cap and women by a scarf or a wig.

Attitudes to Medical Staff

The medical profession is treated with great respect. There is very little mystique about medicine within the community and medical staff are likely to find that many pertinent questions are asked by the patient and family. The close-knit family ties may bring extra questioning from the relatives. Since there is a requirement upon Jews to be aware of bodily functions, of diet, ablution and mode of life, he or she is likely to be a questioning patient.

Blood Transfusions, Transplants, Organ Donation

It is essential to deal with each situation individually as changing medical ethical views and practices in Israel and elsewhere may well influence attitudes amongst Orthodox Jews. Most Jews will have no objection to transfusions, transplants and organ donation. Religious Jews may wish to consult with a Rabbi before giving consent.

Birth Customs

Judaism is a family-orientated religion and therefore the birth of a child is a very joyful and shared occasion. A healthy male boy must be circumcised on the 8th day after birth, although a premature or unhealthy baby could delay this. The ritual is performed by a trained and medically certificated religious functionary, called a Mohel.

If the mother and child are still at the hospital, a small room may be requested and others of the family will attend the ritual and name the child. Today it is usual for the mother and child to have returned home by the eighth day, so that a hospital may not be called upon to participate in any way.

Family Planning

Jewish law limits the use and methods of contraception. Accordingly religious Jews will wish to consult with a Rabbi before using them. Nevertheless almost all Jews will use some method of family limitation. The pill is widely used.

Death Customs

There are specific Jewish laws and customs dealing with the dead. It is important to contact the family as soon as possible. No mutilation of the body is allowed unless there is a legal requirement for a post-mortem. The funeral usually takes place within 24 hours of death and cremation is forbidden. However less orthodox Jews may prefer cremation.

A member of the community (usually with 3 others present) will prepare the body for burial. It is washed and shrouded before being placed in the coffin. Prayers are said. In the event of death of a Jewish person, the following guidelines apply:

1. Do not touch body until 20 minutes after death.
2. Do not wash the body – this will be done ritually prior to burial.
3. Do not remove false teeth or other prosthesis.
4. Close the eyes.
5. Straighten the body out, lying flat with feet together, and arms by the side.
6. Cover the body with a plain white sheet without emblems.
7. If no family, notify the Hebrew Burial Society, or local Jewish community.

If it is the Sabbath or a Festival, the body cannot be removed. In hospital the body is best moved to a room where it can remain until representatives can remove it. There may be a request for candles to be lit.

Jewish law requires the burial of miscarried fetuses, amputated limbs and removed organs, which should be kept intact and delivered to the family.

Death of a child

The body of a child should be treated in the same way as an adult. Jewish law requires the burial of miscarried fetuses.

Post Mortem

Post mortems are not permitted unless legally required.

Contact

Mark Taylor,
Treasurer,
Aberdeen Synagogue,

Tel: 01975 564308 (Home)

Mobile: 07967 323796

or

Contact the **hospital chaplains**: Tel: 01224 553316 (ext 53316).

Out of hours (including weekends), ask the Communications Centre (Tel: 0345 456 6000 or dial 0 from within the hospital network) to page the on-call chaplain.

Muslims

The information below is a general guide only. Always check everything with the patient or their relatives. If in doubt, ask them for advice.

Beliefs, Way of Life, History

Islam is the name of the religion followed by Muslims and its literal meaning is 'Complete submission to the will of God (Allah – Glorified and exalted)'. A Muslim bears witness that there is no God except Allah and that he has no partners associated with him and that Mohammed (Peace be upon him = pbuh) is the last and final messenger of God.

