

Spirituality and Faith Guide





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“Health is not just the absence of dis-ease, it is a state of physical, psychological, social and spiritual well-being”

(World Health Organisation, 1948).

Introduction

This booklet offers support and guidance with respect to caring for people’s spiritual needs. It is also designed to assist with the practical issues involved with supporting people from various religious communities. It is offered to you by the Department of Spiritual and Pastoral Care, as a means of promoting client focussed spiritual care.

Understanding the beliefs and practices of the different spiritual and cultural groups represented in Leeds, York and North Yorkshire is no easy task. There is no substitute for listening to each individual and those who know him/her well. Relevant information in an accessible form can help us to be better prepared and more sensitive to the feelings and expectations of those in our care.

The Equality Act 2010 ensures that public sector organisations consider the needs of all individuals in their day to day work – in shaping policy, in delivering services and in relation to their workforce.

The Act prohibits direct and indirect discrimination due to religion or belief and also harassment related to religion or belief, as well as taking due regard to advance equal opportunities and foster good relations between persons sharing protected characteristics (e.g. religion or belief) and those who do not.

More information is available from:

**Leeds and York Partnership NHS Foundation Trust:
Diversity & Inclusion Team on 0113 29 54413**

Spiritual Values and Skills

Spirituality and spiritual practices can help us to develop the better parts of ourselves, our spiritual qualities. They can help us to become more loving, creative, patient, persistent, honest, kind, compassionate, wise, calm, hopeful and joyful. These should all form part of the best health care. Spirituality emphasises our connections to other people and the world, which creates the idea of 'interconnectedness and reciprocity'. This means that the giver and receiver both get something from what happens, that if you help another person, you help yourself. Many carers naturally develop spiritual skills and values over time as a result of their commitment to those for whom they care.

As an organisation, our values reflect our commitment to encouraging staff, service users and carers to develop and practice spiritual principles and attitudes. We recognise that our workforce must be supported in developing these skills and 'living' these values.

Therefore, our staff should expect to:

- Have their spiritual and/or religious views and practices treated with respect
- Have the opportunity to reflect on their spirituality and/or religious beliefs
- Have training to assist in providing an assessment and support of the spiritual and/or religious needs of service users
- Have access to training and reading material about the cultural, spiritual and religious needs of diverse mental health and learning disability service user groups.
- Be encouraged to be involved in inter-disciplinary work with Pastoral and Spiritual Care staff in order to provide the highest quality care and support to service users and carers.

Further broadening our overarching strategic principles, 'spiritual values' include:

- Being mindful of the feelings and needs of others – developing a deeper sense of empathy, compassion and kindness
- Being honest – and able to see yourself as others see you
- Being able to stay focused in the present, to be alert, unhurried and attentive
- Being able to rest, relax and create a still, peaceful state of mind
- Developing awareness of our own feelings and needs and being able to care for ourselves
- Developing awareness of our strengths, skills and abilities
- Being mindful of difficulties and limitations and able to seek support and ask for help
- Being able to be with someone who is suffering, while still being hopeful
- Learning better judgement, for example about when to speak or act, and when to remain silent or do nothing
- Learning how to give without feeling drained, engaging in appropriate self-care
- Being able to grieve and let go.

What is Spiritual Care?

Most of us, at some stage in our lives, will experience acute mental distress. This might be due to trauma, loss or other challenging life experiences. At such time we may rely on our spirit, the spark within us, which hopefully is like a lamp or candle and still lit – if flickering!

At such a time, our energy and hope for the future might be low. When we feel empty inside, then we may need someone else – a member of professional staff, friend, somebody from a community (including faith) group, to ‘hold the hope’ for us – and keep the candle lit.

We all have something inside us which makes us tick: a spark of motivation for why we get out of bed in the morning, and why we do the things we do; a light which guides us when the going gets tough. This spark is our Spirituality, which can be defined in many ways, including:

- our life force
- what makes me, makes you – our uniqueness as a person
- allied to our connections and our connectedness to other people, nature, animals, sport and exercise, art, music and drama, the transcendent
- our life pilgrimage, mission and quest
- how we channel our desires
- our creativity
- a search for hope, harmony and wholeness
- what makes us tick
- what keeps us going when times are tough.

Some see it as narrowly related to religion. Some view it in a broad way i.e. all care we give is potentially spiritual, we all have a spiritual dimension to our lives and so caring for this dimension is ‘spiritual’ care. It can be helpful to think of spiritual care as ‘tending to spiritual needs’. Spiritual needs arise when:

- Life throws up events which our past ways of understanding the world cannot help us deal with
- Our current way of dealing with such issues becomes damaged or distorted (e.g. affected by mental health problems)
- We do have some form of ‘spirituality’ which requires certain community or personal actions e.g. worship, communion, walking outdoors, prayer, meditation, reflecting on life etc
- Spiritual care is usually given in a one to one relationship, is generally person centred and makes no assumptions about personal convictions or life orientation. Spiritual care is not necessarily religious. Religious Care, at its best, should always be spiritual.

What is Religion?

It is perhaps easier to recognise the main world religions since they may share certain features such as moral, dietary & modesty codes and certain practices may be given a high status such as prayer or meditation. Many involve both individual and communal activities. Most involve some idea of the Divine (but not all), have texts with a varying degree of authority and most have organized structures of some kind.

Alongside such 'world religions', there are also more localised expressions of belief, newer organised faiths, smaller groups, religious groups and belief systems which do not fit into any orthodox definition of a religion. There is also incredible diversity of beliefs within many religious groups. Religious care is given in the context of the shared beliefs, values, practices and lifestyles of a faith community.

What is Culture?

This can refer to shared customs, systems of ideas, values, meanings, shared religious traditions, heritage, or some combination of all these. Terms such as culture, race and ethnicity may be related. There is no single agreed way to use this language, although "ethnic minority" & "black and minority ethnic groups", are common. We need to be aware that simply substituting 'culture' or 'ethnicity' for 'race' does not in itself clarify terminology, it simply changes the language.

What is Pastoral Care?

Pastoral Care is a person-centred, holistic approach to care which is inherent in many cultures, faiths, beliefs and traditions. It is a process of supporting, guiding, nurturing, healing and empowering people in whatever situation they may be in. It can be described as a way of supporting the individual to identify their needs and strengths and assisting them in achieving his/her personal goals.

Spiritual care and its relationship to religious care

Many have found the following descriptions to be helpful although they do not claim to be a full explanation.

Spiritual care is usually given in a one-to-one relationship, is completely person-centred and makes no assumptions about personal conviction or life orientation.

Religious care is given in the context of the shared religious beliefs, values, liturgies and lifestyle of a faith community.

Spiritual care is not necessarily religious.

What do we mean by 'Spiritual Needs'?

Although we are all unique, we may share common spiritual needs such as the need to be treated with kindness, compassion and care and to have our uniqueness recognised, appreciated and valued.

If spirituality involves the search for meaning and purpose in life, then religion and religious observance may be significant ways of meeting these needs. Assessment of a person's spiritual needs, may reveal an existing faith practice and can be undertaken using the Trust's Spiritual and Religious Assessment Tool

which considers questions such as:

1	Who/what matters most to you and brings meaning to your life? In the past? Now? In the future?
2	What gives you hope/peace?
3	Do you have beliefs that matter to you?
4	Do you feel lonely or that no one cares about you?
5	Are you struggling with issues of guilt, bereavement or loss in your life?
6	What provides you with a sense of belonging and acceptance?
7	In an emergency or life-threatening situation would you like us to contact your spiritual or religious leader or faith community?
8	Has your current situation affected your ability to do things which usually help you spiritually?
9	What do you feel your priority need is?
10	Would you like us to support you with this need? If so, how? (Remember to care plan)

These questions are not specific to any one religion, tradition or philosophy. The answers given may not give clues to the faith the person follows, but where they find themselves within that tradition. For example, it would be wrong to presume that a person will not eat a certain food because that food is identified as not being allowed to people within that religion.

Supporting spirituality needs might include:

- **A time, a place and privacy in which to pray and worship**
- **The chance to explore spiritual (and sometimes religious) matters**
- **Reassurance that healthcare workers will not undermine their faith**
- **Encouragement to deepen faith**
- **Enabling the individual to feel connected**
- **Sometimes, supporting the individual in their need for forgiveness.**

The Whole Person (Holistic) Approach

As professionals we need to understand where someone is coming from and be able to respond to the needs of the whole person, including their social, emotional, physical, spiritual, cultural and psychological needs. A failure to do this could hinder their recovery and integration into the community.

The individual may or may not conform to all the values and practices of a particular culture or faith community

This is important especially when working with people whose culture / religion we are unfamiliar with. Few people are well described by a simple label or stereotype. This is as true for a Muslim service user as it is for someone described as 'Church of England'. Most people who belong to an ethnic minority also

describe themselves as 'English', 'British' or 'from Yorkshire'. Younger generations in particular can reflect a wide range of cultures and influences.

Our approach should involve finding out where someone sees themselves in relation to a culture or belief system, just as we seek to understand how someone fits into their family system. There is a real risk of alienation, either because we overlook vital cultural/religious issues, or if we presume beliefs the individual may reject. However, such risks should not lead us to avoid addressing this important aspect of care.

We sometimes need to hold people's 'religious, spiritual or cultural practices' for them

For many reasons, people in our care can find their normal patterns of diet, modesty, or other religious observances compromised. Part of our job is to help service users to retain self respect, integrity and dignity. This can mean us having to discover and help people to observe cultural and religious patterns of living. In such cases, knowing significant religious and cultural details is vital, and family, community or specialist support becomes central to adequate care planning.

People don't need a 'label' to deserve pastoral and spiritual care

The issues above become evident if an individual chooses a religious 'label' for us to document and act upon. However, it is possible that a person from a particular faith group might appreciate care and support from someone from a different spiritual/cultural/faith group. It is equally true that people outside of 'religious' or 'cultural' labels have beliefs and customs that matter greatly to them. People who have past experience of chaplaincy support (prison, forces, hospital, school, university) or who have had a good experience of faith groups may also appreciate contact despite having no religious label. We should not assume that it is only religious people who are likely to value pastoral support, especially in a time of stress or crisis.

The Spiritual Well-Being of Adults with Mental Ill-Health

It is the responsibility of Leeds & York Partnership NHS Foundation Trust, to actively promote and develop the spiritual well-being of adults with mental health difficulties. In this context the word 'spiritual' is not defined as relating to any organised religious expression or group, but as something which gives value, meaning and purpose to an individual. It is a set of qualities and values which make each person unique and are understood as being 'spiritual'.

In order to promote the well-being of staff, service users and carers, Leeds & York Partnership NHS Foundation Trust should aim to:

- **Ensure that individuals have a holistic assessment and care plan which recognises and responds to the significance of spiritual needs in mental distress and crisis.**
- **Ensure that every person is treated with dignity and respect; this includes acknowledgment of any faith they may or may not hold and of their cultural background**

- **Facilitate access to a faith leader or community representative from an individual's religious community when requested**
- **Ensure individuals feel comfortable talking to staff about their spiritual and/or religious needs and expect staff to make reasonable provision to meet those needs.**
- **Ensure individuals have access to an environment which allows them to express their spirituality and any religious needs or reflective practice and are able to observe and develop these practices whilst in the care of the Trust.**
- **Ensure care is administered that is courteous, warm, tolerant and well informed.**
- **Ensure there is access to a chapel, sanctuary or faith room for prayer, reflection and any other similar therapeutic activity.**
- **Ensure a person's dietary requirements are met and are in line with their spiritual, religious or cultural background.**
- **Help each person to take an active role as far as possible in their own religious/cultural community, should they wish.**
- **Promote an attitude within the service that encourages each person to fulfil their potential as a unique individual and takes account of their personal religious and cultural background.**
- **Ensure staff are trained and equipped to understand and deliver this guidance.**

There may be circumstances where spiritual/religious/cultural beliefs, values and practices may in fact interfere with mental health care and equally, an individual's mental health issues might interfere with spiritual practices and beliefs. Therefore, promoting appropriate awareness and expression of spirituality and faith might be helpful to avoid further distress and ill-health.

In Islamic beliefs about jinns (spirits) and some African practices and rituals, beliefs around curses and evil spirits involve beating individuals to drive out the spirits. These types of cases need to be dealt with sensitively and on an individual basis. Further examples include:

- **Someone fasts excessively to the extent that this becomes detrimental to their health**
- **Someone states they hears the voice of God telling them to harm themselves or others in various ways**
- **The voice of God (or spirits) tell them to kill them self**
- **Someone believes them self to be the second coming of Christ, a prophet of God, or important religious figure**
- **Someone believes themselves to have spiritual or supernatural powers, leading to risky behaviour**
- **A person prays excessively to the extent that this starts to completely take over their life**

- **Risky behaviour in response to guilt about past sins and/or a sense that God is punishing them and that they must atone for their sins**
- **May hold delusional and unhelpful beliefs which relate to religion and spirituality**
- **May see visions or hear voices which are clearly delusional**
- **May be on a mission to convert others (including other patients and mental health professionals)**
- **Beliefs related to reincarnation interfere unhelpfully with the present lifetime (e.g. believing I behaved very badly in past lifetime/s and am therefore eternally damned)**
- **Identity issues - someone believes that they are from a different ethnic group and have a different Faith (e.g. white Caucasian person believes that they are a Chinese Buddhist or Asian Moslem).**

Negotiating the interface between spiritual/religious/cultural beliefs and mental health care is not necessarily an easy or straightforward process. Misunderstandings and grey areas can occur. Further support and guidance from the Trust's Diversity and Inclusion Team and the Department of Spiritual and Pastoral Care can be helpful in such cases.

