

RELIGION: A CLINICAL GUIDE FOR NURSES

Elizabeth Johnston Taylor, PhD, RN, Editor

Religion is a significant aspect of human experience that can provide a framework for an individual's response to a health challenge or transition. Individual religious beliefs, or those of a patient's family or community, may influence health care decisions and provide a means for coping. This book provides accessible and comprehensive information about various religions, offering nurses insight into their patients' religious beliefs and practices and thereby enhancing therapeutic care.

The centerpiece of this book is the compilation of information about diverse religions written by highly knowledgeable religionists. The reference includes information, formatted concisely and consistently, on a religion's history and theology; views on health and suffering; explanations for disease; beliefs and practices related to birthing, childrearing, and dying; healing rituals; corporate religious resources for the sick; and more. Prefacing this information are chapters discussing clinical aspects of addressing religion at the bedside. These include strategies for sensitive and respectful communication about religion with patients, assessing a patient's religious beliefs, supporting bedside rituals that are part of a patient's religion, and understanding ethical and legal considerations. The book also provides a comprehensive list of additional resources.

Key Features:

- Provides quick access to information about the 20-plus families of religions most prevalent among Americans and others in English-speaking First World countries
- Presents practical and concise information about various religions in succinct format
- Offers detailed communication techniques for clinicians who are uncomfortable discussing religion with patients
- Includes techniques for self-assessment of religious views and values and how these can affect care
- Presents legal and ethical aspects of addressing religiosity in patient care

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Religion

A Clinical Guide for Nurses

Elizabeth Johnston Taylor, PhD, RN
Editor

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To my parents

Madeline S. and Robert M. Johnston

*Who taught me health-promoting religion by modeling for me
how to dig roots deeply within a faith tradition
while maintaining a broader perspective, and
how to strive for a life where beliefs and practices are integrated and congruent.*



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Theology and Social History

The word *Islam* means submission to God; in Arabic, it shares the same root as the word "peace." Islam is a religion and a way of life sent from God to the Prophet, Muhammad (circa 570 to June 8, 632). Although Islam originated in what is today called Saudi Arabia, it has spread to the world by ways of expansion, teaching, trade, marriage, and cultural interactions. With around 1.5 billion adherents internationally, Islam is the second largest religion and fastest growing one today. Most Muslims (adherents of Islam) live in Middle Eastern and Southern and Southeast Asian countries, as well as Sub-Saharan Africa, but Muslim communities are growing in Europe, North America, and elsewhere. Most Muslims are of the Sunni denomination, while 10%–20% are Shia, or of a smaller sector (e.g., the mystical tradition of Sufi). Although these denominations share similar practices, variations in beliefs result from variations in the *hadiths* (or reports about Mohammad) passed down by scholars and religious leaders.

Muslims believe that Islam is the completed and perfected religion that incorporates Judaism and Christianity. They believe that Muhammad was the last messenger sent by God. Islamic law, or *Shari'a*, offers Muslims not only creed, but also a way of living and guidance for society (e.g., from directives on banking to care for the environment). *Shari'a* is received from the *Qur'an* (holy book) and *Sunnah* (acts, sayings, and traditions of Muhammad and his followers). *Shari'a* identifies five "pillars of faith," acts of worship to which the Muslim is obligated. These pillars include making an oath stating that there is no other God but Allah and that the Prophet Muhammad is his messenger; praying five times a day; paying 2.5% of one's income to charity if one has some savings; making a pilgrimage to Mecca (where Islam began) at least once during one's lifetime, if possible; and fasting from sunrise to sunset during the month of Ramadan (if it is not deleterious to health). The primary objectives of Islamic law are protection of life, religion, body and mind, property, family, and lineage.

Deity/God or Ultimate Other

Islam is a monotheistic religion that believes in one God, *Allah*. (In Arabic, *Allah* means God.) God is concerned about the personal life of

the individual as well as their social life. Muslims communicate with God through prayers regularly and, occasionally, according to human circumstances. God also communicates with the individual through written words as recorded in the *Qur'an* as well as through natural and social phenomena from which an individual can learn.

The *Qur'an* states that human beings are not originally sinful, but they are forgetful. Because of this forgetfulness, they need to be reminded of the omnipotent presence of God to help them through life. A Muslim is someone who submits to God and acts accordingly in goodness and patience. The *Qur'an* serves as guidance for the believer. "The *Qur'an* has its cure. . . ." "God loves those who repent and are clean." "Don't destroy things on earth." These are some of the *Qur'anic* passages with health implications.