Being a Muslim involves obeying the commandments of Allah (swt = Most glorified and exalted), as revealed to the Prophet Mohammed (pbuh) in the Qur'an, and following the way of life prescribed by the Prophet Mohammed (pbuh) which leads to success in this life and the hereafter. Muslims believe in:

- Allah (Creator of the Universe and all therein, the Omnipotent)
- His revealed Books (Psalms, Torah, Gospel, Qur'an)
- The Messengers of Allah (including Adam, Abraham, Moses, Jesus... and Mohammed as the seal of the messengers)
- The Angels (Gabriel, Michael ...)
- That every good and bad fate is decided by Allah-swt
- The day of Judgement and Life after death

There are Five Pillars of Islam (Basic principles / duties of belief and practice):

1. To bear witness that 'there is no God but Allah, Mohammed is the Messenger of Allah'.
2. Five times daily prayer performed at specific times. The timings are broadly as such:
 - Dawn (*Fajar*)
 - Just after noon (*Zuhur*)
 - Afternoon / Evening (*Asr*)
 - Following sunset (*Maghrib*)
 - Night time (*Isha*)

The timings will vary according to the time of year

3. Yearly payment of charity (Zakah) – for those who are able
4. Fasting during the month of Ramadan
5. Pilgrimage to Mecca (Hajj) – once at least, if one can afford it

The majority of Muslims that one will meet in Britain are of Pakistani, Indian or Bangladeshi origins and a smaller number will be from the Middle East, Africa and the Far East, as well as other nations. It is important therefore to consult patients regarding their religious and cultural practices in addition to being aware of their religious obligations.

Worship

One of the major acts is performing five daily prayers (*salat* in Arabic). Muslims require to wash in a prescribed manner before prayer and then require a reasonably clean place to prostrate themselves. If possible, Muslim patients should be shown a quiet area that they can use for praying, or alternatively the curtains can be drawn around the bedside.

Prayer is performed facing towards the Holy place at Mecca and this direction can easily be established for each ward. In addition, patients prefer not to sleep with their feet in this direction. If patients or relatives are able to, they may use hospital chapels and quiet rooms for prayer. Prayer mats are available. This is particularly important for congregational prayer on Friday lunchtime.

Foresterhill Mosque facility

There is a Mosque on the Foresterhill Site located to the rear of the Maternity Hospital, near the IM&T building. Friday prayer takes place there at lunchtime and the Mosque is open for regular prayer at any time of the day. Because this is in a separate building, it may not be suitable for patients to attend. If the available time or the circumstances make it difficult to perform prayer at the Mosque facility, there is always the choice of performing it in one of the chapels available in every hospital within NHS Grampian. However, the Friday prayer is only held at the Mosque facility.

Religious Texts

The Muslim Holy Book is the Qur'an - it is the revelation of Allah as revealed to the Prophet Mohammed (pbuh). The language of the Qur'an is Arabic. However, translations of the meanings of the Qur'an exist in many languages including English.

Religious Festivals

The Muslim calendar is lunar, meaning that festival dates cannot be conclusively dated far in advance as they depend on the sighting of the new moon for the beginning of a new month.

Eid al-Fitr: This festival marks the end of the Ramadan month of fasting.

Eid al-Adha: The festival of sacrifice that marks the end of Hajj.

Diet

Muslims are permitted to eat and drink HALAL food only. HALAL means lawful. Islamic law requires that Allah's name is invoked at the time of slaying of an animal for food. (Note: fish and eggs are Halal). Muslims are not permitted to eat and drink HARAM food. HARAM means unlawful. This includes the meat of animals not slain in the prescribed manner. Other things that are Haram are alcohol, pig meat products and lard. Halal meat must be obtained from a Halal butcher. Please note that food purchased from Pakistani / Bangladeshi restaurants is generally Halal. Islam promotes healthy eating. However, some Muslims will prefer, according to their culture, their food well cooked and well seasoned with herbs and spices even when ill.

Fasting

Ramadan for Muslims is a month of blessing and mercy. Fasting is prescribed during this month and helps develop self-restraint and sacrifice. A fasting Muslim will have a small meal before dawn and then refrain from taking food, drink or sexual actions from

dawn till sunset when the fast is broken. There are exemptions from fasting and these are:

- Women in menstruation
- Pregnant or breast-feeding women
- Persons who are sick or convalescing
- Persons on a journey

If a doctor feels that it is necessary for a patient's health to eat or drink or take medicines then this should be explained to the patient with the above factors in mind. Missed fasts due to the above reasons can be made up later.