Appropriate training from the Diversity and Inclusion Team and supervision and guidance from the Department of Spiritual and Pastoral Care can assist staff to understand and manage issues sensitively, appropriately and from an informed perspective, leading to the best possible clinical care in the circumstances.

Interpreting and Translation Services

Leeds and York Partnership NHS Foundation Trust (LYPFT) is committed to equal access and is signed up to a city-wide NHS strategy to meet the language needs of people using our services. The Interpreting and Translation service is commissioned from a defined list of providers to ensure that we can:

- **Provide written information in other languages quickly**
- **Access telephone interpretation services**
- **Access independent face to face language and British Sign Language interpreters**

Under no circumstances should relatives, friends or unqualified staff be asked to carry out clinical interactions with service users.

There is Trustwide guidance and instruction on using the interpreting and translation service which can be found on the corporate intranet.

Further information and guidance can be obtained from the Diversity & Inclusion Team at: diversity.lypft@nhs.net or call 0113 295 4413 to speak to a member of the Diversity Team.

Identifying Cultural Norms and Traditions

Religion, spirituality and cultural context are addressed explicitly within the Care Programme Approach using spiritual assessment. Contact with chaplaincy services or with appropriate religious or community support should be offered as part of this. The following, albeit not exhaustive, provide further consideration of the traditions and norms surrounding some cultures:

Naming systems

Ways of naming individuals and families vary around the world. There are some simple rules to help in record keeping and use:

- **Do not presume that someone's name follows a European pattern of First name-Family Name, where the family name is inherited from the father's side. For example: sometimes family names come first, some apparent 'names' are in fact titles or indicate gender and some cultures do not use 'family names' at all.**
- **Do not 'alter' someone's name or give a nickname to get round pronunciation difficulties unless they specifically ask you to do this.**
- **If someone does offer an alternative name, check that they are genuinely happy with this and that all names (and nicknames) are still recorded.**
- **In some cultures, formality is valued and familiar names are not used lightly.**
- **Some names have great personal or cultural significance or value.**
- **Note that some people have adapted their name to match European models, but this may not be how relatives know them.**
- **Some women may use their maiden name but pass their husband's name on to their children.**

Dietary needs

The most common food to meet the religious and cultural needs of most people are vegetarian diets, Halal (see Islam) and Kosher (see Judaism). Our catering supplier has identified relevant sources and is able to accommodate most requests for food to meet religious or cultural needs.

Some service users will not be familiar with some ingredients or names for dishes such as 'hot pot', 'casserole', 'stew', and we need to be aware of this. Some people fast (abstain from some or all food and/or drink) for cultural or religious reasons at certain times. Arrangements for food should be made outside the fasting period. However, some faiths exempt followers from fasting under certain conditions, e.g. when ill.

Hygiene

Water and washing can have a significant symbolic role in some countries and cultures and this needs consideration in some circumstances. For example, some people may need to wash before praying, or in a certain way, whilst others may not wish to wash during certain symbolic periods. Some will want to wash their body after using the toilet, and this needs making possible without embarrassment.

Dress, modesty & privacy

Cultural dress codes can vary widely, and these will need consideration in some contexts. Some cultures have strong 'modesty codes', which will make certain types of physical contact inappropriate, and will make the presence or assistance of staff of the opposite sex unwelcome in private areas, when dressing or during medical examinations. We need to ensure that we do not ignore these issues simply because of the practical staffing difficulties they might cause.

Festivals and religious observations

There is a very diverse range of religious or culturally significant dates and festivals marked around the world. Some faiths have Friday, some Saturday, others Sunday as a 'Holy day', others have none. Some people will not attach much significance to festivals or holy days, whilst for others, these may be central to their life pattern. Some annual dates vary from year to year. Faith rooms within the Trust will display a festival calendar highlighting key anniversaries. For further information, please contact the Diversity Team on diversity.lypft@nhs.net

Holy books, texts and religious artefacts

There are a range of religious texts and objects which play different roles in peoples lives. Chaplaincy services will normally be able to access some texts and objects, especially Christian and Muslim. Such religious texts and objects need treating with great respect, such as the Bible and text of the Qur'an. The Sikh holy book should not be handled prior to washing hands and also ensuring that the head remains covered by both males and females.

Death, dying & bereavement

The death of a service user, a relative or friend is always a significant event. Apart from the emotional and psychological impact, there can be a range of cultural and religious issues to be addressed. Some are immediate, such as who can touch a body, if certain rituals need performing and so on. Detailed advice is not included in this handbook: it is expected that a Chaplain will be contacted for advice and support as soon as a death occurs within the Trust. They can also offer advice on bereavement issues for staff and patients, whether the person belongs to a faith community or not.

Local faith and community contacts

The Trust has a number of faith and community volunteers who can provide support to staff, service users and carers. These can be contacted via the Trust's Chaplaincy Co-ordinator and the Diversity Team.

Faith volunteers and chaplains are unlike someone's own minister or visitor, as they are usually not known to the individual. We need to be aware of this in adequately supervising contact and avoid making assumptions, contact or disclosures without explicit permission (properly documented). However, it should be noted that due to community and religious structures, some faith volunteers may be known to the individual and this may prove distressing. Therefore it is essential to enquire into circumstances and gain the individual's consent prior to making arrangements.

The Department of Spiritual & Pastoral Care is able to support and advise further.



World Faiths



The Bahá'í Faith

Founded in 1844, the faith is the youngest of the world's religions. It is based on the claim of Bahá'u'lláh to be the Messenger anticipated in all of the scriptural traditions of humanity's past. Bahá'ís believe that the entire human race is being drawn into the recognition of its own oneness and of the earth as a common homeland.

Belief: Belief in the oneness of God, mankind and religion. World faiths are respected and Messengers such as Abraham, Krishna, Buddha and Jesus Christ are all revered. Belief that science and religion should work together for the ultimate progress of mankind. Service to others is emphasised as well the elimination of all forms of prejudice and inequalities.

Leadership: The Bahá'í Faith has no clergy. Organisation and leadership of the community is carried out via group consultative process. Believers are elected via secret ballot to represent the community at local, national and international levels.

Religious Practice: Recitation of a daily obligatory prayer is a spiritual law; Bahá'ís choose one of three obligatory prayers, which is performed by the individual in private and at the time and place of their choosing. Hands and face are washed prior to performing obligatory prayers. Bahá'ís fast every year from 2nd – 20th March, with the Bahá'í New Year (Naw-Ruz) falling on 21st March (the first day of spring). Bahá'ís gather every 19 days for a 19 day feast which encompasses three parts: spiritual, administrative and social.

Diet: There are no dietary restrictions in the Bahá'í Faith, although a vegetarian diet is recommended. Many Bahá'ís do eat meat. Alcohol and addictive drugs are forbidden, unless prescribed by a competent physician. Smoking is discouraged but not forbidden.

Death: Bahá'ís believe in life after death in the spiritual world, where individuals will be freed from many of the constraints and difficulties experienced on earth. Belief in the possibility of spiritual progress made after death and that prayer can assist people with this development in the next world.

Last Offices: Under Bahá'í law the body is not to be embalmed or cremated and burial should take place no more than one hour's travel time away from the place of death. Preparation of the body for burial involves careful washing and placing in a shroud of white cloth, preferably silk, or cotton. There is no set time for burial from the time of death.

Autopsy: There is no law against leaving one's body for scientific research,

Transplant: transplant or autopsy. The only condition stipulated is that burial and not cremation should be the final manner of disposal.

Funeral: The Bahá'í funeral service is simple and flexible. The only obligatory prayer is the Congregational Prayer for the Dead which one believer recites while all who are present stand.

Sacred Book: The Bahá'í writings include the authentic writings of the three Central Figures of the Faith, The Báb, Bahá'u'lláh and 'Abdu'l-Bahá (the son of Bahá'u'lláh).

Contact: Via the Department of Spiritual & Pastoral Care

For further information please see: www.bahai.org and www.bahai.org.uk

bahá'í and mental health

Bahá'ís believe that each member of the human race is born into the world as a trust of the whole. Since we form one indivisible whole, we are all interconnected and somehow interdependent. The concepts of unity in diversity and the abandonment of prejudice, imply that people with experience of mental health issues should be treated with the utmost dignity, respect and care, while at the same time being encouraged to develop themselves and their skills and abilities and contribute to society in whatever ways they can.

In the Bahá'í faith it is made clear that when one is not well, either physically or mentally, one should seek the best available professional advice. The counsel of wise, experienced and competent professionals is encouraged. However, it is also suggested that the science of the mind, of normality and of the disabilities from which it may suffer, is in its relative infancy, although much may be possible to aid people to minimise their suffering and make possible an active life. The last thirty years in the therapy of mental health problems have seen important advances from which one may well benefit. Bahá'ís believe that as the world becomes more spiritually minded and scientists develop an understanding of the true nature of man, then more humane and permanent cures will be found.

It is acknowledged that it can be very hard to be subject to any health problems, particularly mental health issues. However, from a spiritual perspective, it is believed that the soul remains independent of all infirmities of body or mind: "you must always remember, no matter how much you or others may be afflicted... that your spirit is healthy, near to our Beloved, and will in the next world enjoy a happy and normal state of soul." Bahá'u'lláh has explained:

"Know thou that the soul of man is exalted above, and is independent of all infirmities of body or mind. That a sick person showeth signs of weakness is due to the hindrances that interpose themselves between his soul and his body, for the soul itself remaineth unaffected by any bodily ailments. Consider the light of the lamp. Though an external object may interfere with its radiance, the light itself continueth to shine with undiminished power. In like manner, every malady afflicting the body of man is an impediment that preventeth the soul from manifesting its inherent might and power. When it leaveth the body, however, it will evince such ascendancy, and reveal such influence as no force on earth can equal. Every pure, every refined and sanctified soul will be endowed with tremendous power, and shall rejoice with exceeding gladness."

Bahá'ís are enjoined not to adopt a defeatist attitude towards their difficulties, but to strive to overcome them as best they can. Service to others and useful work are encouraged, wherever possible. The highest

station we can achieve in this world is regarded to be that of service and when occupied with work “one is less likely to dwell on the unpleasant aspects of life.” Emphasis is placed on striving to continue to develop ourselves spiritually and morally because “human happiness is founded upon spiritual behaviour”.

A Bahá'í Prayer for Healing

Thy name is my healing, O my God, and remembrance of Thee is my remedy.

Nearness to Thee is my hope and love for Thee is my companion.

Thy mercy to me is my healing and my succour in both this world and the world to come.

Thou, verily, art the All-Bountiful, the All-Knowing, the All-Wise.

Baha'u'llah

Prayer for Assistance

Lord! Pitiful are we, grant us Thy favor; poor, bestow upon us a share from the ocean of Thy wealth; needy, do Thou satisfy us; abased, give us Thy glory. The fowls of the air and the beasts of the field receive their meat each day from Thee, and all beings partake of Thy care and loving-kindness.

Deprive not this feeble one of Thy wondrous grace and vouchsave by Thy might unto this helpless soul Thy bounty.

Give us our daily bread and grant Thine increase in the necessities of life, that we may be dependent on none other but Thee, may commune wholly with Thee, may walk in Thy ways and declare Thy mysteries. Thou are the Almighty and the Loving and the Provider of all mankind.

'Abdu'l-Bahá



Buddhism

Buddhism was brought to the western world from India and Nepal, literally translated it means The Teachings of Buddha - Buddha meaning the enlightened one. The teachings are a collection of natural truths discovered, not invented by the Buddha. It can be described both as a philosophy and a religion. Buddhists would not acknowledge God as Creator because it cannot be known.

Belief: Buddha is revered not as God but as an example of a way of life. No God or Gods, it is a way of enlightenment. Reincarnation for good or evil comes as a consequence of actions. Dharma - a way to Nirvana (which is enlightenment), is the goal of life.

Holy Days & Festivals: There can be a wide range of important days, varying across traditions. It is not always easy to accurately know these without contacting communities directly.

Leadership: Local community leaders, family usually know who to contact.

Diet: Many are vegetarians, although this should not be assumed. Alcohol and non-medicinal drugs are rejected by the Fifth Precept, although not everyone will observe this.

Washing: Varying customs according to background, it might be helpful to ask the client.

Death: May be distressed by drugs which reduce consciousness because the state of the mind at death is of great importance, they may want to use the 'Mantra' (prayer).

The state of mind is the most important consideration, this influences the character of the rebirth; peace is aimed at. Buddhists would like to have very detailed information about their death to enable them to prepare for it. If at all possible, open honest and frank discussions should take place, giving as close a prognosis as possible to the time of death and symptoms that may be experienced. Buddhists believe that dying is a positive transition which should be experienced in a clear state of mind, reduction in some forms of medication, may be required.

A monk or priest of the appropriate school of Buddhism should be informed of death as soon as possible, ideally the body should not be moved before the priest arrives. The priest may recite the necessary prayers which could take an hour or so, depending on the school. The prayers do not always have to be said in the presence of the dead person - they could be recited at a distance, in a nearby temple for example, the family should always be consulted.

Last Offices: Usual procedures, following contact with family.

Autopsy/Transplants: There are no religious objections to post mortems.

Funeral: Cremation is usual, followed by the burial of the ashes. The time between death and the funeral is between 3 and 7 days.

Sacred Books: Sandharma. Pundarra. Sutra and others.

Special Notes: The Noble Eightfold Path - Right knowledge, right attitude, right speech, right action, right living, right effort, right mindfulness, right composure.

Five Restraints - From taking life, from stealing, from unchastity, from wrong use of speech, from drugs and intoxicants.

