



**Standardization of therapeutic procedures
and optimal communication methods for interdisciplinary teams
recommended for patients of different cultures and religions,
patients with rare diseases and those in non-standard situations**

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CHRISTIANITY

***Catholicism* Protestantism* Orthodoxy**

Therapeutic approach towards a CHRISTIAN patient (Catholic, Protestant, Orthodox)



- It is **important** to be **aware** that there are no fundamental differences between the **denominations** of Christianity in terms of medical care for the sick. All denominations of this religion have many common features.
- It is important to **familiarize** oneself with aspects of Christianity in order to care for the patient knowingly and professionally.
- **During hospitalization**, Catholics, Protestants and Orthodox pray (often with the Bible), receive **sacraments**, **contact the priest of their religion**, **enter into confession**, **observe fasting**, and **celebrate selected holidays**.

Therapeutic approach towards a CHRISTIAN patient (Catholic, Protestant, Orthodox)



- All denominations of Christianity **appreciate the development and resources of medicine, and unanimously oppose abortion and all abortion activities.**
- In terms of medical care (including hospital care), **the main differences between the denominations are in the number of sacraments received, the content of prayers, the different symbols of faith accompanying the sick, different calendar days considered as holidays or periods of fasting.**
- Each patient should be allowed free time for prayer. The interruption of **prayer** should be avoided, and a sense of privacy and intimacy should be ensured.

Therapeutic approach towards a CHRISTIAN patient (Catholic, Protestant, Orthodox)



- The practice of **prayer** should be respected in the form of allowing the possession of sacred symbols of the faith of a particular denomination (e.g. rosary, holy image, prayer book, icon) e.g. on a bedside table.
- It should be **possible for the patient to meet a priest of the denomination concerned.**
- The **reception** of sacraments should be allowed (e.g. The Eucharist) in the place where the patient resides.

Therapeutic approach towards a CHRISTIAN patient (Catholic, Protestant, Orthodox)



- If the health of the patient permits, it should be possible for them to **take an active part** in the liturgy.
- **Reading of the Bible should be allowed.**
- **It should be allowed for the family and the loved ones to visit the patient (if the patient's health condition allows) or to contact them by phone.**
- The rules of **fasting in the particular denomination** should be respected.

Therapeutic approach towards a CHRISTIAN patient (Catholic, Protestant, Orthodox)



- Patients of all three faiths consider it reasonable to implement preventive programs aimed at keeping them healthy. They are happy to use related programs.
- Daily **body hygiene** and **proper clean clothes** are important for each religion.
- In all denominations, surgeries designed solely to beautify the body do not gain acceptance.

Therapeutic approach towards a CHRISTIAN patient (Catholic, Protestant, Orthodox)



- Followers of these three denominations show respect for the food they eat, taught by the Bible, and share with those in need.
- **Human illness presents a moral challenge in Christianity.** Illness, suffering and death are considered to belong entirely naturally to human fate.
- Family and loved ones show interest, support and help towards the sick. They often want to accompany them during death.

Therapeutic approach towards a CHRISTIAN patient (Catholic, Protestant, Orthodox)



- The greatest help in illness is the power of prayer and full trust in God both on the part of the sick and their loved ones.
- **In the face of death**, prayer rituals are practiced, often a visit of the priest and administration of the chosen sacrament.
- The deceased is cleaned and **gets dressed in clean clothes**. Often the hands of the deceased are arranged in such a way that they are intertwined with each other.

Therapeutic approach towards a CHRISTIAN patient (Catholic, Protestant, Orthodox)



- Followers of Christianity **prefer** direct dialogue as the most common form of communication.

Significant differences between Protestant vs Catholic and Orthodox denominations (relative to hospitalization):

- Protestants never worship the Mother of God.
- They are the only ones to recognize and approve the use of IVF among couples struggling with infertility.
- This church accepts the actuality of gifts of supernatural healing.
- Baptism occurs only with the informed consent of the catechumen.



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Christian Church of Jehovah's Witnesses

Therapeutic approach towards a Jehovah's Witness patient



- If the patient is a Jehovah's Witness, it is **necessary** to document this fact.
- Jehovah's witnesses **place great emphasis on** health care, expect the best possible care in the event of illness or accident and are willing to accept most treatments.
- Jehovah's Witnesses **do not consume blood and do not consent to transfusion**. It is recommended to have a conversation with the patient about what blood products are acceptable and what alternatives are available.
- Strategies alternative to **transfusion** (adequate combinations of drugs, equipment and various techniques to reduce or avoid blood loss and stimulate blood production) should be used.

Therapeutic approach towards a Jehovah's Witness patient



- The views of Jehovah's Witnesses regarding the use of fractions derived from basic blood components vary widely. It is necessary to **understand each patient's decision in the matter.**
- **The use of standardized procedures**, such as informed consent listing different alternative methods, will allow the physician to understand the specific needs of patients of this denomination and ensure that their wishes are respected as well as the best possible outcome is achieved.
- It is necessary **to inform the Jehovah's Witness of their diagnosis, prognosis and treatment recommendations in order for them** to be able to make informed decisions in these matters.

Therapeutic approach towards a Jehovah's Witness patient



- Jehovah's Witnesses prepare and carry with them **The health care dispositions and power of attorney** document – it contains the patient's personal dispositions regarding health care and establishes an attorney who is authorized to act on behalf of the patient if they are unable to do so.
- **Health care professionals must respect** the patient's decision to refuse blood and respect the right of the attorney to make decisions on behalf of the unconscious patient.
- **Denial of consent for a blood transfusion, a form for a medical representative and a treatment plan** - all these documents should be discussed, signed and attached to the medical history.