Washing and Toilet

Muslims attach great importance to cleanliness. They need water in toilets (toilet paper on its own is not considered adequate); if a bedpan has to be used, a container of clean water should be provided. Muslims prefer to wash in free flowing water and cannot accept the idea of sitting in a bath.

Ablution before each prayer is necessary. The worshipper washes hands, rinses the mouth, cleans the nostrils, washes the face, arms up to the elbows, wets hands and runs them through the hair (to remove any dirt or particles), cleans inside and behind the ears and lastly washes the feet up to the ankles – each of the above three times. After menstruation, women are required to wash their whole bodies. It is regarded as unclean to use the same hand that is used for toileting as that for eating or performing religious ceremonies.

Dress

Muslim women are required to cover their whole body other than for the face and hands. Clothing must be loose enough not to show shape or outline of the body. Some women, however, will make the personal choice of also covering their face with a veil as well as covering hands. Muslim men are also required to dress conservatively.

Names

Confusion may arise when recording names. A Muslim may have several personal or religious names and sometimes a family name – e.g. Amjad Mohammed Hussein. It is important to establish from the patient his/her correct name for legal purposes. In particular, it is worthwhile noting that Pakistani women often have the name 'Bibi' or 'Begum' as their last name. This is their legal name (i.e. it does not apply to her husband or children). Literally translated it means Madam or Mrs.

Ideas of Modesty

Generally a Muslim woman is not allowed to be examined or be 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 at all to be examined or treated by a male member of medical staff. In Islam free mixing of sexes is prohibited. Islamic law (Sharia) states that there should be no physical contact between a woman and any man other than a direct relative (husband, son, father or brother). Muslims should be accommodated in mixed wards only in emergency situations. This is an area in which an open-minded and helpful approach by staff could be particularly helpful – for example when a female patient finds it difficult to accept a hospital gown because of its shortness.

Attitudes to Medical Staff and Illness

A Muslim believes that whatever takes place, good or bad, can only take place with the consent of Allah and according to his judgements and distinction, as nothing can happen against his will. In adversity and calamity, a Muslim is forbidden to despair and is required to be patient, seeking help through prayers and remembrance of Allah.

Blood Transfusions, Transplants, Organ Donation

Blood transfusion and transplant are accepted with reluctance in most cases; however the decision is one which lies with the individual patient or family. The question of organ donation has been much discussed and, although it has been declared as permitted, it is a complicated issue and will often be met with reluctance. As always, the decision lies with the individuals and their family who may wish to consult their local religious leaders.

Birth Customs

In the Islamic faith, becoming a mother is regarded as one of the most beautiful and exciting events that can happen to a woman. For this reason a lot of emphasis is placed on ensuring that a woman gets the best possible care and attention during her pregnancy.

Ante-Natal Care

One of the concerns Muslim women may have during the ante-natal period is that they will have to be seen by a male member of staff. Details about any care and options available to the mother should be outlined early on. If there are any language problems, it would be helpful to have an interpreter available during appointments. Informing women about the following details would be helpful: (their country of origin may not have provided the services which we have here in this country):

- Do tell them about the different health care professionals they are likely to meet during their pregnancy and what each one provides.
- Do tell them about the different tests they can have during pregnancy to ensure the unborn child is well. (For more information see below).
- Do tell them about birth plans and the choices available to them, where they can deliver their child. Many Muslim women like the idea of having a home birth and for some the 'Domino' scheme may be more appropriate. The fact these options are available in contrast to the usual hospital birth can be very reassuring for the mothers to be.
- Do tell them about ante-natal classes available to them. However please note that not all Muslim women will be happy with the idea of attending classes where partners are also invited to attend. For them perhaps a confidential chat about ante-natal classes or a home video which gives information on this subject may be more suitable.

You may wish to note that it is traditional for Muslim women to keep their fathers surnames, even after marriage. This is often why two different surnames are given for the parents when personal details are taken.

Blood Tests, Ultra Sound Scan and other procedures

Blood tests which are undertaken to assess the general well being of the mother are acceptable. However please note that tests which are taken to detect abnormalities of the unborn child (including ultra sound scan) become more of a complex issue.