Special Festival: Wessek, a celebration of the Enlightenment of Buddha, full moon of May, fasting is practised at this time and on other festival days, new moon and full moon days.

Notes for Trust Services:

- **Opportunities for peaceful meditation are appreciated.**
- **Buddha images, rosaries and meditation stools might be used. Care and respect is needed when handling such objects.**
- **Buddhism can be practised privately or in a group. Groups require a quiet and clean room, and shoes should not be worn. An individual may use a personal shrine, recite devotional texts, meditate and may prostrate themselves.**
- **Incense has long played a part in Buddhist meditation. This should be enabled as a religious practice when possible.**

- **Some Buddhists take monastic vows, which can involve wearing distinctive clothing and following further precepts.**
- **The idea of overcoming ‘suffering’ and ‘unwholesome mental states’ is a key feature of Buddhism, but how this relates to mental health issues for an individual will vary.**

Contact: The Department of Spiritual & Pastoral Care.

Buddhism and Mental health

The Buddha realized that just as one can suffer from physical disease, one could also suffer from an unhealthy mindset. To cure both diseases of the body and mind, the Buddha devoted his entire life to passing down the knowledge of the Tripitaka¹. While the Buddha sought to cure both physical and mental illness, emphasis was placed upon the mind. He used the knowledge of the Dharma to heal the illness that arose from the three poisons: greed, anger, and ignorance. The Buddha’s medicine treats disease starting from the patients’ minds, curing them of the three poisons. Psychologists also treat illness by working with their patient’s mental state, but this is quite different from the Buddhist practice of treating the mind. According to Buddhism, the pure and wondrous Dharma is the perfect medication for an ailing mind, as well as a sick body.

Keeping both the mind and body healthy is important, for the body is the vehicle in which we can practice the Dharma. Like all things, the mind and the body are interdependent; the health of the mind influences the health of the body, and vice versa – the health of the body influences the health of the mind. With a healthy body as a tool, we can cultivate a compassionate heart and a clear mind. With a cultivated mind, we are able to examine ourselves, clearly see the nature of our problems, and then work to resolve them. We will then be approaching the path to true health.

Source: <http://www.blia.org/english/publications/booklet/pages/37.htm>



Chinese Community

The family is very important and it is the duty of each family member to contribute towards maintaining the stability and well being of it.

Family roles are well defined:

The father is expected to be the breadwinner

The mother is in charge of the home

However, both parents act as disciplinarians and decision-makers. If the family run a business each is expected to contribute towards establishing and running the business on equal terms. Sons are important in continuing the family line and are a sign both of prosperity and luck to the family.

Religions

Traditionally, three major forms of religion are practised by people of Chinese origin in Britain:

- **Confucianism**
- **Taoism**
- **Buddhism**

Confucianism

In China this is also known as Juchiaco, the sect of the Jus, a code of moral conduct. Two fundamental principles are:

- **Ancestor worship**
- **Belief that present day life is enhanced by maintaining morals and cultures of history**

Confucian theology states that:

- **'Fate' controls worldly events**
- **'Divine will' regulates the order of nature**

Taoism

The Taoist school seeks to remove mystery from old traditions, which the Taoist church aims to preserve as magical and mythology.

Main moral code based on:

5 prohibitions – killing of living creatures

- **alcohol**
- **hypocrisy**
- **stealing**
- **loose living**

10 instructions – be obedient to parents

- **be obedient to ones master**
- **display kindness to every creature**
- **bear evil that is received**
- **settle arguments and not harbour hatred**
- **help the poor by ones own sacrifice**
- **free captured animals**
- **plant trees and construct bridges**
- **be useful to your companions**
- **recite the Taoist book and burn incense to their glory**

Buddhism

[See separate heading and section on Buddhism]

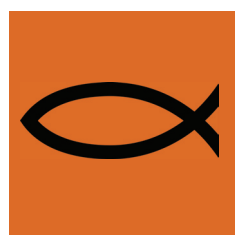
Chinese Festivals

Throughout the year the Chinese family may keep a picture of Tso Kuan (the kitchen god) in their home. On the evening of New Year's Day a feast is laid out before the god to make him happy on his journey.

His picture is then burnt to symbolically return Tso Kuan to heaven to give account of the family since the previous year.

New Year's Day - big public celebration, children are given red 'lucky bags' containing money, and members of the community perform dragon dances in the streets.

New Moon Day - August/September, celebrated by the eating of special moon cakes.



Christianity - General

It is sometimes presumed that all staff know enough about Christianity to offer good care, but patterns of belief are complex. We have almost every tradition reflected within the Leeds & York population.

Beliefs

Christians are followers of Jesus Christ, believing he is the Son of God and reveals God to us. He was crucified, died and then 'resurrected' (came back to life), after which he gave the power of the 'holy spirit' to his believers. God the Father, Son and Holy Spirit are often referred to as the Trinity.

The three most common traditions are the Church of England (or Anglican), Free Church tradition (including Protestant, Methodist, Baptist and many other names) and Roman Catholic, but the range is much wider. The Orthodox and Coptic Churches are among the world's oldest established traditions, and many newer independent congregations are also found in the locality. Within each tradition or 'denomination' there are a wide range of beliefs and practices. Sometimes there is a greater affinity between individuals from different traditions than within the same. A Chaplain will be familiar with all the major traditions and most variations within them.

Notes for Trust Services

Some issues are particular to a tradition, but some issues arise across most denominations:

- **A 'healing ministry' will exist, although this can range from believing that God can physically and mentally 'heal' by direct intervention to understanding 'healing' as 'becoming whole', often possible through being reconciled to illness.**
- **'Deliverance ministry' is also a feature of most traditions, each in different ways addressing deliverance from evil and its influence on individuals.**
- **Delusional belief formations often embrace Christian themes. The reverse is also true i.e. Christians (and practitioners of other world faiths) may embrace 'delusions' when mentally ill, for example strongly committed Christians may exhibit delusions about their faith which make it very difficult for staff to distinguish between a real 'faith-need' and expressed need which is associated with delusional thinking.**
- **Homosexual orientation is not to be condemned, but is seen as wrong in most traditions, although most also have movements within them who contest this view. Some traditions**

hold that homosexuality is subject to 'cure' or treatment, others see it as natural but not open to physical expression.

- **Suicide has traditionally been seen as wrong because human life is precious, but most teaching now shows a sensitive understanding of the complex issues.**

Food, Drink & Drugs

- **Few rules on food are followed today, although some traditions encourage occasional fasting. It is normal for some not to eat just before receiving Holy Communion.**
- **A few traditions encourage abstinence from alcohol; all encourage moderation.**
- **A few, especially among evangelical and charismatic groups, discourage smoking because 'the body is the temple of the Holy Spirit'. This also includes the use of 'recreational' drugs.**

Holy Books

The Bible is made up of Old and New Testament. Small blue New Testaments are provided free in most hospital settings by the Gideons, (access via chaplaincy or phone book) and valued at times of stress and anxiety. Different traditions use the Bible in different ways, some seeking to follow it literally, others seeing it as a guide.

Holy Days & Festivals

Most seek to observe Sunday as a Holy Day by attending a Church service when possible. Some will want to receive 'Communion' (Bread and Wine). Although this can be received on any day, for some it is important to receive it on certain days. Christmas (Birth of Jesus) and Easter (death & resurrection) are the main festivals, although there are several other.

Christianity: The Main Branches

1. ANGLICAN CHURCH (CHURCH OF ENGLAND)

Anglican - including branches in Wales, Scotland and Ireland and most countries of the world.

Belief: Trinity: God the Father, God the Son, God the Holy Spirit. The Divinity of Jesus Christ: God came to earth as man, was crucified, and rose from the dead, ascended into heaven.

Leadership: Various titles - Vicar, Curate, Reverend, but usually all are ordained priests, men and women, also use of lay ministry e.g. licensed lay readers and deacons.

Religious Practice: Baptism, Holy Communion, Confirmation, Marriage, Ordination, Reconciliation and Anointing.

Diet: Some may not wish to eat meat on Fridays. Some may not wish to eat until after Holy Communion.

Death: Emergency Baptism may be requested for the dying. The person or family of the dying may request anointing with holy oil. May want prayers of Thanksgiving for the life of the deceased and commending of the person to God's keeping, consult with the family.

Last Offices: Usual procedure.

Autopsy/Transplant: No religious objection.

Funeral: May be burial or cremation.

Sacred Book: Holy Bible - Old and New Testaments.

Special Notes: Baptism is an outward sign of Christ's love; there is no age limit. It may be administered in emergency by a lay person (e.g. nurse). A little water is poured on the forehead while the words are used "(Christian names) I baptise you in the name of the Father, the Son and the Holy Spirit, Amen".

Notes for Trust Services:

- **The Anglican tradition embraces a wide range of practices. Some Anglicans share almost every belief and practice of the Roman Catholic Church, whilst others are like Free Churches.**
- **A few individuals and congregations do not recognize the ordination of women as priests, and so would have problem with an ordained female chaplain.**
- **Many Anglicans find receiving regular Holy Communion valuable, especially at difficult times, and this can be brought to residential settings.**
- **When ill or seeking healing for any reason, anointing with oil may also be requested.**

Contact: We have a Church of England Chaplain in the Trust; refer via the Department of Spiritual and Pastoral Care.

2. ROMAN CATHOLIC CHURCH

Belief: In the Trinity, The Divinity of Christ and the Sacraments. Also accept the Supreme Jurisdiction of the Pope (Bishop of Rome). Also extol the intercessional qualities of Mary, the Mother of Jesus and the Saints.

Leaders: Priests - usually addressed as 'Father'.

Religious Practice: Baptism, Holy Communion (Mass), Marriage, Ordination, Anointing with oil (Unction), Confirmation, Reconciliation.

Diet: May not wish to eat meat on Fridays. May not wish to eat before Mass.

Death: Holy Communion, the sacrament of the sick, and anointing will be offered to the dying person by a Roman Catholic priest. Most Roman Catholics will want the priest to be called to a dying person or to someone who has just died. The Last Rites can be administered up to two hours after death.

Last Offices: Extreme Unction or Last Rites may be administered up to two hours after death. The patient or family would normally ask for a priest or chaplain to be called. Consult with the family.

Autopsy/Transplant: No religious objection.

Funeral: Usually burial. Requiem Mass may be held later.

Sacred Book: Holy Bible.

Notes for Trust Services:

Several features of Roman Catholic practice involve regular action by staff in community or inpatient settings.

- **Attending a service or 'Mass' to receive 'the sacrament' is important and should be made possible whenever it can be. When this is not possible, the sacrament may still be requested and brought to the person.**
- **Some individuals have the practice of attending Mass daily.**
- **A request to 'make confession' may be made, which requires a priest to visit.**
- **When ill or seeking healing, anointing with oil (Sacrament of the Sick) may be requested, which is carried out by a priest.**
- **In the event of critical illness or death, it is important to inform a priest so they can bring the sacrament of the sick often known as the 'last rites'.**

Contact: We have a Roman Catholic chaplain within the Trust. Refer via the Department of Spiritual and Pastoral Care.

3. FREE CHURCHES

Including Methodist, United Reformed, Baptist etc.

Belief: All believe the same basic creed that Jesus is both human and divine. Belief in the Trinity.

Leadership: Usually called Ministers - Reverend.

Diet: No restrictions.

Death: Prayers may be said and appropriate passages of the Bible read either by a minister or relative or friend of the dying person. If possible a minister from the person's own church should be called, but ministry from any Free Church minister could be arranged in an emergency.

Last Offices: Usual procedures, consult with the family.

Autopsy/ Transplants: No objections.

Funeral: May be burial or cremation.

Sacred Book: Holy Bible.

Special Notes: Often called 'non-conformist' or 'Protestant' as they stress the authority of the Bible rather than tradition.

Methodists: Founded by the Wesley's. Strong hymn-singing tradition.

Evangelical: can mean a wide range of things. It often implies a lively model of worship, and may imply particular 'moral principles' drawn from Scripture, such as the rejection of homosexual practice, abortion, sex outside marriage etc. The Bible may be seen literally as 'the word of God' and plays a central role in church and private life.

U.R.C.: United Reformed Church, formally Congregational and Presbyterian.

Church of Scotland: Presbyterian.

Baptists: They reject infant baptism, this is reserved for adults on confession of their faith and is by total immersion.

Pentecostals: They focus on the work of the Holy Spirit, praying and speaking in tongues, prophecy and healing.

Salvation Army: The Salvation Army is at work in 111 countries worldwide. Having started in the back streets of London, its aim is to meet the people where they are. They run hostels, eventide homes, soup kitchens, drug rehabilitation programmes, missing persons and family centres. Anyone can attend any Salvation Army meeting, but if people decide to make a commitment and wear Salvation Army uniforms they must also adhere to the rules of the movement, which is no alcohol, smoking or gambling.

All Salvation Army Officers are commissioned (ordained) after a residential two years course plus three further years post learning studies. Ranks within the Salvation Army are: Captain, Major, Colonels and Commissioners and of course the General. Holy Communion is not celebrated within its ranks, but Salvationists worship the Triune God and accept the Trinity, they also believe in the Diversity Principle, respecting other people's faith and position.

The Salvation Army is known as the army with its sleeves rolled up. Their motto is 'Hand to Man, Heart to God.

Quakers: They have no ordained ministry. Mainly silent worship and inner guidance. Rejection of the sacraments. Emphasis is on social action. There is no set creed (official set of beliefs), but a shared attitude towards life and openness to direct communication with God. Meetings do not involve singing or set prayers, but waiting on God in silence and sharing occasional thoughts or prayers.