Therapeutic approach towards a Jehovah's Witness patient



- **Parents have a statutory and natural right** to make decisions about treatment for their minor children.
- A pregnant Jehovah's Witness should be consulted at least once without **accompanying persons** to see what wishes does she express for herself.
- Jehovah's Witnesses **require a slightly different obstetric approach due to the lack of consent for the use of blood products.**

Therapeutic approach towards a Jehovah's Witness patient



- In a situation during childbirth where it is necessary to decide between the life of the mother and the life of the child, **the decision is made by the parents or legal guardians.**
- Jehovah's Witnesses provide spiritual comfort and practical help to fellow believers who are sick or in hospital.
Such visits **should be allowed.**
- All persons providing medical care to Jehovah's Witnesses **should agree to the treatment plan, including not to transfuse blood against their will.**



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JUDAISM

Therapeutic approach towards a Jewish patient



- **Jews pray three times a day.** Putting up a screen is one of the solutions a nurse can offer to a Jewish patient to satisfy their need for prayer.
- **Shabbat** is one of the most important holidays in Judaism. Jews are **not** allowed to perform a number of activities on this day, such as they can't turn the lights on or off, press buttons in the elevator, write, ring the bedside bell to summon the nurse. It may be problematic to, for example, sign of documentation or move the patient's belongings to another room (if there is a need for the patient to change rooms). Treatment on Shabbat is possible if the patient's condition is life-threatening. Such situations include childbirth.

Therapeutic approach towards a Jewish patient



- **During some holidays**, Jews will observe certain restrictions, e.g. during *Pesach* sourdough products are not allowed and during *Yom Kippur* there is strict fasting (no food or drinks are allowed) as well as no cleaning is permitted.
- **Hand hygiene can be practiced for hygienic or ritual reasons.** Hand washing, for example, is used in the morning immediately after waking up, before and after each meal or after leaving the toilet. Ritual washing is practiced before prayer and before the Sabbath.
- In Judaism, there is a concept of "**ritual purity**". Impurities are caused by, among other things, outflow of semen, menstruation, childbirth, contact with corpses. Ritual impurity also applies to food (the principle of kosher), dishes, clothes and equipment.

Therapeutic approach towards a Jewish patient



- **Circumcision** is a procedure involving the removal of the foreskin, prescribed by the Torah, performed on boys before the age of eight. If the child is too ill or weak, the procedure may be postponed. The patient may wish to contact a person called *Mohe* for this purpose.
- Judaism commands the sick to take all possible actions to lead to the recovery of the spirit, body and mind. Judaism supports the use of effective drugs, new medical discoveries and biomedicine, including blood transfusion.
- Some Jews may feel uncomfortable receiving care from a doctor, nurse or physiotherapist of the opposite gender, so if possible this **aspect should be taken into account when planning care.**

Therapeutic approach towards a Jewish patient



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- During the period of dying, methods and measures which prevent or hinder the natural death of a person or prolong the process of dying (persistent therapy) **are prohibited**. Understanding **should be shown to the family members of a dying patient** who, in questionable situations, will wish to consult the rabbi on specific issues and decisions regarding the care for a patient approaching the end of life.
- According to the principles of Judaism, a dying patient should not be left alone without care. Family members may wish to accompany the dying person during the last moments of life, therefore appropriate **conditions should be provided** (e.g. placing the patient in a separate room).
- Autopsies are not usually allowed among orthodox Jews. Some denominations currently allow an autopsy in special cases, such as when it is required by law.

Therapeutic approach towards a Jewish patient



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- **Extreme orthodox Jews may refuse to donate organs posthumously,** fearing that the body will be incomplete at the time of the resurrection of the dead.
- **Judaism mandates abstinence from sexual intercourse during menstruation (7 days).** Premarital and extramarital sexual relations are prohibited.
- In Judaism, all sexual deviance, homosexuality, and masturbation are generally prohibited. Jews generally do not disclose information about their homosexual tendencies to others.
- Jewish law does not recommend the use of condoms as a contraceptive, but it can be used as a mean of preventing the spread of sexually transmitted diseases.

Therapeutic approach towards a Jewish patient



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- According to Jewish rabbinic law, **it** is only when the head of the fetus leaves the birth canal of the mother that a person is considered to be alive.
- The pregnant woman is obliged to take special care of her physical health and spiritual development. During pregnancy and post-natal period, a woman is exempted from fasting.
- **A man who is a follower of Hasidism** (a religious movement based on Judaism) **is not allowed to touch his wife during childbirth and may not participate in** childbirth because he is not allowed to see his wife's genitals.
- **During delivery in an ultra-Orthodox family, the following interventions should be made:** to dress the obstetrician in a hospital gown that covers the front and back of her body, to provide a surgical cap to cover the head (hair is considered a personal part of the body), to allow the father of the baby to leave during delivery, and if he decides to stay, to place him in the delivery room so that he does not see the woman's crotch.

Therapeutic approach towards a Jewish patient



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- Judaism has a liberal approach to stem cell research. Preimplantation genetic diagnosis (PGD) do not constitute moral or ethical risks because according to the Talmud the soul does not enter the embryo until 40 days after conception. In vitro fertilization is acceptable as long as there are medical indications that the couple will be able to have offspring through such insemination.
- According to the views of Orthodox Judaism, reproduction is a duty of the family so attitudes towards contraception are not favorable. Among contraceptives, the use of the birth control pill is the least controversial. It is not considered appropriate to use condoms and hoods or vaginal membranes, which act as a mechanical barrier against sperm entering the reproductive tract.
- Traditional Jewish law is generally opposed to abortion. It is only allowed if pregnancy endangers a woman's health.

Therapeutic approach towards a Jewish patient



- Euthanasia is seen as an "act of murder." **All decisions and actions of health care professionals that may directly or indirectly shorten life are prohibited.**
- **Judaism follows specific dietary rules** (kashrut rules). These rules apply to among others the type and composition of the food consumed, the method of preparation of the dish, the time of consumption.