Views on Health and Well-Being

Faith and health were described by Prophet Mohammad as the most important attributes one could possess. It is a duty to protect one's health; indeed, one will be punished if at the Judgment Day one is deemed to have misused health. To be healthy is to be physically, spiritually, and socially well. Health involves having the body, which is in a state of dynamic equilibrium, keep its potential. This potential is supported by eating nutritious food, maintaining physical and mental fitness, personal security, and such. Guidelines exist on what to eat and drink to maintain this equilibrium and cleanliness. These guidelines are outlined in the *Qur'an*, *Sunnah*, and *hadith*, and most Muslims will have firm views about how these relate to their daily lives. To be spiritually healthy is to practice patience, repentance, forgiving, and resilience. Health also involves making choices for good and against evil. For example, healthy eyes will focus on what is beneficial, not on forbidden objects. Health also requires balancing individual interests with societal needs; indeed, the needs of the individual and of society are deeply interrelated. Hence, for Muslims, there is a responsibility to care for their own, especially those who are marginalized by poverty, disability, and illness.

Explanations for Disease and Illness

Disease can be mainly physical, but often there can also be spiritual and mental components affecting the disease process. Mental health problems can be attributed to greed, lust, worry, confusion, uncontrolled desire, anger, arrogance, lying, enmity, fear of death. Physical illness manifests when the requirements of prayer, sleep, lifestyle, and faith become out of balance. Prophet Muhammad said, "God has not created a disease without creating a cure for it." This saying is interpreted to mean that all diseases can be cured if it is God's will. Muslims rely on prayers of supplication (dissimilar to the faith healing practiced by many Christians), as well as

medical science for this cure. Because of this, Muslim physicians have contributed greatly to science over the centuries. The Prophet Muhammad, who himself was sick prior to his death at age 63, recited specific *Qur'anic* verses and made supplication or intercessory prayer on behalf of others who were sick.

The Nature of Suffering and How to Address It

Suffering occurs when one lacks the essential needs in life: food, water, housing, clothing, and so forth. Depending on circumstances, this can also include education, clean environment, social order, and political stability. All Muslims are reminded that illness is a test from God, to show them a way to devote more time and energy to the worship of God and a closer adherence to his prescribed ways. The Muslim finds solace and comfort in the awareness of pre-ordination and that tests and trials sent by God to them in this life will impact on their ability to be admitted to *Jannah* (heaven) on the Day of Judgment. Muslims address illness and suffering first by following the religious prescriptions for healing (e.g., eating and drinking certain foods, reading *Qur'an*) alongside medical therapies. When the patient and his or her community have done all they can to resolve the problem, then they accept that *Allah* has the final say—"in *sha Allah*" (meaning "by God's will"). This is reflected in the motto of some Islamic hospitals: "We care, but *Allah* heals."

Death, Dying, and Afterlife

Muslims believe that every physical body dies. When this occurs, the spirit lies in slumber until the Day of Judgment. On the Day of Judgment, rewards and punishments according to the faith and actions during their lives are determined. Muslims believe in an afterlife that is considered beautiful and blissful (in paradise), or devastating (in hell). Muslims spend considerable time praying for admission to paradise, to join loved ones, the Prophets, and to be in the presence of God. Dying patients will be comforted by a strong belief that they will live again. Death is a path to another life, an everlasting life. For those who feel they have sins, they can pray and ask forgiveness from God. God is all-forgiving and all-merciful.

Quick and Condensed Definitions of Terms

Do'a or Shalat—Prayer, recited softly and sincerely in one's heart in his/her own language.

Allah—The name of the single and only true God.

Shari'a—Islamic law, do's and don'ts in this life in order to be healthy physically, spiritually, and socially.

Ka'ba—the cube-shaped sanctuary located in the city of Mecca, toward which Muslims direct their regular prayers.

Qur'an—Holy book containing verbatim in Arabic the words of God spoken to Muhammad; the most authoritative source of *Shari'a*. This text in another language is called a translation of the *Qur'an*, but is not actually a *Qur'an*.

Wudhu—Making ablution or washing with clean water the face, hands, lower arms, feet, face, mouth, nose, ears, and hair of the head (quickly); usually performed before prayers or handling the *Qur'an*.