Brethren: The Brethren tradition (mid 17th Century) emerged from a desire to rediscover the church of the New Testament. It is now broad, ranging from lively churches very similar to independent free churches to extremely exclusive groups, closed to outsiders and living by very strict codes. This may involve only eating alongside fellow brethren, so service users may wish to eat behind closed doors. Some groups have different dress codes, with women not cutting their hair and keeping it covered in public. Some will have had little contact with radio or T.V. There may be disapproval of post-mortems and heart transplants which 'interfere with the body'. More modern Brethren Churches would normally reject such views and practices as misguided, simply seeking to live a biblically guided life. No hierarchy - a different ministry for every member.

Notes for Trust Services:

- Regular prayer which is often 'free' (unstructured) is more common and central in these traditions.
- Some will not seek Holy Communion as often as in Catholic or Anglican traditions, or will not see it as a weekly religious practice.
- For many, personal knowledge of the bible and regular study is important, and to have this available will be important.
- For some, regular contact with their own church, minister or 'home group' will be important. However, there may be instances where the beliefs of the religious community are at odds with or exclude the individual and/or the care team. If the community plays a central or powerful role in the life of the individual, great care is needed in sensitively supporting the individual.
- Prayer, with or without laying on of hands, is common practice when seeking healing. Note of caution: styles of prayer which are unknown may be wrongly viewed as symptoms of poor mental health. In some traditions prayer can be loud, long and very expressive.

Contact: Via the Department of Spiritual and Pastoral Care.

4. **ORTHODOX - Eastern/Greek & Russian**

The Eastern or Orthodox churches are mainly spread throughout the Middle East, Russia and Egypt (Coptic). They are part of the original Christian Church before it split with the Roman Church.

There are Orthodox congregations in most countries of the world including Britain.

Belief: Basic beliefs the same as other Christian churches. Tradition and ritual very important. Worship often follows long and complex rites and there are differences in some beliefs between Catholic and Protestant traditions.

Leadership: Bishops and Priests, usually called Father.

Religious Practice: As Roman Catholic.

Diet: Lent observance (the 6 weeks up to Easter) taken seriously. May wish to fast on certain days.

Death: May request anointing with oil, consult with the family.

Last Offices: Usual procedure.

Autopsy/Transplants: No objections.

Funeral: May be burial or cremation.

Sacred Book: Holy Bible.

Note: Most orthodox churches use the Julian Calendar. This means most festivals will be celebrated up to 13 days after churches using a western calendar.

Contact: The Department of Spiritual & Pastoral Care.

5. THE CHURCH OF JESUS CHRIST OF LATTER-DAY SAINTS / MORMON

The Church of Jesus Christ of Latter-day Saints. Sometimes referred to as the Mormons. Established by Joseph Smith in 1820 as the first Prophet of the restoration in the Latter Days. Now a worldwide Church with over 14 million members with the same teachings and organization as the Church established by Christ and led by a modern day Prophet.

Belief: Faith in God the Father, in Jesus Christ his Son and the Holy Ghost as three separate individuals, known as the Godhead. Belief that man is eternal, lived as a spirit before birth and continues to live after death.

Leadership: Members are organised into local congregations called wards or branches, led by a bishop or a branch president. Leaders are not paid and devote considerable time to serving their congregations.

Religious Practice: Holy day is Sunday. Easter and Christmas are celebrated. Fasting is normally practised on the first Sunday of each month (if medically appropriate) and at other occasions for particular needs.

Diet: Members consider the body to be a precious gift from God and follow a health code known as the 'Word of Wisdom' that emphasises the benefits of healthy eating. No foods are forbidden but members do not partake of tobacco, alcohol, tea, coffee or illegal drugs.

Death: No rituals are associated with death. Death is viewed as a temporary sadness because Mormons believe families can be together forever.

Clothing: Church members may have been to a temple to make sacred promises with God. As a constant reminder and outward expression of this commitment, sacred undergarments are worn. Many faiths include sacred religious clothing. The undergarments are worn at all times unless the person is engaged in an activity where this is impractical (such as bathing etc.). The garments should be kept from public display and treated with respect.

Last Offices: Usual procedures. Sacred garments, if worn, should generally be left in place. Ask family in advance about any special requirements.

Autopsy/Transplants: No religious objection to transfusions, transplants or post mortems.

Funeral: Burial preferred. Arrangements for funeral services and burial are usually made by the local leader in conjunction with the family of the bereaved.

Sacred Books: The Holy Bible, The Book of Mormon (Another Testament of Jesus Christ), The Doctrine and Covenants, The Pearl of Great Price.

Notes for Trust Services:

- **Observance of the Law of Tithing.**
- **There is a strong tradition of missionary service. Many young men and women (generally aged between 18 and 25) serve as unpaid missionaries from 18 months to two years.**
- **Polygamy not practised since 1890.**
- **Mormons do not baptise children under the age of eight.**
- **Individual members are happy to be called Mormons or 'Latter-day Saints', but prefer their church not to be called the "Mormon Church".**
- **Family unity has great importance for Church members.**
- **Run by a lay ministry, every member takes on watch care responsibilities. The Church assigns "Priesthood home teachers", who regularly visit Church members, particularly when hospitalised and female visiting teachers assigned to the family.**
- **Members may ask that "the sacrament" (similar to communion) be made available by their Priesthood home teachers, who might also be asked to 'administer' to them. This can include laying-on-of-hands after anointing with consecrated oil and/or a prayer for healing.**

Contact: The Department of Spiritual & Pastoral Care. Policy of visiting members in hospital, care and oversight is important and valued.

Christianity and Mental Health

Christians believe that the universe has been created by God who continues to hold it in existence. Therefore all is sacred. Each person is unique and sacred, made in the 'image of God'. This means that each person has the same rights to life, care, shelter, sustenance, education, employment, dignity and respect. People with mental health problems bring a challenge to the concept of spiritual well being, that opposes power, action and knowledge. Through value, acceptance and support many will work hard on their spiritual well being and try to develop their spiritual life. Different churches have different attitudes to a healing ministry, from a belief that God wants to remove symptoms; whilst others will talk of a journey towards wholeness - prayer leads to the surrender of self to the will of God.

Many mainstream Christian Churches will have a specialist to oversee care and attention in the field of deliverance; whilst there is much talk of spirits and demonic possession within certain branches of the church, most would seek to rule out any worldly explanations, before investigating the supernatural.

Central to Christianity is the belief that God's nature and purpose have been revealed in the life, death and resurrection of Jesus of Nazareth; the Christ. The Bible is the one foundation document of all Christian churches.

There are a variety of mainstream Christian churches, these are featured in the following pages. They each emphasise different points of doctrine and practice. They all hold in common a central belief that God is seen in the Trinity of God as Father, Son and Holy Spirit.

There are also a variety of independent churches, mainly of the Pentecostal or Charismatic nature, and also a number of sects such as Mormons, and the Jehovah's Witnesses, these are listed separately further on in this book.

Links to the various denominations of Christianity can be found via the Churches Together website which includes local faith organisations:

<http://www.churchestogether.org>



Humanism

Belief: Humanists live their lives without religion. They are of the opinion that human problems can only be solved by humans. Many, if not all humanists are atheists.

Leadership: None

Diet: Many humanists are vegetarians, but cannot generalise.

Death: No particular rites. Routine; consult with the family.

Last Offices: Usual procedures.

Autopsy/ Transplant: No objection.

Funeral: This is a main ceremony and seems to be increasing as more people (not necessarily positive atheists) ask for a non-religious funeral. The funeral centres around a full tribute to the life of the person who has died. The BHA produces booklets on all its main ceremonies. Leeds has its own group - see below.

Historical Documents: There are books about humanism and writings by well known humanists - these date back to about a hundred years but of course many previous people are regarded as humanists although that label is not one they would have used on themselves - e.g. Denis Diderot, David Hume, Thomas Paine, Charles Darwin, Thomas Hardy, Albert Einstein, George Orwell, Marie Curie, Charles Bradlaugh MP, and Richard Dawkins.

Notes for Trust Services:

- **Humanists believe in the individual's right to freedom of choice in the main decisions of life (and death) and this may have a bearing on some decisions.**
- **Do not assume that someone will or will not be comfortable with participating in any religious event or festival without asking.**

Contact: The Department of Spiritual & Pastoral Care.



Hinduism

Hinduism is one of the oldest of the world's religions extending at least as far back as the Third Millennium BCE. It developed from the religious practices of people who lived near the River Indus which is now in Pakistan. Hinduism continues to be, as it were influenced by the traditions and practices of people from other parts of the world. Languages: Bengali, Punjabi, Hindi, Gujarati.

Belief: 'More of a culture than a creed'. Belief that a number of gods and goddesses are manifestations of one God (Brahman). Incarnations of God include deities such as Shiva, Ganesha, Rama, Krishna, Durga, Sita. The sacred river is the Ganges which is a symbol of life without end. Believe in re-incarnation, transmigration with ultimate goal to reunite with Brahman. Central to all Hinduism is reincarnation and 'Karma'. Our free will involves making choices, all of which have consequences in the next life. Caste system.

Holy Days & Festivals: Divali and Holi are the most well known festivals. No day of the week is sacred, although Thursday is important for some.

Leadership: Priests where there is a local temple. Ask family.

Diet: No beef. Pork, ham, bacon not usually acceptable. May wish to fast and this includes eating only 'pure' foods such as fruit or yoghurt rather than total abstinence. Vegetarian Hindus cannot eat from a plate on which meat has been served, use disposable plates.

Washing: Free-flowing water where possible. A container of water needed for WC and bedpan.

Death: Wherever possible Hindus would prefer to die at home, they may wish to lie on the floor close to the earth. A priest may perform holy rituals involving tying a thread around the person's neck or wrist, sprinkling with holy water from the Ganges or placing a sacred leaf in the person's mouth. It is important to consult the family about how things should be done, the body should not be washed without consulting the family. The family may be particularly distressed by a death in hospital, older women may mourn by wailing and weeping to show grief. After death families may not want the body to be touched by non-Hindus. The body is usually washed by the family with water mixed with Ganges water. Traditionally the eldest son of the deceased should take a leading part in this, however young he may be. After death the body should not be left uncovered and jewellery and sacred threads should not be removed. The corpse is placed in the North-South magnetic field.

Last Offices: Do not remove threads during this procedure. Do not wash the body, this is part of the funeral rites, usually washed with water from the Ganges.

Autopsy/Transplants: Post mortems are often seen as disrespectful and should only be performed if legally required. If one is unavoidable Hindus will be anxious that all organs are returned to the body before cremation to safeguard peace in the afterlife. Hindus are cremated as soon as possible after death.

Sacred Books: Bhagavad Gita, Vedas Upanishads, 'The Song of the Lord'.

Names: Usually 3 for men, 2 for women. Use the family surname for records.

Notes for Trust Services:

- **In Hinduism, modesty is extremely important, therefore women may strongly desire to be cared for by female staff and where possible this should be accommodated.**
- **Hygiene rules are of great importance and hand-washing is normally considered essential before and after eating. Water for washing may be required in the same room as the WC itself, and bowls/jugs of water might be needed (if sink is located away from toilet).**
- **May prefer to wash in free flowing water such as a shower; baths are often considered unhygienic. If a shower is not available a jug may be wanted in a bath.**
- **Jewellery or clothing of all types can have religious or cultural significance. For example, a married woman's bangles are normally only removed on her husband's death. Some women wear a 'nuptial thread necklace'. Some men wear a "Sacred Thread" over the right shoulder and around the body. None of these items should be removed or cut without permission. If they have to be removed they must be returned as soon as possible.**
- **Married women and children may wear red marking on their forehead.**
- **Family planning – there is no Hindu objection to contraception.**
- **A pattern of regular worship at a Temple is not common, except at festival times.**
- **Some people will have a shrine in their home at which to pray.**
- **Some Hindus seek to pray twice a day, before sunrise and at sunset, and any such pattern needs respecting.**
- **Astrology plays a significant role, therefore there may be reluctance in response to undergoing surgery on specific days.**

Contact: Through family members or via the Department of Spiritual and Pastoral Care for more specific information.

Hinduism and Mental Health

All living things in this finite world are God's eternal fragmented parts. Due to this conditional life, they are struggling hard with six imperfect senses; including the mind. Each human soul holds a divine spark. The role of the mind is to provide the necessary control over the body. The mind is exercised regularly so that it might continue its important work.

The Hindu concept of mental health means achieving a correct balance in all aspects of life. Mental ill health therefore cares about when this balance is not achieved. Good deeds, good thoughts and a correct diet are deemed as being valuable in restoring this balance.

The Hindu philosophy is highly complex but basically rests on the principle of Brahman - The Only One God who is eternal, indefinable, uncreated, limitless and an all embracing Reality. Hindus recognise other 'gods and goddesses' as different symbols or aspects of Brahman - The Ultimate Reality. They worship a particular symbol of the One Real God depending on their needs.

A fundamental belief in Hinduism is divine incarnation which means that God is born on this earth time

and again whenever there is need for it. The incarnation of Rama, Krishna, Buddha and Nanak may be quoted as proof from the religious history of India. Hindus derive inspiration and spiritual strength from their actions and life styles.

According to Hinduism the main purpose of human life is to make a conscious realisation of the Eternal and Omnipresent God, through serving fellow human beings and His other creatures. Hindus believe that God is manifest in all creatures, hence they should be loved and cared for. If a person fails to realise God in this life, he will be born again and this process will continue until God is realised. The next incarnation is always dependent on how the previous life was lived. If one behaves badly in this life then his/his next incarnation is very likely to be more unpleasant than the current one.

When Hindus are ill, various religious observances including fasting may be practised. It is worth noting that for some fasting (vrat) may include not speaking as well as abstaining from food and drink.