Therapeutic approach towards a Jewish patient



- During the greeting, some Orthodox Jews do not shake hands with people of the opposite gender. **An unwillingness to shake hands with the opposite gender should not be taken as a sign of rudeness.**
- Considering that women are perceived as attractive and seductive, Hasidic men cannot engage in casual conversation with them or look directly at their faces. **A nurse should touch Hasidic men during direct care only and only when necessary. Therapeutic touch is not viewed very positively.**



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Islam

Therapeutic approach towards a Muslim patient



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- Accurate information about the rules of life **should be collected** in order to respect spiritual needs, the need for privacy, and the preservation of modesty.
- In conversation with a culturally different person, **it is worth using non-verbal methods** of communication as well as the "**body language**". It is important that patients understand the questions and instructions of medical staff, so it is advisable to use interpreters.
- To protect patient confidentiality, it is best to avoid the patient's family and friends as interpreters. **All recommendations should be made in clear and simple language.**
- It is recommended to speak **slowly** and **address the patient** directly, formulate short sentences and use a normal tone of voice.
- Idioms, **raised tone of voice or difficult vocabulary should be avoided.**

Therapeutic approach towards a Muslim patient



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- It is important to make sure that the patient **understands the recommendations of the medical staff and accepts the proposed treatment plan.**
- Potential cultural conflicts between medical staff and patient **may arise from differing attitudes towards time, personal space, body language and system of values.**
- Some patients **will avoid eye contact** with medical staff, especially of the opposite gender.
- When the patient and medical staff speak a common language, it is important to be aware of **one's own way of communicating, to respect the patient's beliefs, and to be attentive.**

Therapeutic approach towards a Muslim patient



- Whenever possible, **it is recommended to place the patient in a single room.**
- Christian icons (cross, images with Saints) **should be removed from the patient's room.**
- Conditions **for the** recitation of the prayer, a place for the prayer mat, and the setting aside of the Quran should be created
- Information **about the schedule** of the day should be provided and the activities should be delayed until the prayer is completed.
- **Religious ornaments should not be removed** – unless required by the procedure (surgery or diagnostic tests).

Therapeutic approach towards a Muslim patient



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- Medical staff **of the same gender (doctors, nurses, physiotherapists) should be provided** - in cases when this is not possible, a conversation should be conducted to show understanding and respect for bodily matters.
- Medical staff should avoid or limit to the necessary minimum any physical contact with the patient.
- Touching **of patients' heads with 'sensitivity' should be avoided.**
- Relatives **should be allowed to visit the patient in the hospital.**

Therapeutic approach towards a Muslim patient



- **The right** of Muslim women to wear an outfit that covers the whole body, including the head, neck, arms and legs must be respected.
- All nursing care and medical **treatment activities should be communicated** to the patient, as well as to her husband or father.
- A **Muslim woman giving birth should be allowed a female only personnel.**
- It is **important to agree on the birthing position in advance.**
- The **exposure of the body of the woman giving birth should be kept to a minimum.**
- It is important **to allow the family to say a special prayer after cutting the umbilical cord.**
- It should be made possible to wash **the newborn four times after delivery.**

Therapeutic approach towards a Muslim patient



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- Conditions **for ritual cleaning involving washing of the face**, hands and feet before a prayer and reading of the Quran (also to those lying down) should be created.
- Conditions **for keeping the hands clean prior to and after each** meal and prior to praying before a meal should be provided.
- It is important to **ensure that the patient can wash their hands, crotch and anus** after using the toilet or a urinal (also for people who are lying down).

Therapeutic approach towards a Muslim patient



- The aspect **of fasting should be discussed with the patient.**
- If successful treatment requires discontinuation of fasting, the patient and their family should be informed and advised to change the timing of fasting after a period of illness and recovery.
- Medicines absorbed **through the skin**, rinses and injections, as well as taking a blood sample do not interfere with fasting.
- **Ear and nose** creaking, suppositories and globules as well as taking inhaled medicine may interrupt fasting.
- **It is important** to remember that Muslims do not take medicines in the form of gel capsules due to the presence of gelatin as well as alcohol-based medicines.
- **Circumferential punctures on the upper left limb should be avoided.**

Therapeutic approach towards a Muslim patient



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- It is important **to remember that Muslims divide food products into permitted and forbidden.**
- All dietary preferences should be discussed with patients individually.
- Families should be allowed to provide meals prepared at home – where it is impossible to provide equivalent ingredients in a hospital diet.

Therapeutic approach towards a Muslim patient



- The kitchen staff **should** be informed that the patient is a follower of Islam – separate dishes and utensils should be used to prepare their dishes.
- **The patient should be allowed to assume a seated position during meals.**
- If the patient's right hand is disabled or immobilized, they should be helped with their meal by feeding **with one's right hand**.
- When feeding those who require it, it is necessary to respect the principle to leave the food in the middle for **the end of the meal**.

Therapeutic approach towards a Muslim patient

- If the patient is unconscious, the bed should be positioned so that patient's **face is directed towards Mecca.**
- The family **should be allowed to be with a dying patient so they can recite the Quran to them.**
- It is important **to remember that Muslims may not wish their deceased relatives to be touched by people of a different faith or gender.**
- The family **should be allowed to ritually wash the body of the deceased person.**
- The funeral should take place within 24 hours, cremation is prohibited.
- It is important to obtain the consent of relatives in advance to perform an autopsy.
- The family **should be allowed to say the funeral prayer before the procedure.**



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Hinduism

Therapeutic approach towards a Hindu patient



- **Basic knowledge of Hinduism** is important when caring for a patient from India. Gathering accurate information about Hindu customs and traditions will ensure professional care and respect for spiritual needs and privacy.
- **It is important to acknowledge the customs** and allow patients to perform any religious activity also in hospital conditions (e.g. lighting a lamp, reciting prayers, chanting mantras).