Most Muslim parents will not wish to terminate a pregnancy if an abnormality is discovered. For this reason, some may refuse to have any further tests undertaken. Some parents may go ahead with the tests with the view to being better informed about the possible abnormality and thus be better prepared for it. Some may decide to speak to a Muslim scholar who is an expert in dealing with medical issues and the Islamic faith before they come to any decision.

Many women may refuse to have internal examinations prior to giving birth and many are reluctant to be attended by a male obstetrician unless in an emergency.

Postnatal Care

Most parents want to spend a few quiet moments with their new born baby after delivery. Muslim parents will also wish to do the following things:

- Whisper the Adhan (the call to prayer) into the right ear and the Iqama (the signal to begin prayer) into the left ear.
- They may then wish to put a tiny drop of something sweet into the baby's mouth such as the juice taken from a date or honey. (This may be done when the parents take the baby home).

When a Muslim baby is born it is **essential** that a male member of the family or close friend recites a prayer in the baby's ear **very soon** after birth and this should be facilitated.

Naming the Child

It is traditional to name the child within the first seven days after birth. However, these days parents may have already decided on a name long before this time. The new-born baby will always take its father's surname. The hospital policy of putting the mother's name on any name tags placed on the child should be explained to the parents as being a necessary security precaution.

Circumcision

Boys are required to be circumcised. This can be done at any time and does not necessarily have to be performed immediately. You will probably find that many parents would prefer it to take place within the first month, or failing this, within the first few months of the baby's life. (Subject, of course, to the status of the baby's health). Please note that it is **NOT** a religious requirement for girls to receive Female Genital Mutilation (FGM). FGM is a criminal offence in the UK and anyone involved in carrying out or facilitating FGM, if convicted, may face a prison sentence.

Celebrations of the Child's Birth

Muslims celebrate the birth of their baby by holding a simple celebration called an Aqiqah. This provides an opportunity for friends and family to thank God for the gift of a new life. It is traditionally expected to be undertaken on the seventh day after the birth though parents may, if they wish, delay the celebration.

Family Planning

Some Muslims would not approve of family planning devices. In practice individuals will vary widely in their attitudes. Information about facilities available should be given but no pressure exerted. Any discussion should be in strict confidence and never in front of visiting relatives or friends.

Most Muslim parents will not wish to terminate a pregnancy if an abnormality is discovered.

Death Customs

Death is regarded as being an inevitable event, albeit a sad one, which every individual will experience. Muslims have a firm belief in the afterlife and in the belief that we return to our Creator upon death. Muslims will take comfort during this difficult time by praying and reciting the Qur'an.

It may be helpful before death to turn the foot of the bed in the direction of Mecca. (Scotland, this is in a south easterly direction). If it is not possible, then the patient's head should be turned to face this direction. Family members may pray at the bedside of the dying person, whispering into their ear.

Gloves should be worn when touching the body. The family normally wishes to perform last offices themselves so simply wrap the body in a plain white sheet and await the arrival of relatives.

It is customary amongst Pakistanis and Arabs to express their emotion freely when a relative dies. Whenever possible they should be given privacy to do so; and the need to avoid disturbing other patients by their mourning should be gently but firmly explained.

The next-of kin will want to arrange for the washing of the body before burial. All Muslims are buried as soon as possible after death. Cremation is not allowed in the Islam.

Death of a Premature Baby

A baby, which is born at four months of pregnancy or after this time and has died soon after birth or was stillborn after this period of time, will be named, washed, shrouded and buried in the usual manner. If the baby is born before four months then it should be wrapped in a clean cloth and buried. Cremation is not allowed in the Islamic faith.

Death of a Child / Baby

For the child of a Muslim family follow the advice in Death Customs (above); moreover, gloves should be worn when touching the child's body. The family normally wishes to perform last offices themselves, so simply wrap the child in a plain white sheet and await the arrival of relatives.

All Muslims are buried as soon as possible after death. Cremation is not allowed in the Islamic faith.

Post Mortem, Organ donation

Post-mortem examinations are not generally acceptable but are reluctantly accepted if legally required. It is important to the family that all organs removed are returned to the body for burial.