Islam

Islam (Muslims - literal meaning 'one who submits to the will of Allah (God)').

Belief: Islam is an Arabic word, it literally means "Peace". A person who unconditionally and consciously surrenders her/his will to God is called a Muslim. The holy book of the Muslims is Al-Qu'ran, normally read in Arabic. This book explains the Way that God wants mankind to conduct itself. The teachings, sayings and actions of Prophet Mohammad elaborate on and interpret the Al-Qu'ran. They are treated with great reverence.

Islam teaches that God is absolute owner of everything and man is His trustee. This world is a place of test and trial for him. Following death each and every soul will be judged according to the amount of evil or good that has been performed. Each person will then be rewarded or punished according to his performance on this earth.

The "pillars" of Islam form the framework upon which the Muslim bases his belief and therefore his life. They are:

- 1. An unconditional belief in the One Divine Creator and Sustainer, in His Power and Presence as well as absolute belief that the Prophet Muhammad is the Messenger and Servant of God.**
- 2. The need to pray to God alone not less than three times, if not five times a day facing the direction of Mecca**
- 3. To fast during one whole month in each year - known as Ramadan.**
- 4. To be generous in helping the poor and needy in every possible manner including a ritual charity known as Zakaat from one's yearly savings.**
- 5. To accomplish the pilgrimage to Mecca as soon as one has the means and ability to do so.**

Holy days & Festivals: There are many Muslim festivals, calculated by the lunar calendar, most notable

is the month of Ramadan where self-discipline and fasting is practised in order to achieve tolerance, love, sacrifice and equality.

Leadership: Imam.

Diet: Halal is the lawful food. No pork, bacon, ham or pig products. No food fried in lard, no food with lard as an ingredient. Fish is allowed. Alcohol is prohibited in Islam. Ramadan is a month of fasting when no food or drink is taken during the hours of daylight. Essential drugs and medicines can be administered during Ramadan.

Birth: A male Muslim child is required to be circumcised as soon as possible.

Death: Relatives of the dying person or any Muslim or Imam should be called immediately to whisper in their ear the articles of faith so that these are the last words he or she should hear. They may wish to lie facing Mecca with the foot of the bed towards Mecca. The body should not be touched by non-Muslims after death.

It is important to consult the family if possible in advance of death about how they would like things done. If the body has to be handled after death then gloves should be worn. The body should be always covered and a light should be left on where the body is placed until it is time for burial.

Last Offices: The last offices should be carried out by Muslims of the same sex as the deceased.

Autopsy/Transplant: Post mortems are not normally allowed, the body is considered to belong to God. If a post mortem is legally necessary the family may be very distressed.

Funeral: The body must be buried within 24 hours, the grave must face Mecca so must the feet of the dead person.

Sacred Book: Koran (Qu'ran), The Divine Revelation for Almighty Allah to Mohammed.

Notes for Trust Services:

Mecca (Makkah) religious centre and a place of pilgrimage.

Five duties of Muslims:

- **Faith** - Declaration of faith Shahadah
- **Prayers** - The mandatory daily prayers. **NB** there is a special duty of performing ablution before prayers.
- **Fasting** - During Ramadan - one month abstaining from food and drink from just before dawn to sunset (9th month of the Islamic calendar).
- **Giving Alms** - Zakaat
- **Pilgrimage** - Pilgrimage to Mecca once in a lifetime. Confession of faith 'I bear witness that there is no God but God. I bear witness that Mohammed is the Apostle of God', these are the last words the dying should speak or hear.

- **Muslims are shocked by nakedness, due consideration should be given to this important factor. They may also be offended if touched by a member of the opposite sex.**
- **The Muslim Holy Day is Friday.**
- **The individual may wish the Imam (religious leader) to visit. It may be important to ask their tradition within Islam.**
- **Many Muslim married women continue to use their maiden name- however their children adopt their father's surname.**
- **Women may prefer to be treated by female medical or nursing staff and this should be accommodated whenever possible.**
- **A locket containing religious writing is sometimes worn around the neck in a small leather bag. These are kept for protection and strength and therefore should not be removed.**
- **Muslims do not approve of contraception. In practice, individuals vary widely in their approach.**
- **Abortion is not approved, but is often tolerated if it is for medical reasons.**
- **The invisible realm includes a race of beings called 'jinn', capable of both good and bad. When mental disturbance is suspected, it can sometimes be attributed to possession by jinn or evil influences. The individual may not then consider themselves to need medical attention but rather spiritual. This should not be immediately presumed to be a delusional belief- but advice sought.**
- **Islamic dress codes require Muslims to be modest at all times. The extent to which the traditions are observed will vary from family to family. Shoes are not worn indoors.**

Contact: The Department of Spiritual & Pastoral Care.

Islam and Mental Health

Islam emphasises the idea of balance and harmony within the self that is directed by the soul. The soul is in touch with Allah. Muslims believe that the self is not separated from the body. To maintain a healthy balance the Muslim attends certain practices, both prescribed and optional.

The balanced self is connected to the spiritual and is in control of the mind, aql, and the drives, nafs, and is thereby in a constant state of consciousness of God. Everything within the self is directed by this consciousness, the nafs are directed to good ends and the mind operates in a pure way. An imbalance within the self would mean that it is being driven by emotion or nafs and there would likely be a destructive outcome. Thus, if a person were suffering from some sort of mental illness, their nafs would be seen as being out of balance.

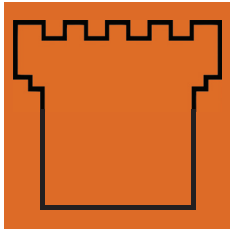
An imbalance may be treated at different levels. Firstly a devout Muslim would wish to re-establish the connection between the self and God, to clear away the clouds that have settled over the heart by strengthening the connection with the spiritual. This can be achieved by recitation of the Holy Qu'ran, optional fasting or by an act of devotion, such as Hajj, (pilgrimage to Makkah).

Secondly, a Muslim would take a more direct approach and focus on correcting the imbalances in the nafs, for example by diet, cognitive therapy, physical exercise, dream analysis, taking herbal medicines or modern medical drugs. Fasting is an important practice. The act of fasting quiets the nafs so that there is less noise from forces within the self and one is more likely to experience the 'taste of the spirit'.

Thirdly, a Muslim may visit a spiritual healer (hakim), who will focus on the inner self. Traditional herbal specialists deal with nafs, psychological states and senses.

If someone is suffering from a psychotic condition (e.g. schizophrenia, severe depression) it is likely that the Imam (religious leader) would be consulted to make a diagnosis. Psychoses can be regarded as primarily physical in cause even though they have effects on the nafs.

Nevertheless, mental illness does carry a great amount of social stigma and tends to be hidden within the family. Many Muslim families, particularly from the Indian sub-continent, feel for example, that public knowledge of such illness will hinder their children's prospects of marrying into reputable families. Many people with mental illness are therefore isolated and lonely, lose their respected position in the family and do not receive the care that they need. Their carers too, tend to be isolated and overstretched.



Jehovah's witnesses

Jehovah's Witnesses, Charles Taze Russell. 19th Century.

Belief: Believe that the world is near its end for all except their own followers who would be members of the Messianic Kingdom They are pacifists, salvation depends on service. Jehovah's Witnesses declare themselves Christian and try to live their lives according to the commands of God.

Holy Days & Festivals: Jehovah's Witnesses do not usually celebrate birthdays or Christmas. The only festival is the annual memorial of the death of Christ (the date varies but is around Easter time).

Diet: Dietary prohibition against blood and consumption of animals that have been strangled; some may prefer Halal or Kosher meals.

Death: A dying person may request a visit from an Elder of the Church. There are no special rituals or procedures before or after death but they will want reassurance that blood will not be used against their wishes. Burial and cremations are both permitted and there are no religious objections to post mortems.

Last Offices: Routine, consult with family.

Autopsy/Transplants: They are unlikely to be willing donors of major organs. They do not allow blood transfusions. This includes whole blood or its four main components (packed red cells, plasma, white cells and platelets). Jehovah's Witnesses can choose whether to accept other blood fractions or extracts such as albumin, immunoglobins or clotting factors.

Funeral: Cremation or burial.

Sacred Book: Bible.

Notes for Trust Services: Emphasis on morality and commitment to the cause. 'Active Service' rather than performing of rituals. Publish 'Watch Tower' magazine and 'Awake', emphasis on door to door evangelism. Festivals are not recognised, Birthdays and Christmas are not celebrated, patients may choose to opt out of ward festivities.

Elders, appointed by National organisation, to offer pastoral support to congregations. Meetings are taped, and tapes are available for people in hospital, as are copies of the Watch Tower.

- **Blood samples may be taken for pathological testing providing any unused blood is disposed of.**
- **Jehovah's Witnesses will accept medical treatment in all other respects apart from those involving the use of blood or blood components.**
- **When dealing with emergency care services we may need to inform staff of this belief (or even better shown the JW identifying card) if someone is not able to communicate this themselves.**

For visits for a patient or further information refer via the Department of Spiritual and Pastoral Care.



Judaism

Judaism is one of the three major monotheistic religions. The other two are Islam and Christianity. All three claims the Prophet Abraham as their ancestor identified as the first human who came to the realisation that the Creation of the Universe had an intelligent originator and who had a personal relationship with the Creator, God.

In Judaism the Bible is the "Tanach", which is composed of the Torah, the Prophets (Nevi'im) and the Writings (Ketuvim). In Christian parlance, this is the "Old Testament".

The Talmud is rabbinic commentary and is not deemed to be "revealed scripture" of the same order as the Tanach.

Belief: The essential belief is that there is one Spiritual God who cannot be represented in any shape or form. Wide-ranging beliefs surrounding waiting for the Messiah and life after death. Do not believe in Jesus as Messiah (Christ). Circumcision is practised. Emphasis is put on the importance of leading a good life here on earth.

Orthodox Jews: Are usually more traditional and strict in observance of religious/dietary laws.

Progressive Jews: (including Conservative/Liberal/Reform) – Generally make their religious observance fit into modern society in different ways.

Holy Days & Festivals: The Sabbath (Shabbat) begins at sunset on Friday and lasts until sunset on Saturday. On the Sabbath 'work' is prohibited for some, and this may include writing, travelling and even switching on/off lights or electrical appliances.

Passover (in March or April) is when special foods may be required by some. Day of Atonement or Yom Kippur (in September or October). This is a special day of fasting. Many will normally wish to keep that day to pray and be quiet. It is the holiest day of the Jewish Calendar and is considered to set the path for the year to follow.

Leadership: Rabbi. There are important differences between the Orthodox and the Liberal traditions.

Birth: Males are circumcised on the 8th day after birth.

Diet: Kosher food. Meat can be eaten only from animals with split hooves which are also ruminants (e.g. cows, sheep). In order to be kosher, the animal has to be slaughtered and butchered ritually in a way which removes as much blood as possible from the meat.

Routine domestic poultry is also acceptable, provided that the slaughter has been kosher and fish must have both fins and scales.

Meat and dairy is not mixed in the same meal although fish and dairy can. Nor can a meat meal be followed by a dairy dessert.

Death: Variation in requirements depending on Orthodox or Progressive preferences. Traditionally, when a Jewish person is dying it is not permitted to move or touch them in any manner as this may hasten death. However, most Jewish people today would accept appropriate palliative medical intervention.

Judaism does not have a special ceremony of 'last rites' but the dying person may wish to recite the 'Shema' and may appreciate being able to hold the page on which it is written. They may also wish to recite the 'vidui' (confession). Many will want to see a Rabbi. According to Jewish Law a dying person should never be left alone.

For both Orthodox and Progressive Jewish people, burial should take place as soon as possible, for example, within 24 hours of death or on arrival of relatives, this should only be delayed for the Sabbath. Cremation is not permitted in Jewish Law. As soon as death occurs the family should be notified and contact made with a Jewish undertaker.

Last Offices: Where possible, the body should not be touched by non-Jews if the individual is from a very traditional Jewish community. Always same sex as deceased to lay out body.

Autopsy/Transplants: Post mortem examinations are not permitted in Jewish Law except in cases of emergency or when the law of the land demands an autopsy. If the coroner is involved he should be informed that the dead person is Jewish and asked if the autopsy can be arranged for later that day or early next morning so that a death certificate can be issued for burial within 24 hours.

Funeral: Usually buried within 24 hours.

Sacred Books: The Torah (The Five Books of Moses - Genesis, Exodus, Leviticus, Numbers and Deuteronomy - Old Testament in the Christian Bible).

Notes for Trust Services:

Sabbath observances: sundown Friday until Saturday evening. No prayers for the deceased however, Kaddish - prayers of praise to God recited in their memory, usually recited by the son. Festivals which may affect a Jewish patient in hospital are Passover - March/April when unleavened bread is eaten; Day of Atonement - September/October, a day of fasting.

- **Orthodox Jewish women may prefer to dress modestly at all times with no bare arms. They may also prefer to keep their hair covered with a head scarf. Orthodox men keep their head covered with a hat or skull cap (Kappel).**
- **It is considered immodest for men to touch women other than their wives.**
- **Orthodox Jews may not feel comfortable taking non-Kosher medications and therefore may request rabbinic advice on this from an Orthodox rabbi.**
- **Some Orthodox Jews forbid contraception or family planning unless the woman's health is at risk.**
- **Nearly all Jewish boys are circumcised, usually eight days after birth. This is performed by a trained and medically certificated religious functionary called a "Mohel". If there is any doubt about the child's health the circumcision is delayed.**
- **Death may involve following certain practices, but these vary greatly on the tradition, and immediate advice from Chaplaincy, family, or faith community is important, (burial is desired within 24 hours). The Orthodox tradition in particular have a range of observations. For example, some Orthodox groups may wish to appoint someone to stay with the body from the time of death to the burial.**

Nursing implications:

- **Orthodox patients on some occasions may need to be offered alternatives to oral medication when possible, such as injections or suppositories.**

Contact: Jewish Welfare Board: The Department of Spiritual & Pastoral Care.