Therapeutic approach towards a Hindu patient



- When performing religious activities, **care should be taken** to ensure patient's intimacy and not to interrupt them, unless necessary, until the rituals are completed.
- A Hindu patient may wish their relatives to visit them during their stay in hospital to help them make any medical decisions. **They should be allowed to do so**, bearing in mind the need to provide rest for the patient.

Therapeutic approach towards a Hindu patient



- **Religious ornaments should not be removed** from patients unless required by the procedure (surgery or diagnostic tests).
- In addition, **attention should be paid to the threads attached to the patient's wrist.** They mean making a sacrifice in a Hindu temple or making a pilgrimage. These threads should not be cut under any circumstances, as they are considered sacred. **They can only be untied with the consent of the patient or their family. Once untied, they must not be thrown away but handed over to the family.**

Therapeutic approach towards a Hindu patient



- In India, **gestures play an important role in communication:**
 - ✓ it is important to remember that in the presence of Hindus all activities should be performed with the right hand at all times (other people shouldn't be touched with left hand);
 - ✓ showing someone the underside of their feet, finger pointing and a squeezed fist with outstretched thumb are negative gestures;
 - ✓ to draw attention to a point or to show something, hand or chin should be used;
 - ✓ an outstretched little finger means that the patient wants to go to the toilet or just came back from it – it's best not to shake hands then;
 - ✓ it is important to remember that a manifestation of courtesy and good manners in the Hindu tradition is a semi-bow with hands folded at the level of the heart and fingers pointing upwards;
 - ✓ touching someone's feet and then one's own head is equivalent to showing one's deepest respect.

Therapeutic approach towards a Hindu patient



- A female Hindu patient may want to seek advice from her husband on any medical decisions. **It is important to allow her to do so.**
- The right of women **to wear items indicating their status in the community** (bindi – red dot, sindur – red powder in hair) **should be respected.**
- According to Hinduism, **menstruating women are considered unclean and should be kept in solitary confinement during these days.** There is also a special menu for menstruating women. Moreover, they cannot bathe and should cover themselves with warm covers at night.

Therapeutic approach towards a Hindu patient



- In India, the first religious rite is celebrated immediately after the birth of a child, **all Hindu customs prescribed by religion and tradition must be respected and allowed as long as there is no danger to the life of the mother or the child.**
- In such situations the family should be allowed to be present with the patient, all ritual activities should be respected, as well as entering the room and interrupting prayers should be avoided.
- **The right to give birth without cutting the umbilical cord should be respected.** It is up to the parents of the newborn to decide on this procedure (this is strictly respected in some institutions).

Therapeutic approach towards a Hindu patient



- In Hinduism, an important element of child care is a massage with almond or sesame oil. **Whenever possible, the mother should be allowed to perform it in a hospital setting.**
- For patients from India, supporters of the ayurvedic medicine, **it will be important to enable them to perform a special coconut and almond oil massage as well as the sirodhara treatment under hospital conditions.** In addition, they follow a special diet - it is worth discussing this issue with patients individually.

Therapeutic approach towards a Hindu patient



- Most Hindus approach food with due reverence, mass food preparation in a hospital may be a big problem.
- **All issues regarding dietary preferences should be discussed with patients individually,** in cases where the provision of appropriate ingredients in the hospital diet is not possible, families should be allowed to provide meals prepared at home.

Therapeutic approach towards a Hindu patient



- In addition, all indications and prohibitions, including bans on certain foods, must be respected. If the health of the patient allows them to eat foods that do not interfere with their dietary restrictions, the dietitian should compose the diet in such a way that foods which are prohibited for religious or customary reasons are avoided.
- **It is important to remember that giving food and drink with one's left hand can be perceived as disrespectful or even sinister.**

Therapeutic approach towards a Hindu patient



- The Hindus' belief in karma imposes a reluctance to improving one's being and interfering with suffering from illness. Intubation, artificial feeding and other manifestations of persistent therapy can be perceived as contrary to Hinduism. In contrast, palliative medicine is in line with religious tradition because it leads to natural death.
- In emergency situations, especially when the life of the patient **is at risk, all Hindu customs prescribed by religion and tradition must be respected.** In such situations, the family should, as far as possible, be present with the patient, and it is the responsibility of the medical personnel to respect all ritual activities performed by them, to avoid entering the room and interrupting prayers.

Therapeutic approach towards a Hindu patient



- A follower of Hinduism would rather die at home. However, if unavoidable, death in hospital is acceptable. **A dying patient may want to be alone, with relatives or with their priest or Guru (if possible).**
- **Among the most important Hindu ceremonies are the post-mortem ritual and burial.**
- A good death, important to both the dying person and their relatives, occurs when the dying person is properly prepared for death, astrological signs are appropriate and suitable rituals are performed. A bad death will have lasting consequences in subsequent lives and will have unfortunate consequences for the family (e.g. bad luck, nightmares and infertility). **The family should be allowed to perform ritual activities related to the preparation of a relative for death; entering the room and interrupting should be avoided.**

Therapeutic approach towards a Hindu patient



- In Hinduism, the place of death matters. In order to avoid the area between the ceiling and floor, the dying person may be lowered to the floor by the family.
- Religious Hindus believe that just before death, a leaf of the sacred **tulsi plant** - Asian basil - and a few drops of water from the sacred river Ganges should be given into the mouth of the **dying person for a smoother transition from one incarnation to another.**
- Hinduism presupposes that each organ is an integral part of the body which, after death, should be immediately cremated in order to accelerate the process of leaving the body by the soul. For this reason, families are very reluctant to agree to autopsies. The autopsy can be performed on court order.