Contact

Mosque and Islamic Association of Aberdeen
164 Spital
Aberdeen
AB24 3JD
Tel: 07412 324458
Website: <http://aberdeenmosque.org/>

There is a Mosque on the Foresterhill Site in Aberdeen, located to the rear of the Maternity Hospital, near the IM&T building. Friday prayers takes place there at lunchtime and the Mosque is open for regular prayer at any time of the day. A code is required to enter the hall and you should be able to get the code by attending one of the Friday prayers.

or

Contact the **hospital chaplains**: Tel: 01224 553316 (ext 53316).
Out of hours (including weekends), ask the Communications Centre (Tel: 0345 456 6000 or dial 0 from within the hospital network) to page the on-call chaplain.

Pagans

The information below is a general guide only. Always check everything with the patient or their relatives. If in doubt, ask them for advice.

Beliefs, Way of Life, History

Paganism is not a highly structured religion, but rather a spiritual outlook that has its roots in the indigenous nature-religions of Europe, evolved and adapted to the circumstances of modern life. Pagans seek to lead ethical lives in harmony with Nature and see Deity as manifest within the natural world.

There are a number of distinct traditions within Paganism including the Craft (Witchcraft or Wicca), Druidry, Shamanism and Heathenry. What unites these is the common Pagan root belief in the sacredness of the natural world.

Worship

Most Pagans worship the old, pre-Christian, Gods and Goddesses through seasonal festival and other ceremonies. Observance of these festivals is very important to Pagans and those in hospital will wish to celebrate them in some form.

Religious Festivals

The main seasonal festivals are Samhain (31 October), Yule (21 December), Imbolc (1 February), Spring Equinox (21 March), Beltane (30 April/1 May), Midsummer (21 June) Lughnasadh (1 August) and Autumn Equinox (21 September).

Diet

Many Pagans are vegetarians and some are vegans. Many of those who eat meat will object to that derived from intensively farmed stock, a practice which Pagans regard as immoral and cruel.

Attitudes to Medical Staff and Illness

Pagans tend to use complementary therapies as a matter of course and may wish to continue doing so in hospital. They also embrace conventional medicine and will hold its practitioners in respect. Pagans are likely to be well-informed and questioning patients.

Modesty

Pagans are not ashamed of their bodies and will generally be relaxed about medical examinations.

Birth Customs

Birth is viewed as both sacred and empowering. Pagan women will wish to make their own informed decisions about prenatal and neonatal care.

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 about abortion are seen as a personal matter for the woman concerned who will be supported in the choices she makes.

Death Customs

Pagans accept death as a natural part of life. Pagans will wish to know when they are dying so that they may consciously prepare for it. Most Pagans believe in some form of reincarnation. Some families will wish to take the body home to prepare it for burial or cremation themselves, others will employ a funeral director.

Contact

Scottish Pagan Federation,
PO Box 19624,
Bishopton
PA7 9AD

Website: www.scottishpf.org

or

Contact the **hospital chaplains**: Tel: 01224 553316 (ext 53316).
Out of hours (including weekends), ask the Communications Centre (Tel: 0345 456 6000 or dial 0 from within the hospital network) to page the on-call chaplain.

Sikhs

The information below is a general guide only. Always check everything with the patient or their relatives. If in doubt, ask them for advice.

Introduction to the Community

Most Sikhs living in the United Kingdom are of Punjabi ethnic origin having migrated either directly from the Punjab or via former British colonies (e.g. those in East Africa, South East Asia etc.) to which members of their family had previously migrated. The Punjabi and English languages are widely spoken and used within the community.

The first Gurudwara (the Sikh place of worship) in the United Kingdom was established in 1911 in Putney, London. The first Sikhs settled in Glasgow in the early 1920s and the first Gurudwara established in the 1950s in South Portland Street, Glasgow. There are currently six Gurudwaras in Scotland, four in Glasgow, one in Edinburgh and one in Dundee. There are approximately 200 Gurudwaras in the UK and the Sikh population constitutes the largest Sikh community outside India.

The link with the British has been a long one. Renowned for their bravery and martial tradition, many Sikhs served in the British Army and gave their lives for the Empire in the First and Second World Wars.