Prayer

Prayer, or *Do'a*, is the means by which a Muslim asks God for protection, blessing, recovery, or anything they wish for in this life or in paradise. Prayers have psychological impact on a Muslim who believes in its power. As one of the five pillars of faith, a Muslim will pray five times a day: at dawn, midday, late afternoon, after sunset, and late evening while facing Mecca. These prayers are obligatory, and it is a sin to fail to pray these prayers. Prayers can be corporate or be individual, in Arabic or in the language of the believer. Prayer typically involves saying ritual prayers that glorify Allah and ask for a blessing and reciting chapters from the *Qur'an*. For those who are able, these prayers are said during varying postures (standing, bending, kneeling, prostration). For those who are unable, the prayers can be completed from a sitting or lying position. Prayers are to be said in a clean environment, after cleansing oneself observing prescribed ritual ablutions. Persons who are menstruating or physically or mentally incapable of saying the obligatory prayers are exempt from doing so. Those who are unable to do so for some temporary reason are expected to make up the missed prayers.

Religious Calendar

Ramadan, the ninth month in the lunar Islamic calendar, celebrates when Muhammad began to receive the revelations written in the *Qur'an*. Whereas *Ramadan* began on August 1 in 2011, it will begin 11 days earlier each subsequent year. During this 29–30 days, Muslims fast, seek forgiveness, practice charity, and observe religious devotional practices (e.g., reading the entire *Qur'an*) as they seek to draw closer to *Allah*.

At the close of Ramadan, the Eid al-Fitri, the Festival of Returning to the Natural State of Being, is celebrated with feasting, visiting friends and family, and gift giving—including giving food to the poor. Seventy days later, the Eid al-Adha, the Festival of Sacrifice, commemorates the willingness of Abraham to sacrifice his son. On these two festivals, Muslims

pray together, listen to sermons, and have a communal meal and play for families and children.

Health-Promoting Practices

Halal, or permissible food, includes any meat (except pork, and that which contains ample amounts of blood) from an animal without claws personally hunted or slaughtered by others in the name of God. It is recommended that one eat in moderation. One is encouraged to think of the stomach as being divided into three portions, one each for food, fluid, and air, to discourage overeating. Drinking alcohol is forbidden. As smoking and illicit drugs are considered to damage health, most Muslims will refrain from these practices.

Healing Rituals

There are no specific healing rituals, but families and imams may want to recite the *Qur'an* in the presence of the ill person. Muslims pray for strength, hope, and patience for the sick, potentially in the presence of the sick person, who is comforted by this. They may also seek natural-based remedies prescribed by their faith (e.g., the ingestion or application of honey, dates, herbs, olives, [camel] milk, black cumin, zam zam water [sourced from the holy city of Mecca]).

Other Unique Religious Beliefs, Rites, and Practices Related to Health or Illness

Sometimes Muslims make ablution (*Wudhu*) not just before prayer or handling the *Qur'an* but also perform it anytime when needed—including when sick. *Wudhu* puts the Muslim in a state of ritual purity and can wash the distractions of this life away so as to fully communicate with Allah.

Unique Religious Beliefs, Rites, and Practices Related to Birthing

Although the fetus does not become a soul until the 120th day after conception, most Islamic scholars posit that postcoital contraception is unacceptable. Acceptable methods would include rhythm and barrier methods. In the context of a valid marriage, fertility is a duty; hence, certain fertility treatments are encouraged if needed, but using donor material for conception is disliked as it is akin to adultery.

When birthing, mothers are encouraged to recite Islamic recitations such as *bismilla* ("In the name of God, the beneficent, the merciful") and other prayers they know to ease the process. Once the baby is born, someone (father, relative, or a religious leader invited) recites a call to prayer (*adhan*) by the ears of the newly born.

Male circumcision is obligatory and may be performed at different possible times prior to age 7. Female circumcision is not described in *Qur'an* or other holy books.

Unique Religious Beliefs, Rites, or Practices Related to Childrearing

Childrearing differs from culture to culture. In general, children are taught the *Qur'an*, basic Arabic, basic Islamic beliefs and practices, and morality. Parents bring their children to mosques or Islamic schools for this education, as well as provide it in the home. Once children reach puberty, they are expected to observe the rituals of Ramadan and daily prayers. However, boys as young as 10 years may begin praying regularly. Muslims do not adopt children as it disrespects lineage. Muslims will become a caretaker for orphans, but ensure these children will keep their last name. Extended family, when possible, will care for widows and their children.

Unique Beliefs, Practices, and Rituals Surrounding Dying, Death, and Bereavement

When a Muslim is near death, the patient is encouraged to say *Shahada* (i.e., "There is no God except Allah, and Muhammed is his prophet). A *Qur'anic* passage (any passage) is read, and the dying person is encouraged to repent and anticipate *Allah's* mercy. After the death, the body is cleansed and enshrouded in three white sheets (for men) and sheets plus clothing (five layers for women). This ritual cleansing is typically done by family members of the same gender as the deceased as well as a trusted Muslim who knows the ritual. A coffin is not used unless the deceased was rich; rather, the body is carried in a cardboard box. Embalming and autopsies (unless court ordered) are prohibited. Muslims also reject cremation.