Judaism and Mental Health

The Jewish Sabbath commences at sunset on Friday and ends after sunset on a Saturday. It is a day of rest and Orthodox Jews will not do anything on that day. They don't travel, work, write anything or even switch on electrical appliances. The emphasis of family is important to them, and that concern should be shared in the family. Jewish Religion, Culture and Tradition are inextricably linked. After many centuries of dispersal from their land of origin, Israel, Jews have adopted many food habits, dress and models of behaviour from their host countries. The teachings of their religion do stress that to avoid deterioration in health, certain laxity may be allowed with regard to religious observances around diet etc.

There is a well organised carers support group, hospital visiting scheme, and the Leeds Jewish Welfare Board employ a specialist mental health social worker. The stigma of mental health is no different to western views.



Paganism

Pagans believe that nature is sacred and that the natural cycles of birth, growth and death observed in the world around us carry profoundly spiritual meanings. Human beings are seen as part of nature, along with other animals, trees, stones, plants and everything else that is of this earth. Most pagans believe in some form of reincarnation, viewing death as a transition within a continuing process of existence. There are several strands within what is sometimes called neo-Pagan tradition, including, Wicca, Druidry and Shamanism.

Beliefs: The Pagan Federation describes its Principles as:

1. Love for and Kinship with Nature. Reverence for the life force and its ever renewing cycles of life and death.
2. A positive morality, in which the individual is responsible for the discovery and development of their true nature in harmony with the outer world and community. This is often expressed as “Do what you will, as long as it harms none”.
3. Recognition of the Divine, which transcends gender, acknowledging both the female and male aspect of Deity.

Religious Practice: Most pagans worship the old pre-Christian gods and goddesses through seasonal festivals and other ceremonies. Observance of these festivals is very important and those in hospital will generally wish to celebrate them in some form. As there are many diverse traditions within paganism, you should ask individual patients if they have any special requirements. Some pagans may wish to have a small white candle or a small figure of a goddess within their environment.

Diet: Strong preference for foods derived from organic farming and free-range livestock rearing, while many are vegetarian or vegan. There are no organised fast days, but some pagans choose to fast in preparation for Ostara (spring equinox).

Death: Most pagans believe in some form of reincarnation, viewing death as a transition within a continuing process of existence. Pagans accept death as a natural part of life and will wish to know when they are dying so that they may consciously prepare for it.

Last Offices: Usual procedure.

Autopsy/Transplant: No religious objection.

Funeral: Burial or cremation.

Sacred Book: Most pagans do have a ‘Book of Shadows’, sometimes called Grimoire, in which rituals, rites, spells, words of inspiration, recipes, lists of materials, and any other pertinent information may be kept. As each pagan practices their path differently and can be a “living” belief system, a Book of Shadows is most often a work in progress.

Notes for Trust Services:

- Similar to other belief systems, service users with Pagan beliefs may potentially be unwilling to discuss these in case they are misunderstood.
- Some individuals believe that nature should take its course when terminally ill. There can be a fear that any such decision will be overruled by the Mental Health Act.
- There may be some discomfort among some Christian service users and staff about the nature of Pagan beliefs and terms used such as 'Goddess'.

Contact: The Department of Spiritual and Pastoral Care.



Rastafarian

Rastafarianism is a young, Africa-centred religion which developed in Jamaica in the 1930's and commemorates the coronation of Emperor Haile Selassie I as King of Ethiopia in 1930. They believe the ascension of Ras (Prince) Tafari as the Emperor of Ethiopia and that he is a divine being with direct lineage from the biblical King David and that Haile Selassie is God and that he will return to Africa members of the black community who are living in exile as the result of colonisation and the slave trade. Their greatest concern is the repatriation of blacks to Africa and the reinstatement of blacks in society.

A number of different sects would follow different principles, but the following may be applied in general.

Beliefs: Prefer 'Principles' rather than 'Beliefs'. Haile Selassie of Ethiopia seen as a personally-revealed Christ. Reggae music used in worship. Obedience to Jah's (Gods) pre-flood commandments to man. Recreation of Eden through righteous living. Ethiopia regarded as New Jerusalem and spiritual homeland, many different community groups. Religious practice includes the use of Marijuana to increase spiritual awareness. Followers are forbidden to cut their hair; instead they grow it and twist it into dreadlocks which represent the lion's mane which is the symbol of Rastafarianism.

Holy Days & Festivals: July 23 is the birthday of Emperor Haile Selassie - one of the holiest days. September 11 is Ethiopian New Year.

Diet: May choose not to eat meat, pork forbidden, fish with scales acceptable. Many will not eat grapes, currants and raisins. Preference for I-tal food, i.e. natural food that is chemical free, free from preservatives and not canned. Alcohol is forbidden, and coffee and salt are strongly discouraged.

Death: Body may be prepared for burial by family members. Attendance at funerals not emphasised (celebration of life rather than death).

Last Offices: Routine, consult with family.

Autopsy/Transplants: They do not allow blood transfusions and organ donation is unlikely.

Contraception: May be rejected.

Sacred Books: Bible with Apocrypha, Ethiopian history. Festivals centre on Emperor Selassie (23rd July) and Ethiopia New Year (11th September).

Notes for Trust Services:

- **Western medicine may be declined on the belief that this will contaminate the body. The role of medication within treatment may therefore be difficult. Preference may be for alternative therapies such as herbalism, homeopathy or acupuncture. However, those who seek the advice of western medicine practitioners are likely to accept some conventional treatment.**
- **The Role of Women in Rastafari: There is a separate code of conduct of religious practice for women (known as Queens) and whilst early Rastafarians probably followed rules strictly, women tend to have more freedom in modern Rastafarian society.**
- **For some, legal marriage is unnecessary and thus extended families may be complex.**
- **Inpatients and service users may feel a significant 'cultural gap' between themselves and staff or other service users.**

Contact: Via the Department of Spiritual and Pastoral Care



Sikhism

The word Sikh literally means 'discipline', 'disciple' and 'the follower of Sikh Gurus'.

Belief: Sikhism is a monotheistic religion with a belief in only one God. It emphasises social and sexual equality and stresses the importance of doing good deeds as compared to performing mere rituals.

The Sikh religion was founded in 15th century CE by Guru Nanak in Punjab that is now divided between India and Pakistan. The religion is based on the teachings of Guru Nanak and the other 9 Sikh Gurus who followed him. Sikhism is Britain's fourth most popular religion with about half a million followers. The number of Sikhs all over the world is estimated at 27 million.

Leaders: No priests, only community leaders.

Names: Male - Singh, Female - Kaur. Personal (family) names, e.g. Davinder Kaur Bhuller.

Diet: Sikhs are both vegetarian and non-vegetarian. Religiously killed and prepared meat is prohibited as is the consumption of beef in any form, some may not eat pork. No alcohol, no tobacco.

Washing: As with most patients of Asian background - free flowing water is preferred.

Death: Death may be regarded as a step in life and not necessarily an occasion for mourning. A devout Sikh may wish to recite hymns from the Guru Granth Sahib or hear members of the family do so.

Many Sikh families may wish to wash and lay out the body themselves. The five symbols of Sikhism* should not be removed, hair and beard should be left uncut and the turban should be left on. The body should be straightened with the Kaccha on and wrapped in a plain white sheet. Traditionally Sikhs will usually be cremated within 24 hours of death. However in the west, Sikhs follow the western traditions around arranging a funeral.

***The five symbols of brotherhood worn by most Sikh men are:**

Kesh: uncut hair and beard - men keep their hair under a turban.

Kanga: a small comb worn in the hair at all times.

Kara: steel bangle worn on the right wrist.

Kirpan: a short sword or dagger.

Kachha: special type of knee length underwear

Last Offices: Normal procedures. Hair and beard to be left uncut, do not remove religious symbols.

Autopsy/Transplants: Sikhs do not like the idea of a post mortem, but will accept it if it is legally unavoidable.

Funeral: Cremation

Sacred Books: Guru Granth Sahab, kept wrapped in cloth.

Temple: Gurdwara.

Special Notes: The five symbols of brotherhood (as above – Kesh, Kanga, Kara, Kirpan, Kachha) are also observed in daily life by both practising Sikh women and men. Some women may also choose to wear a keski (turban) as respect towards Kesh.

Devout Sikhs may wear a small ceremonial dagger known as the Kirpan. It is symbolic rather than functional, and worn as a reminder to Sikhs of their duty to fight injustice and maintain independence of spirit. It is usually around 8 inches long, blunt and sheathed worn attached to a cloth belt, called the gatra. This type of Kirpan presents no more risk than a dinner knife and its use in an act of violence is practically unknown. However, there may be rare occasions where an individual is wearing a potentially unsafe Kirpan, such as one with sharp edges, is pointed, or is much longer. Consideration also needs to be given to any potential risk should another patient or service user gain access to it.

Where an individual is admitted as an inpatient, staff should initially examine the Kirpan to determine the level of risk it poses. If there are any concerns, these should be discussed openly and sensitively with the individual and (if appropriate), their carers, explaining the concerns around safety. The wearing of the Kirpan by an individual must be considered as part of their clinical risk assessment.

The Sikh believes that a human being is a combination of body and soul. One not only has to remain under physical discipline, but has to follow certain moral laws as well. Thus a human being has to perform three fold duties; duties for oneself; duties in relation to society and duties in relation to the Creator. People who understand their duties in relation to self and society are virtuous people.

The major Sikh beliefs include to live honestly; treat everyone equally; be generous to the less fortunate people; work hard and serve others; to rise early and perform prayers; to abstain from tobacco, drugs and alcohol. 'Daswandh' is the voluntary offering of tithe, one tenth of the devotees income that is given for the corporate needs of the community in particular and society in general in the presence of Guru Granth Sahib - the holy scripture.

Contact: For more specific information contact: The Department of Spiritual & Pastoral Care.

Cultural & Community Awareness

Asylum Seekers and Refugees

Although 'asylum seekers' and 'refugees' are not a distinct cultural group, they may have a shared history arising from the situation in their home country, their experience in getting to the UK and experience of life in Leeds & York. It can be a considerable challenge to provide services to such individuals and families because of personal history, uncertain circumstances and language barriers.

People flee home countries for a number of reasons including:

- **Fear of persecution or repression because of their ethnic group, religion, sexuality, political belief**
- **Fear of death due to war (ethnic, civil, military) and or organised violence**
- **Abuses by the security forces or armed opposition groups (rape, beating)**
- **Unjust systems including detention without trial or unfair trials e.g. persecution because of family**
- **Torture and inhumane treatment**
- **Massacres or the threat of massacres**
- **Death penalty**
- **Conscription into the army**
- **Gender based human rights abuses, e.g. honour killings, forced marriages**
- **Forced into sexual slavery, trafficking**
- **Exploitation or abuse of power by someone who has authority or economic power.**

Individuals may experience multiple losses (family, friends, personal identity, language, networks, possessions) and significant mental distress accumulating as a result of this.

Notes for Trust Services: Principles to consider in assessment and engagement of individuals include:

- **Preparation and country knowledge**
- **Assessing needs can take several sessions – collaborative approach**
- **Take time to explain what your service offers and help them make sense of your role, what you can and can't do**
- **Take time for the language interpreter to introduce self and emphasis on confidentiality**
- **Refugees often bring multiple difficulties - often practical/social limitations**
- **Ascertaining the distress experienced and the individual's perception of his/her difficulties**
- **Cultural displacement and shock – new arrivals often feel a profound sense of shock and disorientation – exacerbated if fleeing was sudden and brutal**

- **Language Interpreters are integral to the therapeutic process and should speak in the first person and maintain good eye contact.**

Solace is a Leeds based charity which provides psychotherapy, complementary therapies and advocacy support to the survivors of persecution and exile living in the Yorkshire and Humber region, many of whom have been traumatised by torture, rape, the death or disappearance of loved ones and often combinations of all of these and other atrocities.

PAFRAS focuses on providing humanitarian support for asylum seekers who are homeless, without food or money and prevented from improving their situation by government policy. PAFRAS runs a twice-weekly drop-in at which we provide, a hot meal and casework support amongst other services.

The Deaf Community

The Deaf community is a recognised community, and language and cultural barriers can be significant in service provision. British Sign Language (BSL) is a recognized language and is available through the Trust's central interpreting and translation process. There are a wide range of issues faced by deaf service users.

Service related information

People who are Deaf are:

- **often misdiagnosed as having learning difficulties, having been assessed by people with whom they are unable to communicate effectively**
- **Recent studies looking at the mental health of Deaf people in the community have found that 38 per cent were experiencing some form of mental distress.**
- **Deaf people experience higher rates of problems such as depression or anxiety than hearing people.**
- **For some, the experiences associated with deafness, particularly communication difficulties, are so damaging that they reach adult life with many social and behavioural difficulties. These people may experience loss of confidence, low self esteem, embarrassment, they may become withdrawn, or dependent upon other people, resulting in limited lifestyles and restricted opportunities.**

CoHearent Vision (formerly known as the Leeds Centre for Deaf and Blind People) provides a number of support services for deaf sign language users, hard of hearing people who have lost their hearing later in life and deafblind people as well as, from a separate site, services for people who are blind and visually impaired.

SignHealth provides a number of services (advocacy, housing support, access to health, counselling and outreach) with the aim of improving healthcare and equal access for deaf people.