History, Beliefs and Way of Life

The Sikh faith is a distinct religion revealed through the teachings of the ten Gurus, the first of whom, Guru Nanak Dev Ji, was born in 1469 CE in the Punjab. The Gurus were the Divine Light who conveyed Gurbani (Word of God) and were all spiritually one. They were Prophets, special messengers from God. The tenth and last human Guru vested the spiritual authority in the Guru Granth Sahib Ji (the holy Sikh Scriptures) and temporal authority in the Khalsa Panth (the community of baptised, Sikhs, Amritdharis).

Sikh males and females, particularly those who have taken Amrit (been baptised) always wear the following articles of faith popularly known as the Five K's. Kesh (unshorn hair), Kangha (a comb), Kara (iron wristlet), Kirpan (Sword), Kacherra (a pair of shorts tailored in a special manner). These have a deep spiritual and moral significance forming part of Rehat Maryada (The Sikh Code of Ethics and Discipline). The articles of faith must not be removed.

Although not mentioned among the Five Ks, the Dastar (the turban) – perhaps the best known feature of Sikhism - is an essential accompaniment which is worn to maintain the sanctity of Kesh (hair) and is treated with the utmost respect. Whilst obligatory for men, the turban is optional for women who may instead use a chunni (a long Punjabi scarf) to cover their heads.

Sikhs strictly believe that there is but one God who is worshipped through Gurbani. God is regarded as Nirgun (transcendent) and also Sargun (immanent) but can never be incarnate.

The object of a Sikh's life is to develop God-consciousness and ultimately receive God's grace. The human life presents the opportunity to do so by realising the Will of God, through truthful living and sewa (selfless service) in the context of a normal family life. A Sikh's way of life is guided by the following principles: -

Naam Simran: remembering and praying to God at all times.

Kirat Karna: earning a living by honest means.

Wand Shakna: sharing with the poor and needy.

Nishkam Sewa: selfless service to God and His Creation.

Equality: to treat all human beings as equal.

A Sikh is to practice purity of thought, purity of action, respect and love God's Creation. He/she has been given the human form to practice dharma (spirituality). A Sikh does not believe in superstitions and pre-destination.

Set prayers are said daily, in the morning, evening and at night before going to sleep. Prayers can be said individually, together as a family or collectively at any suitable place, although congregational worship in a Gurdwara is regarded as very important. Prohibitions include tobacco, alcohol, intoxicants, adultery, etc.

Names

A Sikh is likely to have a personal name (common to both sexes), a middle name 'Singh' for males and 'Kaur' for all females, followed by a family name (surname). In other cases, and in keeping with the correct tradition, the family name is not used in which instance 'Singh' or 'Kaur' may be regarded as the surname - the husband will be Mr Singh and the wife Mrs Kaur. 'Sardar' and 'Sardarni' are titles prefixed to the Sikh male and female names respectively. Therefore if used, the 'Mr' and 'Mrs' should not be used at the same time.

Diet

There may be some non-vegetarian Sikhs, but in an emergency situation it is best to serve vegetarian food (excluding fish and eggs) as this will cater for the needs of all Sikhs.

Observant Sikhs, especially those who have taken Amrit, are vegetarians. They will also exclude from their diet: eggs, fish and any food containing these or any animal derivatives as ingredients or food cooked in animal fats. Dairy produce is acceptable, again so long as it is free from animal fat, for instance any cheese served should be one made from non-animal rennet.

It is important to note that vegetarians find it nauseous and objectionable to eat even vegetarian items if they are served from the same plate or with the same utensils as meat. It is therefore not enough to simply remove meat, egg or fish from a plate when the patient points out that he or she is vegetarian.

It is helpful to explain to the patient that the meals being served to them do not contain any meat as they may not be familiar with the English names of the dishes provided.

Fasting

Sikhism does not attach any importance to the practice of fasting at any particular time and it carries no religious merit. Moderation and temperance should be exercised as a way of life both for spiritual reasons and the maintenance of a healthy body, rather than engage in fasting on a fixed occasion.

Smoking and Alcohol

The use of tobacco or alcohol in any form is strictly forbidden to Sikhs. It is therefore extremely important that they are accommodated in the places where smoking or consumption of alcohol is not permitted.