The body will usually be taken to a mosque, and an imam will lead the prayer for those who are present. The funeral happens at the cemetery; men are present, whereas women are discouraged from attending. Dignified mourning (weeping, but not loud wailing) is acceptable. Although it is best to bury the deceased within a day of the death, it is possible to delay it until the close family members can be present. In some Islamic denominations, special days of mourning are planned (e.g., third or seventh day after death, anniversary). A widow is not to interact with marriageable men for 4 months and 10 days after losing her husband to allow time for clarity about whether the deceased man has fathered a child, as well as to provide time for private grieving.

Role of Religious Community (Persons or Organizations) During Health Challenges

Regular congregational religious gatherings are conducted on Fridays, noon time, in mosques. The purposes for meeting are many: worship, community, meal, exchange of information, business (e.g., selling books, food). The worship involves a sermon and prayers, and attendees learn about how to incorporate the instructions of the *Qur'an* and *hadith* in daily life. In areas where there are a number of Muslims, there will be

a local community social services network, usually associated with the mosque. An Islamic Center/Society/Community Association typically offers Muslims services such as religious education for children, scriptural study sessions for women and men, education for converts, services and resources for the sick and elders in the congregation, and Eid festivities.

Role of Clergy During Health Challenges

In Islamic societies, the clergy may function as both religious scholars and jurists. The clergy most likely to minister to the sick is the local mosque leader, the imam, who in Western societies, functions similarly as a priest and educated religious scholar. These religious leaders pray for those who are ill, comforting the sick and the family. Imams are usually available for home and hospital visits by arrangement.

Unique Religious Aspects of Family Involvement

Immediate family members (i.e., parents, children) will be those most integrally involved in caring for the sick. For example, it is family who can best offer prayers for the sick, and they also help to ritually cleanse the body of the deceased.

Nursing Implications Unique to This Religious Tradition

- Respecting the modesty of Muslim women is paramount. Keep their bodies covered as much as possible during nursing and medical procedures. If possible, offer male nurses to care for male patients and female nurses to attend to female Muslim patients.
- Praying is the basic ritual that a patient might desire when sick. Support patients to observe their daily prayers as requested by the patient. A basin with clean water may be brought to the bedside to allow the patient to make ablutions. If this is not possible, offering a pan with sand can substitute. The patient may also need assistance in being positioned so that his chest faces Mecca. A copy of the *Qur'an* (in Arabic or the patient's preferred language) may also be needed for prayer. A sick person may pray while sitting or lying in bed. If lying in bed, then position the bed so that the feet point to Mecca. The seriously ill and elderly who cannot pray are exempt from doing so. Although there are not gender differences in expectations about praying, it is recognized that not praying while menstruating is a mercy given to women.
- There are mercies prescribed for groups who may not be able to complete the fasts. The seriously ill, elderly, pregnant, and lactating women—those for whom it could be harmful, are exempt from the fast of

Ramadan. If Muslim patients are on medications and their condition is not life threatening, consider changing the timings of all medications to coincide between the sunset and sunrise to allow participation in fasting. All oral medications and fluids, any hydration or nutrition (including intravenous) will negate the fast.

- Muslims abstain from meat that has not been slaughtered properly or that has significant traces of blood. They also refrain from alcohol and pork products.
- The local Islamic organization or mosque can be contacted for resources or information. For example, if the family has not been able to identify a Muslim to assist with the ritual cleansing of the body of a deceased loved one, the nurse or chaplain can facilitate this request.
- For those preparing to pilgrimage to Mecca (*Hajj*), nurses can provide information and resources to address the potential health problems that can arise from prolonged exposure to millions of people and the desert environment (e.g., dehydration, communicable disease, foot care).
- The sick Muslim has a variety of scripturally based prescriptions for wellness. These include recitation of specific chapters of the *Quran*, drinking of *zam zam* (holy water sourced from Mecca), prayer, herbs, honey, and certain foods.
- If there are any issues with patients or families in a clinical setting (e.g., issues with prayers, fasting, traveling for Hajj), discuss with the people involved if they require support from their imam or a designated experienced, older Muslim woman who can offer support.

FOR MORE INFORMATION

View DVDs: *Islam: Empire of faith* (PBS), *Inside Islam* (History Channel), and *Inside Mecca* (National Geographic).

Visit <http://www.metanexus.net/conferences/pdf/conference2006/Imam.pdf> (for information about Islamic healing).

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