The 'Sensory Impairment Team' at City of York Council help vulnerable deaf adults who find it difficult to manage in a hearing world, or who are at risk in some way. For example, they support deaf people who receive support from mental health services. Support is also provided to service users and carers who have been unable to cope at home in caring for themselves or others.

The team links with York Children's Services Team and offers advice and support to deaf parents and staff

and the Children's Disability Team provides a social work service for deaf children and their families.

Gypsy and Travelling Communities

There are wide range of groups who have nomadic lifestyles or who live in moveable structures. Whilst such groups sharing common difficulties in accessing our services, they represent quite diverse cultures. According to the 2011 Census there are 687 families of Gypsy and Traveller heritage in Leeds and 269 in York.

A 2006 report by the Commission for Racial Equality (CRE) suggests that nationally there are around 300,000 Gypsies and Travellers (0.6% of the population) (CRE, 2006). The total number living in trailers is estimated to be between 90,000 and 120,000 with the remainder thought to live in conventional housing. It is not possible to determine how this population is distributed across the country although there are known concentrations of Travelling communities in many parts of the country, including parts of the North Yorkshire Sub-region.

In Leeds, there are 2 permanent traveller sites based at Cottingley Springs.

There are 3 permanent gypsy and traveller sites in York: Water Lane - Clifton, Outgang Lane – Osbaldwick and James Street – York with around 55 individual pitches.

The term Gypsies and Travellers or travelling people can refer to people from a number of different backgrounds, including:

- **'Gypsies' who may be of English, Welsh or Scottish descent, and who have Romany ancestry.**
- **'Irish Travellers' who are a nomadic Irish ethnic group with a separate identity, culture, language and history. There are many Irish Travellers resident in Britain for all or part of the year.**
- **'Scottish Travellers' who like Irish Travellers have musical traditions, language and other histories that date back at least to the twelfth century.**
- **The Roma people who have moved to Britain from Central and Eastern Europe (of which Britain's Romany Gypsies are members).**
- **People with a long family history of travelling because they work with fairgrounds and circuses (also known as 'Travelling Show people').**
- **So-called 'New Travellers'. Some of whom may be second or third generation Travellers and/or may have Gypsy ancestry.**

Gypsies and Travellers are acknowledged to be the most socially excluded group in society. Key issues for Travellers revolve around the impact of traditional hostility, the impact of increasingly strong attempts to limit a culture of mobility, and the direct impact of a nomadic lifestyle in today's society. Gypsies are protected in law as a cultural group, but travellers in general are not.

Notes for Trust Services:

- **Problems with accessing GP provision mean that contact is often via Emergency Departments rather than via a GP.**
- **Nomadic lifestyles of individuals and their families can be a dominant factor in any**

long term planning and engagement with services.

- **Often a strong dislike of being physically searched as a symbol of distrust.**
- **Some travelling communities have strong views on modesty and undressing in front of others.**

Continent and Country Profiles

Africa

Africa is the world's second-largest and second-most-populous continent. It covers approximately 20.4 percent of the Earth's total land area. It has 1 billion people which accounts for about 15% of the world's population.

Religion in Africa

Religion has always been central to people's lives in Africa. Although the majority of Africans are now Muslim or Christian, traditional, native religions have endured and still play a big role. This can sometimes mean that individuals hold both belief systems which can be complex when supporting an individual due to conflicting understandings around belief in one God in Christianity combined with ancestral worship and belief in other Gods. Religion runs like a thread through daily life, marked by prayers of gratitude in times of plenty and prayers of supplication in times of need. Religion confirms identity on the individual and the group.

There are a huge number of different religious practices on the continent. They share some common features: a belief in one God above a host of lesser gods or semi-divine figures; a belief in ancestral spirits; the idea of sacrifice, often involving the death of a living thing, to ensure divine protection and generosity; the need to undergo rites of passage to move from childhood to adulthood, from life to death.

http://www.bbc.co.uk/worldservice/africa/features/storyofafrica/index_section6.shtml

Africa has a variety of religious beliefs, and statistics on religious affiliation are difficult to verify. According to the World Book Encyclopaedia, Islam is the largest religion in Africa, followed by Christianity. According to Encyclopaedia Britannica, 45% of the population are Christians, 40% are Muslims and less than 15% follow traditional African religions. A small number of Africans are Hindu, Buddhist, Confucianist, Baha'i, or have beliefs from the Judaic tradition. There is also a small minority of Africans who are non-religious.

Languages of Africa

By most estimates, well over a thousand languages (UNESCO has estimated around two thousand) are spoken in Africa. Africa is the most multilingual continent in the world, and it is not rare for individuals to fluently speak not only multiple African languages, but one or more former colonial languages. These colonial languages are often official at the national level in Africa and used by Business and Government.

2011 UK Census figures for those of African ethnicity:

- **Leeds - 14,894 (2%)**
- **York (UA) - 903 (0.5%)**

Arab Cultures

There are approximately 22 countries in the world who speak Arabic as a main language. The vast majority of these countries are located in the Middle East Asia and North Africa.

The population of these countries combined is 300 million.

The religion of these countries include; Islam, Christianity, Baha'I and various other minority religions. There are also people who are non-religious.

2011 UK Census figures for those of Arab ethnicity:

- **Leeds – 3,791 (0.5%)**
- **York (UA) – 498 (0.3%)**

Bangladesh

Bangladesh is located in South Asia and has a population of 150.4 million (UN, 2011).

98% of people are Bengali and there are small numbers of tribes people.

Bangla is the language of the country. There are also some tribal languages. English is quite widely spoken by those with education and at business/governmental level.

Religion: Islam (89%), Hinduism (10%). Buddhists and Christians make up about 1% of the population

2011 UK Census figures for those of Bangladeshi ethnicity:

- **Leeds - 4,432 (0.6%)**
- **York (UA) - 37 (0.2%)**

Notes for Trust Services:

- **Traditionally, the right hand is used to eat, with the left used for personal hygiene.**
- **Public physical contact with the opposite sex is not traditionally welcome.**
- **'Looking down' and staying quiet unless spoken to, has traditionally been a mark of respect for an older person or someone of higher standing. Women may not wish to make eye contact with men outside of the home.**

Caribbean

The Caribbean covers a wide range of different islands, including Jamaica, Cuba, Haiti, Barbados, Trinidad and Guyana. There are some considerable cultural and even language differences between islands.

There are about half a million people of Afro-Caribbean origin in the UK, many are second and third generation descendants of war and post war immigrants, some are more recent arrivals, other have come via other countries such as the U.S. This recent history will have a significant impact on cultural expectations and needs. Some may wish to identify themselves as 'Black British'.

Christianity is the predominant religion in the Caribbean. Minority religious groups in the region are Hinduism, Islam, Rastafari, Santería, Voodoo and others.

The Christian faith has played a strong role in the life of many Afro-Caribbean individuals, especially the older generation. There is a tradition of strong Black churches in the UK, with distinctive patterns of worship. Some are newer traditions, others are related to earlier missionary traditions.

There are notable Muslim and Hindu communities on the Islands (especially Trinidad), and Rastafarianism has developed strongly from Jamaica.

English is the dominant language in most islands, although there are clear and distinctive dialects known as 'Creole' or 'patois', which include older words and speech patterns, many of which form part of an oral heritage. Some islands primarily use a French Creole/Patois.

2011 UK Census figures for those of Caribbean ethnicity:

- **Leeds – 6,728 (0.9%)**
- **York (UA) – 205 (0.1%)**

China

China is located in the continent of Asia and is the most populous country on earth with 1.3 billion people. The Han Chinese ethnic group make up around 92% of the population. The remaining 8% is comprised of five minority ethnic groups.

The official language of China is Mandarin (Putonghua) with many local dialects. Other languages include; Yue (Cantonese), Wu (Shanghainese), Minbei (Fuzhou), Minnan (Hokkien-Taiwanese), Xiang, Gan, Hakka dialects, and other minority languages.

Mongolian is official in Nei Mongol, Uighur is official in Xinjiang Uygur, and Tibetan is official in Xizang (Tibet).

China is officially atheistic, but there are five State-Registered religions: Taoism, Buddhism, Islam, Catholic and Protestant Christianity.

2011 UK Census figures for those of Chinese ethnicity:

- **Leeds – 5,933 (0.8%)**
- **York (UA) – 2,449 (1.2%)**

Notes for Trust Services:

- **Some people will believe in feng shui - that our lives can be affected by the arrangement and alignment of objects in our environment.**
- **The role of food in health can be central. The idea of a balance between 'hot' and 'cold' food is current, with some 'cold' foods being avoided when sick, e.g.: Hot - Most pulses, garlic, ginger, eggs, nuts, lamb, honey, chilli, onions, dates, tea and coffee. Cold - Cereals, rice, wheat, fruit, potatoes, white sugar, chick peas, milk, green leafy vegetables.**
- **Formality in naming can be important, especially for older generations, who may prefer you to use their full name or family name and title.**
- **Naming systems can be a mix of European and traditional models. Traditionally, the family**

name is first, followed by a two character personal name, e.g. Suen Lan-Ying. Sometimes this is reversed, and a European name is added, such as Jane Lan-Ying Suen. We may need to ask for a full name and a preferred name.

- Among the many festivals, Chinese New Year is a significant occasion whatever the individual's faith and falls in late January or early February. There are many traditional practices which may need considering if someone is in residential care or an inpatient, such as eating good luck food or food with auspicious colours or names, wearing items of red, burning 'bank of hell' notes, hanging up an Almanac and so on.

India

India is located in South Asia and has a population of 1.21 billion (provisional Government of India Census data, 2011).

The official language of India is Hindi, written in the Devanagari script and spoken by some 30% of the population as a first language. Since 1965 English has been recognised as an 'associated language'. In addition there are 18 main and regional languages recognised for adoption as official state languages which include Urdu, Gujarati, Punjabi and Kashmiri.

The main religious groups are Hindus (80.5%), Muslims (13.4%), Christians (2.3%) and Sikhs (1.9%).

2011 Census UK figures for those of Indian ethnicity:

- Leeds - 16,130 (2.1%)
- York (UA) - 1,531 (0.8%)

Notes for Trust Services:

- There are a wide range of traditions within India and within the community in Britain. Faith will vary, as will cultural observances, marriage traditions and dietary preferences.
- Indian-born men have the highest rate of mental health inpatient admission with alcohol problems. This has been associated with depression, anxiety, eating disorders and personality disorders.
- Religion, education and social class all influence greetings in India. A hierarchical culture often means that the eldest or most senior person is greeted first. When leaving a group, each person should be bid farewell individually.
- There may be a variation in time-keeping or punctuality amongst South Asian cultures which may result in delayed attendance, therefore this should be agreed in advance to ensure mutual understanding of service provision.
- Some Indian families may prefer shoes to be removed upon entering the home.

Pakistan

Pakistan is located in South Asia and has a population of 177 million.

Many languages are spoken by the population; Punjabi 48%, Sindhi 12%, Siraiiki (a Punjabi variant) 10%, Pashtu 8%, Urdu (official) 8%, Balochi 3%, Hindko 2%, Brahui 1%, English (official; lingua franca of

Pakistani elite and most government ministries), Burushaski, and other 8%.

The official languages are English and Urdu.

The religions of Pakistan include: Islam (97%). Hinduism, Christianity and others (3%).

2011 UK Census figures for those of Pakistani ethnicity:

- **Leeds - 22,492 (3%)**
- **York (UA) - 417 (0.2%)**

Poland

Poland is located in Eastern Europe and has a population of 38.1 million.

People in Poland: Polish 96.7%, German 1.3%, Ukrainian 0.6%, Byelorussian 0.5%.

Languages: Polish

Religion(s): Roman Catholic (95%), Eastern Orthodox, Protestant, and Other (1.5%).

Religion plays an important role in the Polish society and is deeply intertwined with Polish culture. Catholicism is the most widely practiced religion. Life events such as weddings, baptisms, funerals, first communion and confirmation are influenced by religion.

Religious holidays are considered national holidays when most businesses are closed. The most important holiday is Christmas and celebrations last two and a half days. Polish people may practice “dzielenie opłatkiem” which is the breaking and sharing of a thin white wafer (oplatek) with all family members.

Another religious holiday is All Saints’ Day which takes place on November 1st. On this day people visit cemeteries to honour their loved ones who have passed away.

Christmas Eve (Wigilia) is traditionally the most festive and moving evening of the year and traditionally, would follow a day of fasting. Supper is made of Lenten dishes. An even number of places may be set at the table to avoid bad luck and a number of customs would be carried out to ensure fertility for the crops etc for the New Year, such as placing hay under the tablecloth. Traditionally meat is avoided on Christmas Day as meat is seen as a privilege and a source of pride, consequently carp may be eaten on this day. Not all Polish people will abstain from eating meat at Wigilia.

Family

The family is the centre of the social structure with one’s obligation to the family first and foremost. Extended families are still the norm and really form an individual’s social network. It is common for cousins to be referred to as brothers and sisters and Mothers in Law as Mother, etc.

Family members are naturally part of an inner circle, along with close, usually family friends. The inner circle forms the basis of a person’s social and business network and people from the inner circle may be relied upon to, e.g. offer advice or support in seeking employment or accommodation.

Republic of Ireland

Ireland has a population of 4.58 million (Census 2011).

Languages: Irish is the first official language, although English, the second official language is almost universally used.

Religions of Ireland: Roman Catholic 86.8%; Church of Ireland (Anglican) 3%; Presbyterian 0.6%; Methodist 0.3%; Jewish 0.05%; Other 3.3%; No religion 4.4%; Not stated 1.7% (Census 2006).