Personal Hygiene

Sikhs attach great importance to personal hygiene and cleanliness. They prefer to have a shower or wash in free-flowing water rather than sitting in a bath and wash themselves after using the toilet.

Hands are washed before having a meal, followed by hand and mouth wash afterwards. The uncut hair is kept clean and neat by washing regularly and combing normally twice a day. If the patient is not well enough it is acceptable for nursing staff to assist in washing and combing - such help will, of course, be much appreciated.

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 Holy Sikh Scriptures). The family may also have the baby baptised by having Amrit (holy water) placed on the tongue by a family member or a baptised Sikh.

Blood Transfusions and Transplants

There are no religious objections to blood transfusions, blood products or transplants. However, with regard to transplants, especially with the donation of organs, the decision rests with the individual and/or the person's family.

In the absence of any close relatives, the doctor in charge may take whatever action he/she considers necessary in order to save the patient's life.

Dying and comforting

Depending upon the physical and mental state of a person who is seriously ill/injured or dying, he/she may find solace in reciting or listening to Gurbani – verses from the Sikh scriptures. If the person is unable to recite the verses him/herself, then any other Sikh may do so instead. According to Sikh etiquette, comforting a member of the opposite sex by physical contact e.g. touching or hugging, should be avoided unless the persons are closely related - even then for instance a married couple may not display affection in public.

Death

If death has occurred and identification has been established, the body and/or parts of the body should be covered with a plain white sheet or shroud. If the condition of the body permits, the eyes and mouth should be closed and limbs straightened with arms extended beside the body.

It is important that the Five Ks, or any of them found on the body, should not be removed and should be treated with respect. (In the event of an accident these, in fact, may aid in the identification of the body.) For instance, do not trim hair or beard; the hair on the head should be kept covered. Sikhs always cremate their dead.

Death of a baby/child

Whilst they have no objections to non-Sikhs touching the child's body, they usually prefer to perform last offices themselves. It is vital for nursing staff to ensure that none of the five symbols (5 Ks) of Sikhism are disturbed. The child should simply be wrapped in a plain white sheet and await the arrival of a relative who will perform the last offices. Sikhs are always cremated; however some families may wish to bury a stillborn child or a neonate. Staff should adhere to family requests when possible. After the cremation the family will commence a religious ceremony in their home or the Gurudwara.

Post-mortem

Although there is no religious objection, some families may not like the idea of a post mortem and will only accept it if it is legally unavoidable.

If the state of the body permits, it is washed and dressed by family members and friends before cremation. It is therefore important that any incisions made during the post mortem examination are carefully sutured so that there is no reopening of the incision or leakage. Further, should post mortem be necessary then it should be conducted as soon as possible so that the body is released to the family for the funeral to take place with the minimum of delay.

General Attitude

In the Sikh tradition, excessive display of emotions is not approved. Whilst adopting a practical and common sense approach, a Sikh is also likely to view illness or death in term of God's will – to be borne with fortitude, with comfort and strength derived from his/her faith.

There are currently no facilities for Sikhs in Grampian.

Contact

Advice can be obtained from:
Sikh Council of Scotland,
17 Harris Close,
Newton Mearns,
Glasgow
Tel; 0772 3013160
Email: info@sikhcouncilscotland.org

or

Contact the **hospital chaplains**: Tel: 01224 553316 (ext 53316).
Out of hours (including weekends), ask the Communications Centre (Tel: 0345 456 6000 or dial 0 from within the hospital network) to page the on-call chaplain.

Appendix 1

Interpretation Services in NHS Grampian

Definition: interpretation is changing the spoken word from one language to another.

The ability of all members of our local ethnic communities to communicate clearly and effectively their healthcare and other needs is essential if we are to achieve equality in healthcare. For most, the biggest barrier is language. The regular NHS Grampian involvement and consultation events held with our local ethnic communities have shown that over 90% of recent migrant workers and their families coming to Grampian are non-English speaking when they first arrive. There are also many members of the more established local ethnic communities who are non-English speaking, hence the importance of interpretation services.