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BUDDHISM

Therapeutic approach towards a Buddhist patient



- Elderly and disabled people should be treated with respect just like any human being.
- Conditions for **meditation should be** created for patients, especially the chronically ill.
- Despair makes it *difficult* for a dying person to leave, so one should **behave calmly when a person dies**.
- It should be respected that during a period of severe illness and during the process of dying, Buddhists may refuse to **take painkillers and sedatives, especially narcotic drugs** (due to the desire to consciously experience the various stages of dying).

Therapeutic approach towards a Buddhist patient



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- **All forms of life saving are permitted, but it is not recommended to prolong the agony or vegetation state** unnecessarily.
- At the moment of dying, the optimal position to take according to Buddhists is a **meditation position**. Some people can lay down in the "lion's position"- laying on the right side with the left hand resting on the left thigh, the right hand under the cheek and the little finger closes the right nose hole. The legs may be slightly bent in the knees.
- A dying Buddhist is best moved to another room. If the dying patient is a Buddhist monk or nun who made a religious vow in celibacy. It would be appropriate for these persons to be **nurtured by nursing staff of the same gender**.

Therapeutic approach towards a Buddhist patient



- In the situation of a serious life-threatening illness, Buddhists take the so-called "**sacred substances**" blessed by the Buddhist priests, that have the shape of small balls of the size of a mustard seed, to provide the dying patient with blessing and influence the future fate of the next incarnation.
- The corpse shouldn't be touched for approximately **20 minutes after death**. Ideally, it should be left for 3 hours or even 3 days.
- Whenever possible, items belonging to the deceased **should be left in place** (e.g. in a hospital bed cabinet belonging to the patient) to be available to family or friends.

Therapeutic approach towards a Buddhist patient



- Buddhists **usually do not object to performing autopsy on the bodies of their** deceased relatives.
- Buddhists distinguish **4 categories of disorders, with** each group of disorders requiring different treatment. In treatment, a great deal of importance is attached to the use of medicinal preparations with ingredients that are derived exclusively from natural sources (herbs, minerals). Acupuncture and massage are also used.
- **A pregnant woman** should take care of herself, meditate, and indulge in religious practices. She is not allowed to perform any physical work since the seventh week of her pregnancy. Buddhists attach great importance to good medical care for pregnant women.

Therapeutic approach towards a Buddhist patient



- **During and an hour after labor, a specially prepared soup is served to the woman** - in order to replenish her energy. In addition, the birthing woman receives an alcoholic tincture, and the trusted people present during the birth perform a special head and shoulders massage to give protection to the body, especially the birth organ.
- **Buddhism allows the use of IVF** (in vitro fertilization) without restricting access to this medical procedure to married couples. Sperm donation is also allowed.

Therapeutic approach towards a Buddhist patient



- **Abortion** is strictly forbidden and treated as a crime. It can only be performed in case of absolute danger to the mother's life. The use of early abortion pills is also not allowed.
- Some Buddhists have **strict rules of hygiene** and have to wash themselves before meditation, as well as after using the toilet and after each meal.
- The first commandment orders Buddhists to avoid killing and harming living creatures. Buddhists try not to consume meat, coffee, alcohol. Many Buddhists are **vegetarians**. This should be taken into consideration while fulfilling the dietary needs of a patient.



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VIETNAMESE PATIENTS

CARE FOR VIETNAMESE PATIENTS



- The Socialist Republic of Vietnam is located on the east coast of the Indochina Peninsula; the official language is Vietnamese.
- It should be borne in mind that verbal and nonverbal communication play an important role.
- Laughter can show uncertainty.

CARE FOR VIETNAMESE PATIENTS



- In a meeting, the traditional Vietnamese greeting is shaking right hands with a distinct grip of the other person's hand.
- Direct eye contact is considered as rude.
- When sitting, foot over leg, which expresses superiority, is not recommended.
- Crossed arms on the chest are a sign of agitation.

CARE FOR VIETNAMESE PATIENTS



- It is common for the Vietnamese to nod during the talk which can make one believe that they listen and agree with what is said.
- The Vietnamese language does not distinguish polite form of addressing other people. They use verbal expressions as a result of the situation.
- For Vietnamese people, the family is in the first place, which plays an important role in solving situations. Couples often consult with their parents.

CARE FOR VIETNAMESE PATIENTS



- Vietnamese patients require privacy and silence as they believe that sleep has healing power. All examination results and planned interventions must be explained slowly and clearly.
- The Vietnamese profess these basic religions - Buddhism, Confucianism and Taoism.
- A pastor or a monk may visit the ill person as part of spiritual care of them.

CARE FOR VIETNAMESE PATIENTS



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- Traditional Vietnamese medicine is based on two fundamental opposite principles, Ying and Yang.
- In their natural treatments, the Vietnamese use drugs and substances based on plants.
- They use the appearance of the tongue to diagnose the disease.
- The Vietnamese take active care of their health, eating healthy diet, being less prone to overweight and exercising.
- They use various forms of relaxation in prevention.

CARE FOR VIETNAMESE PATIENTS



- Personal hygiene is very important to the Vietnamese and Vietnamese patients prefer to tend to it themselves. If they cannot, they prefer the assistance of a family member of the same sex.
- Respect for privacy and shame are important points when the Vietnamese stay in hospital.
- They like warm, soft food (e.g. pure broth with vegetables and rice). With little salt.
- They do not take anything cold by mouth.