2011 UK Census figures for those of Irish ethnicity:

- **Leeds – 7,031 (0.9%)**
- **York (UA) – 1,103 (0.6%)**

Categories used in Classifying Ethnicity

The following are the classification and category codes drawn from the 2011 Census. We need to be aware that many individuals may wish to 'self-identify', either by using this list directly, or more fully by giving their own description, rather than being asked to 'tick a box' by a member of staff. We need to record all the information given accurately, even if it does not fit neatly into proposed coding. In some circumstances, due to mental illness, ethnicity data offered by individuals may appear inaccurate. Concerns on the reliability of the data offered may need recording sensitively and updated once true status can be identified.

Demographic data such as ethnicity is gathered throughout the Trust to monitor inequalities in service access and/or experience and to help us develop better services in future. This may need to be explained to individuals when seeking information.

Ethnic Groups

White

- British
- Irish
- White Gypsy or Irish Traveller
- Other White

Mixed / Multiple Ethnic Groups

- Black Caribbean and White
- Black African and White
- Asian and White
- Other Mixed

Asian or Asian British

- Indian
- Pakistani
- Bangladeshi
- Chinese
- Other Asian

Black/African/Caribbean/Black British

- African
- Caribbean
- Other Black

Arab or other ethnic group

- Arab
- Other ethnic group

Trust Procedures and Guidelines

The following procedures and guidelines may be of relevance for staff when supporting someone with religion and belief and/or cultural observations.

Areas for consideration might include: medications – ensuring that medicines do not contain alcohol where possible and/or are free from beef products including gelatine or have narcotic effects.

Discharge and leave considerations be made to ensure Sabbath can be observed and travel permitted.

LYPFT Interpreting & Translation Guidance

CM-0009 – Guidelines for the Pharmacological Management of Psychiatric Emergencies/Behavioural Disturbances using Rapid Tranquilisation (RT) in Adults and Older Adults

CM-0011 - Clinical Risk Assessment and Management Procedure

CM-0013 - Procedure for the Discharge and Transfer of People using the services of Leeds and York Partnership NHS Foundation Trust

CM-0018 - Patients Leave of Absence Protocol

CM-0019 - Deprivation of Liberty Safeguards

CM-0024 - Procedure for Therapeutic Mealtimes

CM-0028 - Policy and Guidelines Associated with Children Visiting Mental Health/ Learning Disability and Inpatient Day Treatment Areas

CM-0029 - City-wide Care Programme Approach Policy (Including arrangements for Care Plan)

CM-0037 - Procedure for Advance Decisions (Living Wills)

CM-0044 - Procedure for use in Cases of Suspected Suicide, Unexpected Death and Near Misses to Fatality

Leeds Multi-Agency Safeguarding Adults Policy

Safeguarding Children Policy

HR-0026 - Health Working Procedures (Flexible working, Job share, Employment break scheme)

HR-0027 – Employee Health and Wellbeing Framework

HR-0039 - Special Leave procedure

Useful Contacts and References

Bahá'í

Bahá'í Community of Leeds

E-mail: yorkshirebahai@gmail.com

York Bahá'í

Web: <http://www.yorkbahais.org.uk>

E-mail: secretary@yorkbahais.org.uk

For further information please see: www.bahai.org and www.bahai.org.uk

Buddhism

Triratna Leeds Buddhist Centre

4th Floor Leeds Bridge House

Hunslet Road

Leeds, LS10 1JN

Tel: 0113 2445256

Web: <http://www.leedsbuddhistcentre.org>

E-mail: enquiries@leedsbuddhistcentre.org

Jamyang Buddhist Centre Leeds

31 St Paul's Street

Leeds, LS1 2JG

Tel: 07866 760460

Web: <http://www.jamyangleeds.co.uk>

E-mail: smile@jamyangleeds.co.uk

Madhyamaka Buddhist Centre

Kilnwick Percy Hall,

Pocklington,

York

YO42 1UF

Tel: 01759 304832

Web: <http://www.madhyamaka.org>

E-mail: info@madhyamaka.org

Christianity

St Aidan's Church Leeds

St Aidan's Church

Roundhay Road

Leeds, LS8 5QD

Web: <http://staidan-leeds.org.uk>

E-mail: clergy@staidan-leeds.org.uk

Immaculate Heart of Mary Catholic Church Leeds

294 Harrogate Road

Leeds, LS17 6LE

Web: <http://www.immaculateheart.org.uk>

Roscoe Methodist Church Leeds

3-5 Francis Street

Leeds, LS7 4BY

Web: <http://www.leedsnemethodist.org.uk/Roscoe.htm>

E-mail: revmarkharwood@btinternet.com

Universities Chaplaincy in Leeds

Web: <http://www.leeds.ac.uk/chaplaincy>

E-mail: chaplaincy@leeds.ac.uk

The Diocese of York in the Church of England

The Diocese of York

Diocesan House

Aviator Court, Clifton Moor

York, YO30 4WJ

Web: <http://www.dioceseofyork.org.uk>

Email: office@yorkdiocese.org

St George's Catholic Church York

Peel Street

York

YO1 9PZ

Web: <http://stgeorgeschurch-york.org.uk>

E-mail: george-york@tiscali.co.uk

Chaplaincy to the University of York

Web: <http://www.york.ac.uk/univ/chap/>

York St John University Chaplaincy

Web: <http://www.yorks.ac.uk/chaplaincy/chaplaincy.aspx>

Humanism

The British Humanist Association: - a national charity working on behalf of non-religious people who seek to live ethical and fulfilling lives on the basis of reason and humanity.

Web: <http://humanism.org.uk/>

Hinduism

Leeds Hindu Mandir Temple

36 Alexandra Road

Leeds, LS6 1RF

Web: <http://www.leedsmandir.org.uk>

Tel: 0113 2757024

The Leeds Hindu Mandir is a non-profit organisation which actively fulfils the spiritual, cultural and social needs of the Hindu community in Leeds. Established in 1968, Leeds Hindu Mandir was the first Hindu temple to be built in Leeds.

The nearest Hindu Mandir to York is at 46 Alexandra Road, Leeds, LS6 1RF, Tel: 0113 2757024.

Islam

Hamara Healthy Living Centre

Hamara HLC

Tempest Road, Beeston

Leeds, LS11 6RD

Tel / Fax: 0113 2773330

Web: <http://www.hamara.org.uk>

E-mail: admin@hamara.co.uk

Hamara currently deliver several different strands of work: Information and Advice, Health Promotion / Education, Older People's Services, Women's Activities, Sports and Exercise, Youth Services, Community Cohesion and Training Programmes are

all key facets of its work.

The organisation is regarded as a model of good practice both within its sector and by many statutory agencies in Leeds.

Makkah Masjid

36 Thornville Road

Leeds, LS6 1JY

Web: <http://www.makkahmasjid.co.uk>

E-mail: mail@makkahmasjid.co.uk

Leeds Grand Mosque

9 Woodsley Road

Leeds, LS6 1SN

Web: <http://www.leedsgrandmosque.com>

E-mail: contact@leedsgrandmosque.com

York Mosque

Bull Lane

Lawrence Street

York, YO10 3EN

Tel/Fax: 01904 413123

Web: <http://yorkmosque.org>

E-mail: contact@yorkmosque.org

Jehovah's Witness

Official Website: <http://www.jw.org/en>

Judaism

Leeds Jewish Welfare Board

311 Stonegate Road

Leeds, LS17 6AZ

Tel: 0113 2684211

Fax: 0113 2034915

Web: <http://www.ljwb.co.uk>

E-mail: theboard@ljwb.co.uk

Leeds Jewish Welfare Board provides a comprehensive range of high quality, professionally delivered, culturally sensitive, social, residential and community care services, primarily to the Jewish community.

Sinai Synagogue (Reform)

Roman Avenue

Roundhay, Leeds, LS8 2AN

Tel: 0113 2665256

Web: <http://www.sinaisynagogue.org.uk>

Email: info@sinaisynagogue.org.uk

The nearest synagogues to York are in North Leeds and cover the spectrum of British Jewish practice.

Further details on providing care to Jewish inpatients/service users, including information on Kosher diets can be found at:
<http://www.jvisit.org.uk/hospital/caring.htm>

Paganism

The Pagan Foundation aims to support individuals to ensure they have the same rights as followers of other beliefs and religions and provides a range of information and latest news and events: <http://www.paganfed.org/>

Quakers

Leeds Quakers

The Wardens

188 Woodhouse Lane

Leeds, LS2 9DX

Tel: 0113 2289803

Web: <http://www.leedsquakers.org.uk>

E-mail: mail@leedsquakers.org.uk

York Quakers

Web: <http://yorkquakers.org.uk>

Rastafarianism

Rastafarian forum and links to other similar organisations and groups, includes outline of the religion, important dates and registration with forum for ongoing discussions and information:
<http://www.rasta-man.co.uk/>

Refugees and Asylum Seekers

Solace (surviving exile and persecution)

Suites 2 and 3

Bank House

150 Roundhay Road

Leeds, LS8 5LJ

Telephone: 0113 2491437

Email: info@solace-uk.org.uk

Web: <http://www.solace-uk.org.uk/>

PAFRAS (Positive Action For Refugees and Asylum Seekers)

National Resources:

A dedicated site for staff working with Asylum seekers & Refugees
www.harpweb.org.uk

Information on Refugees & Health

www.medact.org

Sikhism

Guru Nanak Nishkam Sewak Jatha

78 Lady Pit Lane

Beeston, Leeds, LS11 6DP

Web: <http://www.gnnsjleeds.com>

E-mail: info@gnnsjleeds.com

Phone: 0113 2760261

Fax: 0113 2760270

Guru Nanak Nishkam Sewak Jatha (Leeds) UK

is a non-political, non-profit making, charitable organisation committed to the selfless service of humanity at large and the propagation, practice and advancement of Sikhism based upon the teachings of the ten Guru's and Siri Guru Granth Sahib Ji.

Ramgarhia Sikh Temple/Ramgarhia Board

10 Chapletown Road

Leeds, LS7 3AP

Tel: 0113 262 5427

There are several Sikh families living in York and most Sikh community activities take place at York St John University.

The closest Gurdwaras and community centres to York are in Leeds.

Interfaith Organisations

Concord Leeds Interfaith Group

Web: <http://www.concord-leeds.org.uk/index.htm>

E-mail: secretary@concord-leeds.org.uk

Concord is one of the longest running interfaith groups in the UK, founded over 30 years ago. It exists to foster friendship, trust, tolerance, understanding and co-operation among members of the faith communities of multi-cultural Leeds.

The group also works closely with the Leeds Faith Forum and is affiliated to the national Interfaith Network for the UK.

Concord is a registered charity with a secretary, treasurer and executive committee.

Some of the faiths Concord brings together include: Baha'is, Brahma Kumaris, Buddhists, Christians, Hindus, Jews, Muslims, Pagans, Sikhs and others.

York Interfaith

Web: <http://www.yorkinterfaith.org>

Yorkshire and Humber Faith Forums

Web: <http://www.yorkshireandhumberfaiths.org.uk>

The Yorkshire and Humber Faiths Forum

(YHFF) was established in 2005 to:

- Advance the contribution of faith communities in the Yorkshire and Humber region;
- Encourage and educate faith communities to work together in matters of policy, strategy and action
- Challenge all forms of discrimination and injustice against persons or groups of people, particularly in the grounds of religious belief

The Inter Faith Network for the UK

Tel: 020 7730 0410

Fax: 020 7730 0414

Web: <http://www.interfaith.org.uk/index.htm>

E-mail: ifnet@interfaith.org.uk

The Inter Faith Network for the UK was founded in 1987 to promote good relations between people of different faiths in this country. Its member organisations include representative bodies from the Baha'i; Buddhist; Christian; Hindu; Jain; Jewish; Muslim; Sikh; and Zoroastrian communities; national and local inter faith bodies; and academic institutions and educational bodies concerned with inter faith issues.

Black and Asian Minority Ethnic Leeds Black Elders Association

www.lbea.co.uk

Leeds Black Elders Association is a neighbourhood Network Scheme commissioned by Leeds City Council to deliver appropriate services that meets the needs of the elderly that are living in parts of Leeds 6,7,8 and 9. Leeds Black Elders Association also have city wide remit that enables the Association to work with African-Caribbean's in the district of Leeds. Services include: Community Transport, Day Centres, Home Security/Safety, Meals at Home, Drop in Service.

York Racial Equality Network

www.yren.co.uk/

York Racial Equality Network (YREN) is a voluntary organisation which aims to promote awareness of the needs of black and minority ethnic (BME) and other people in the York area.

The Deaf Community

Sensory Impairment Team – City of York Council
10/12 George Hudson Street, York YO1 6ZE

Tel: (01904) 555111

Minicom: (01904) 553875

Fax: (01904) 553861

York Deaf Society

Bootham House, 61 Bootham York YO30 7BT

Minicom: (01904) 623459

Fax: (01904) 623459

Physical and Sensory Impairment (PSI)

Network, Leeds

Voluntary Action Leeds (VAL)

Stringer House

34 Lupton Street

Hunslet

Leeds

LS10 2QW

Fax: 0113 297 7921

Minicom: 0113 297 7941

The Physical and Sensory Impairment Network, Leeds is a forum for disability issues and enables informationsharing,waystoimprovecommunication and representation of interests and concerns of disabled people.

SignHealth

5 Baring Road,

Beaconsfield,

Buckinghamshire,

HP9 2NB

Telephone: 01494 687600

Fax: 01494 687622

SMS/text message:

07966 976749

E-mail: info@signhealth.org.uk

Web: <http://www.signhealth.org.uk>