How to contact an interpreter

(1) Telephone interpretation

The “Language Line” telephone interpretation service gives staff access to expert interpreters, on the telephone, in 60-90 seconds, for over 170 different languages. Language Line is now live in over 1000 locations within NHS Grampian.

Most wards and departments have a “Language Line “ Access Kit which contains full instructions on how to use it. Many staff have been trained to use “Language Line” and they may be able to provide assistance.

(2) “Face to face” interpreters

NHS Grampian has worked with Aberdeen City Council and latterly with the Grampian Regional Equality Council to train up more “face to face” interpreters. NHS Grampian now has access to over 154 trained and qualified “face to face” interpreters. Usually, requests for “face to face” interpreters should be made 10 working days in advance.

How to Access a “face to face” interpreter

Each location within NHS Grampian has in place local management arrangements. These can be accessed by going to the NHS Grampian Intranet and clicking on the “Departments” tab at the top of the screen, then click on “Corporate Communications”, then click on “Equality and Diversity”.

In an urgent situation, it might be possible to use a friend or relative of the patient who may be able to act as an interpreter. However, this is not ideal since there is no way of knowing the language competency of the friend or relative. In addition, there may also be cultural or social issues in using a family member.

Young children should not be used to interpret except in circumstances of extreme urgency when there is no viable alternative.

Out of hours emergency requests

For emergency requests after 5pm and at weekends, contact the NHS Grampian Switchboard by dialling “0” on any internal extension. The Switchboard have a list of “face to face” interpreters who are prepared to make themselves available out of hours.

3. British Sign Language (BSL) interpreters

If the person is deaf or a BSL user, BSL interpreters can be booked as per local management arrangements. These can be accessed by going to the NHS Grampian Intranet and clicking on the “Departments” tab at the top of the screen, then click on “Corporate Communications”, then click “Equality and Diversity”.

In addition, the list of BSL interpreters in Grampian is also available on the Equality and Diversity web page.

Out of hours emergency requests

For out of hours emergency requests i.e. after 5pm and at weekends, contact the NHS Grampian Switchboard by dialling “0” on any internal extension. The Switchboard have a list of BSL interpreters who are prepared to make themselves available out of hours.

Video BSL

Video BSL is currently being rolled out across NHS Grampian. Video BSL gives:

- 4 minute connection time, the service is available 8am – 12 midnight Monday to Friday and 8am-6pm at weekends
- Patient anonymity
- A choice of female or male interpreters

Appendix 2

Additional Information

Additional information about religions, customs and cultures may be found in these publications:

A Multi-Faith Resource for Healthcare Staff 2007 NHS Education for Scotland

Religion and Belief Matter, an Information Resource for Healthcare Staff 2007
Scottish Interfaith Council

A Guide to Faith Communities in Scotland 2004 Published by Scottish Interfaith Council.
ISBN 1 857 75584 7

Caring for dying people of different faiths (3rded.) 2004 Julia Neuberger. Published.
Radcliffe Medical Press
ISBN 1 857 75945 1

Death with Dignity – Meeting the spiritual needs of patients in a multicultural society, Jennifer Green. Vol 172 Nursing Times Publication. ISBN 0 333 54971 6
ISBN 0 333 593650 1991-113

NHS Grampian Spiritual Care Policy available on NHS Grampian Intranet

Getting it right at the end: Caring for the dying and bereaved – a working guide for NHS staff NHS Grampian August 2005

Leaflets on Faith Groups and Organ Donation published by UK Transplant 2003
(Buddhism, Christianity, Hindu darma, Islam, Judaism, Sikhism)
www.uktransplant.org.uk

Further information and advice

is available to all health and social care staff from the Hospital Chaplains:

Office Hours Monday –Friday
Tel: 01224 553316 (ext 53316)

Out of hours (including weekends)
Ask the Communications Centre (Tel: 0845 456 6000 or dial 0 from within the hospital network) to page the on-call chaplain.

This publication is also available in other
formats and languages on request.
Please call Equality and Diversity on
01224 551116 or 01224 552245
or email grampian@nhs.net
Ask for publication CGD 190285