CARE FOR VIETNAMESE PATIENTS



- They drink a lot, especially tea or water at room temperature - tea without lemon or sugar, diluted with water.
- The majority of the Vietnamese are lactose-intolerant. They do not eat cheese nor other dairy products.
- While being ill, they eat rice porridge, lots of vegetables and fruits.
- The Vietnamese take food as medicine, and according to somatic problems, they also choose a specific diet.
- During hospitalization, family members bring the patient their favourite food.

CARE FOR VIETNAMESE PATIENTS



- Vietnamese women are very responsible during pregnancy.
- A sensitive topic is the communication about the child's gender.
- Arduous activity is not recommended in pregnancy and emphasis is put on relaxation and sleep.
- Pregnant Vietnamese women observe special hygiene (e.g. cleaning their teeth with salt water).
- In labour, Vietnamese women show minimal facial expressions and give a calm impression, behaving quietly - they want to deal with pain on their own.
- Pregnant women do not ask for pain medication due to fear of addiction and side effects.

CARE FOR VIETNAMESE PATIENTS



- The Vietnamese pay attention to dignified dying which lies in the quality of nursing care for the dying.
- They remember the good deeds of the dying person, talking to them and spending most of their time at their bedside.
- At this stage of life, the patient needs peace, sense of security and assurance that they are not alone.
- In terms of nursing care, this means supplying all needs. These may be somatic needs - being clean, not being hungry or thirsty, not being in pain.

CARE FOR VIETNAMESE PATIENTS



- Individuality and dignity must be always preserved. Religion also plays a role of great importance, as it approaches dying and death in their own way and the patient can be expected to behave in a way that corresponds to their faith.



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JEWISH PATIENTS

CARE FOR JEWISH PATIENTS



- Knowledge of the principles of Jewish life will enable us to respect spiritual needs, needs of privacy, modesty and more.
- When talking to a culturally different patient, we recommend using non-verbal means of communication, using "body language" and, in the case of passing on accurate professional information, using a translator.
- When passing on information about the health status of a Jewish woman, it is necessary to inform the husband or father about all nursing and treatment activities.

CARE FOR JEWISH PATIENTS



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- Privacy and modesty are very important in the religion of Jewish clients. Jewish teaching forbids physical contact between adults without family ties. It is necessary to think about gentle handling and touching the head and forehead when treating this patient, because these parts are used for daily prayer.
- Jewish women, but also Jewish men, do not want physical contact and exposure in the presence of the opposite sex. It is therefore desirable that a Jewish patient is cared for by medical staff of the same sex (doctor, nurse, physiotherapist). Healthcare professionals should keep physical contact to the minimum necessary and, if necessary, inform the patient of their purpose.

CARE FOR JEWISH PATIENTS



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 Erasmus+

- A very important aspect of care is the recognition of the patient's privacy.
- Jews are obliged to visit the sick family members in the hospital
- with the exceptions of the ban on visits to patients suffering from intestinal diseases.
- Halacha requires that the visit doesn't obscure the patient's head, because God is present above his head and protects him.
- It is necessary to realize that visitors can perform special rituals.
- They often light candles because they believe that evil spirits are afraid of light.

CARE FOR JEWISH PATIENTS



- If possible, place the Jewish patient in a separate room and remove the Christian icons.
- Prayer is very important in the life of a Jewish person, and therefore it is necessary to provide these patients with conditions for prayer.
- The Jews pray three times a day and turn to the east as they pray.
- During prayer, the Jews cover their heads with a kip, and during morning prayer on weekdays, they use tefillin (prayer strips) and tallit (prayer shawl).

CARE FOR JEWISH PATIENTS



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Partnerships



- It is recommended to create conditions for saying a prayer. Provide information about the daily schedule of the ward and postpone therapeutic activities until after prayer.
- The rabbi prays in the morning, afternoon and evening. Medical staff should know that they utter their prayers in a low voice in the Hebrew language, using prayer aids such as cloaks and straps, and cover their heads with a yarmulke.
- It is necessary to respect the fact that they do not wish to be disturbed during prayer.
- When the day of rest (Shabbat) comes, the rabbi may have more visits. Also, it is good not to schedule any diagnostic or therapeutic procedures during this special day and other Jewish holidays, unless their life is in danger. The spiritual community leaders are addressed by their surname or title.

CARE FOR JEWISH PATIENTS



Strategic
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- Orthodox Jews and conservatives honour the Sabbath (Saturday) from Friday evening until Saturday sunset. At this time or during major Jewish holidays, they may refuse to be hospitalized or undergo medical treatment unless it is necessary to save their life.
- Jews divide food into permitted and forbidden. All dietary issues should be discussed with the patient in person and they should know the composition of the food they will eat.
- The rules for preparing meals are very strict. Separate dishes must be used for preparation, which do not come into contact with food that is prohibited by religion. Kitchen staff should be informed that the patient is a JEW and is following these principles.

CARE FOR JEWISH PATIENTS



Strategic
Partnerships



- The family should be able to provide meals prepared at home - if it is not possible to provide equivalent ingredients in the hospital diet.
- Kitchen staff should be informed that the patient is Jewish - they should know that separate meals and utensils should be used to prepare meals.
- Jewish women dress modestly, covering themselves apart from their faces. Typical elements for men: headgear - yarmulke, hat, side curls, shtreimel; women: hat, scarf, wig. Jews expose themselves as little as possible - even in hot weather.

CARE FOR JEWISH PATIENTS



- A Jewish woman giving birth to a child should be treated by medical staff whenever possible.
- Viewing intimate parts should be kept to a minimum and the position of the mother at birth should be arranged earlier to avoid misunderstandings and complications.
- The husband may be present, but if he wants to leave, we must respect it.

CARE FOR JEWISH PATIENTS



Strategic
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- "Ritual purity", the opposite is "Ritual impurity" - this is caused by semen discharge, menstruation, childbirth, contact with corpses. Ritual impurity also applies to food.
- The state of ritual cleansing is achieved by repeated washing, so the patient should be provided with conditions for these operations, including washing the face, hands before prayer.
- They perform hand hygiene for hygienic or ritual reasons. Hygienic hand washing is performed shortly after waking up, before and after each meal and after using the toilet. Before prayer and before the beginning of the Sabbath, we follow a ritual wash.

CARE FOR JEWISH PATIENTS



- It is appropriate to allow the family to be present to dying patients so that they can offer prayers.
- The patient's body should not be washed, this is done before the funeral, and ideally it should not even be stripped of the clothes they are wearing. The family should be allowed to ritually wash the deceased.
- The funeral should take place within 24 hours, cremation is prohibited, autopsy is allowed only exceptionally with the consent of the family. The patient must be buried with all parts of the body, in case of amputations, etc.



**Strategic
Partnerships**



ARAB PATIENTS

CARE FOR ARAB PATIENTS



- By gaining accurate information about the principles of their lives, you will ensure that their spiritual needs, privacy and modesty are respected.
- When talking to a culturally different person, it is worth using non-verbal means of communication and using "body language". It is important that patients understand the questions and instructions of healthcare professionals, so it is good to use a translator.
- In order to protect the patient's confidentiality, it is best to avoid translators from patients' family and friends. All recommendations should be described in clear and simple language.
- Speak slowly and address the patient directly, formulate short sentences and use the usual voice tone.
- Avoid loud voices or difficult phrases.

CARE FOR ARAB PATIENTS



- Always make sure that the patient understands the recommendations of the medical team and accepts the proposed treatment plan.
- Potential cultural conflicts between healthcare professionals and patients may arise due to different approaches to time, personal space, body language, and the value system.
- Some patients avoid eye contact with healthcare professionals, especially those of the opposite sex.
- If the patient and the medical staff share a common language, it is important to know what we want to tell the patient and we must respect the patient's faith and be attentive.
- If you report the health status of an Arab woman, you must inform the husband or her father of all nursing and treatment activities.

CARE FOR ARAB PATIENTS



- Privacy and modesty are very important in the religion of Arab clients. Arab women, but also Arab men, do not want physical contact and exposure in the presence of the opposite sex. It is therefore desirable that an Arab patient is cared for by medical staff of the same sex (doctor, nurse, physiotherapist). If this is not possible, a conversation with the patient, appropriate demonstration, and an understanding of respect for the body problems may be helpful.
- If possible, place the patient in a separate room.

CARE FOR ARAB PATIENTS



- Christian icons should be removed from the room.
- It is necessary to create conditions for saying a prayer, a space for a prayer pad and laying the Qur'an aside.
- Provide information about the daily schedule of the ward and postpone healing activities until after prayer.
- Ornaments of religious significance should not be removed - unless required by a special procedure (surgical or diagnostic tests).

CARE FOR ARAB PATIENTS



- It should be noted that Arabs divide food into permitted and forbidden.
- All dietary issues should be discussed with the patient in person and they should know the composition of the food they will eat.
- The family should have the possibility of bringing meals prepared at home - if it is not possible to provide equivalent ingredients in the hospital diet.

CARE FOR ARAB PATIENTS



- Kitchen staff should be informed that the patient is Arabic - they should know that separate meals and utensils should be used to prepare meals.
- Let the patient sit while eating.
- In case of disability or immobilization of the right hand, help the Arab patient eat food by feeding them with the right hand.

CARE FOR ARAB PATIENTS



Strategic
Partnerships



- It is important to discuss fasting with the patient.
- If the treatment program and successful cure include the need to break the fast, the patient and their family should be informed and the fasting should be postponed until after illness and recovery.
- It is important to keep in mind that these patients do not break fasting when it comes to medicines absorbed through the skin, the rinsing treatment method and also the injectable treatment.
- They break fasting with drugs in the ears or nose, suppositories and globules, and with inhaled drugs.
- It should be noted that Arabs do not take drugs in the form of gel capsules due to the presence of gelatin and alcohol-based drugs.
- Avoid injecting a peripheral vein in the patient's left hand.

CARE FOR ARAB PATIENTS



- Make sure the medical staff (doctor, nurse, physiotherapist) is of the same sex - if this is not possible, a conversation with the patient, appropriate demonstration and understanding of respect for physical problems may be helpful.
- Healthcare professionals should keep physical contact to the minimum necessary and, if necessary, inform the patient of their purpose.
- Do not touch the patient's head, if so, do it with great "carefulness".
- Allow relatives to visit patients in the hospital.

CARE FOR ARAB PATIENTS



Strategic
Partnerships



- It is necessary to create conditions for ritual washing, including washing the face, hands and feet before prayer and reading the Qur'an (also for those who are bedridden).
- You must create the conditions to keep the patient's hands clean before and after each meal and before saying a prayer before eating.
- In addition, conditions should be created for washing the anal area after using the toilet, also in bedridden patients.

CARE FOR ARAB PATIENTS



- The rights of Arab women to wear clothes covering the whole body, including the head, neck, arms and legs, must be respected.
- If a woman gives birth, she should be given help whenever she needs it.
- The delivery position should be agreed in advance before delivery.
- Viewing intimate parts should be kept to a minimum
- It is important to allow the family to say a special prayer after cutting the umbilical cord.
- Have the newborn washed four times after birth.

CARE FOR ARAB PATIENTS



- In the case of an unconscious patient, position the bed with the face facing Mecca.
- Allow the family to be present to patients who are dying to recite the Qur'an.
- Arabs do not want people of other faiths or genders to touch their dead bodies.
- The family should be allowed to ritually wash the body of the deceased.
- The funeral should take place within 24 hours, cremation is prohibited.
- For autopsy, it is important to obtain prior permission from relatives.



**Strategic
Partnerships**



UKRAINIAN PATIENTS

CARE FOR UKRAINIAN PATIENTS



- Ukraine is a country located in Eastern Europe; it borders Russia to the east, Moldova and Romania to the southwest, Hungary, Slovakia and Poland to the west, and Belarus to the north. The southern border is formed by the Black and Azov Seas.
- The official language is Ukrainian.
- Ukrainian society is more patriarchal, the family is the basic value of society.

CARE FOR UKRAINIAN PATIENTS



- Ukrainians are helpful and communicative.
- The central element of non-verbal communication is a face-to-face look, thus expressing trust and respect for the other person.
- Handshake, which they practice during meetings and farewells, is also important to them.
- However, hands are only shaken among men. It may occur that the man reaches out to all men in a company, if he knows them or becomes acquainted with them, but the women are skipped altogether, which is common.

CARE FOR UKRAINIAN PATIENTS



Strategic
Partnerships



- They are very straightforward and will say how they feel.
- Ukrainians are often very religious - they profess Orthodoxy or Christianity.

CARE FOR UKRAINIAN PATIENTS



- Ukrainian patients who come to hospital are usually very disciplined and have very few specific requirements.
- They eat mostly very healthy, they prefer fish and vegetables. They do not have special needs during hospitalization.
- They readily adapt to and understand the regime orders of their ward.
- Not knowing the language of the majority of society and thus a misunderstanding of the information provided can lead to problems.

CARE FOR UKRAINIAN PATIENTS



- They take pregnancy very responsibly, they regularly visit antenatal clinics.
- Ukrainian mothers do not have special requirements, they cooperate during childbirth, they do not show much emotion.
- It is very important for them that the child is Christened as soon as possible, they are often tied to a pram to protect the child from unclean forces.

CARE FOR UKRAINIAN PATIENTS



- Death and dying is a natural part of life for them. If possible, they want to die among their loved ones.
- The dying and death of an old person is associated with their preparation for the end. A priest visits, there is a ceremony of the sacrament of reconciliation and of parting with their neighbours.



**Strategic
Partnerships**



ROMA PATIENTS

CARE FOR ROMA PATIENTS



- Romani culture is not homogeneous. It is a subject to local influences and is very diverse in different areas.
- Already in the Middle Ages, the Romani summoned distrust by their differing appearance, character and unfamiliar customs. This was accompanied by occasional thefts and poaching, which provided them with a livelihood.
- The common language is Romani.

CARE FOR ROMA PATIENTS



- The way of non-verbal and verbal communication is very lively and emotional.
- They do not like prolonged eye contact.
- In particular, they need a large family throughout their lives.
- During a period of illness, Romani often show poor levels of patient compliance and rarely follow the recommended medical guidelines.

CARE FOR ROMA PATIENTS



- Excuses, such as living a long distances away from the medical facility, lack of funds for travel, treatments, medication or insurance, are typical of them.
- They prefer to visit their general practitioner, rather than specialists.
- Prevention is underestimated and neglected, mostly in case of specialized health care, such as visits to a gynecologist, dentist or ophthalmologist.
- Poor levels of compliance on the directions and administration of medications.

CARE FOR ROMA PATIENTS



- They are not willing to change their lifestyle.
- Common health problems are obesity and smoking.
- Health is on third place in the Romani value ranking (after love and family).
- The Romani generally dislike hospitals, as according to them, there is a high incidence of diseases, bacteria and death. If there is no other option, they will accept to become hospitalized.

CARE FOR ROMA PATIENTS



- When hospitalized, it is quite difficult for health professionals to take care of them because the Roma do not trust them. A significant problem may also be communication with the family of the hospitalized.
- The Roma want information about their health to be shared with them and their families. Therefore, it is important to find out who in the family is to be provided with information and who will be dealing with the healthcare professionals on behalf of the family.

CARE FOR ROMA PATIENTS



- The Romani feel great fear of pain and death, even if their medical condition is not serious. No pain is banality for the Roma. This is due to their temperament and origin.
- The Romani express pain both verbally and by mimic means. They moan loudly, sigh, complain, cry. They are very emotional, and often moan loudly.

CARE FOR ROMA PATIENTS



- Romani culture does not consider an illness as an individual's matter. If the Roma are hospitalized, they are visited by the whole extended family, often outside the visiting hours, which can lead to conflicts with medical staff.
- Romani normally only adhere to the treatment regimen until their painful symptoms subside and once they do, they will stop taking the medication and disregard medical advice.

CARE FOR ROMA PATIENTS



- Therefore, they generally perceive healthcare professionals as those who can be a problem because they pointed out problems.
- According to experience, Romani mothers eat normal food, preferring pates, sausages and salami, liver, butter and lard over other fats, they will consume French fries, chips, sweetened soft drinks and delicatessen products, preferring white bread and rolls over whole grains.

CARE FOR ROMA PATIENTS



- The most important value of a woman is her fertility, because according to how many children she gives birth, her position in the family grows. Pregnancy is always welcomed: the more children the spouses have, the more prestige their family achieves.
- Pregnant Romani women often do not follow a healthy lifestyle, often smoke, overeat, avoid exercise, have high blood pressure and gestational diabetes mellitus.
- The birth of a child is celebrated by the whole family.

CARE FOR ROMA PATIENTS



Strategic
Partnerships



- It is not uncommon for women to go home after giving birth and leave their newborns in hospital. They come for the newborn only when the child is released. Many children are placed in infant institutions.
- Sometimes, there are problems in the ward because of smoking, premature termination of hospitalization or numerous visits that come to the maternity hospital to see them.

CARE FOR ROMA PATIENTS



- The whole family experiences dying very loudly, the whole family wants to be there.
- A funeral is an important ceremony for the Roma.