# Palliative Care:

## Cultural Sensitivity for Muslim Patients

# COI Disclosure

- **Speaker: Imran Bagha, Imam**

- **Relationships with non-profit groups:**
  - **Thunder Bay Masjid**
  - **Islamic Centre of Northern Ontario (ICONO)**

# Learning Objectives

At the end of this presentation, participants will be able to:

1. Recognize the effects of spiritual and cultural factors on End of Life values

2. Demonstrate cultural sensitivity when communicating with patients from all walks of life

3. Incorporate spirituality and cultural humility in their delivery of End of Life Care

# Questions to answer

1. What are the most important aspects and considerations that people should be aware of when providing palliative care to a Muslim patient?

2. What communication strategies/tips do you recommend for supporting a person's spirituality and developing cultural humility when providing palliative care?

3. Resources you would recommend to palliative care providers.

# Topics

1. Basic Islamic beliefs around life and death
2. **Modesty**
3. **Diet**
4. **Cleanliness**
5. Death rituals

# Background

- Cultural competence is a necessary skill in end-of-life care (Coredo 2011)
  - Improved doctor-patient relationship, improved health outcomes, increased compliance (Kirmayer 2013)
  - Religious belief and practice enhances wellbeing (Eckersley 2007)

**Three Principles of Cultural Competency:** acknowledge, respect, and minimize negative consequence. Cultural competence is being able to develop skills, attitudes, knowledge for working with people of different cultures.


(1) Kirmayer, L. J. (2013). Embracing uncertainty as a path to competence: Cultural safety, empathy, and alterity in clinical training. *Culture, Medicine, and Psychiatry*, *37*(2), 365-372.
(2) Cordero, C. (2011). Advancing effective communication, cultural competence, and patient-and family-centered care: A roadmap for hospitals. *Retrieved from National Association of Public Hospitals and Health Systems: http://www. naph. org/Different-Formats/PowerPoint-Only/2711-Joint-Commission-Standards-Webinar. aspx*.

# Some basics about Islam

- *Islam* is the name of the religion; *Muslims* practice Islam
- Monotheistic Abrahamic religion
  - Muslims believe in Jesus
  - Muhammad (pbuh) is the messenger of Islam
- Islamic practice is informed by the *Quran*, and the *Hadith*
- Muslims pray 5 times a day
- Friday is the Holy Day

# Islamic understanding of Life and Death

- Health is
  - a state of physical, psychological, social and spiritual wellbeing
  - A significant blessing
  - A test of one's faith

- Illness is
  - An opportunity for spiritual reward;
  - A reminder to improve one's health;
  - A test of one's faith

"There is no disease that God has created, except that He also has created its treatment." *Hadith*:Bukhari B71, H582

- Life is
  - Sacred
  - The preservation of life is highly valued
  - To seek medicine is part of faith

- Death is
  - part of the journey to meet God
  - Something to be prepared for, and not avoided or feared
  - A natural component of existence

**Quran 5:32**
…whoever saves a life, it will be as if they saved all of humanity…

**Quran 29:57**
Every soul will taste death, then to Us will you be returned

# Modesty

- Modesty is deeply valued in Islam
- Throughout life, Muslims adhere to rules related to modesty
  - Men and women are required to cover a certain percentage of their body
  - Many Muslim women will wear the hijab (headscarf)
  - Touch (not just limited to hugging, kissing) is prohibited between adult members of the opposite sex, with the exception of immediate family members
  - Men and women are taught to lower their gaze
- In a palliative environment, these habits are challenged and require sensitivity

# Diet

- Islam has rules about the types of food that are permissible (halal) or prohibited (haram). The main prohibited foods are:
  - Pork and its by-products;
  - Alcohol;
  - Meat that has not been slaughtered according to Islamic rites.
    - Animal fats

- Many Muslims may refuse to eat hospital food if it is non-halal and may prefer to have meals brought from home. If this is not possible, they should be given the option of having **seafood, eggs, dairy, fruits and vegetables, or Kosher** food.

- To keep it simple: you cannot go wrong with a pescatarian diet

- Ramadan and fasting

# Cleanliness and Prayer

In adult life:

- Muslims are taught to be in a constant state of physical purity
- Muslims perform “wudu” (ablution) before performing the daily prayers
- Water is used in addition to toilet paper after using the washroom
- Dental hygiene is greatly emphasized

Abu Malik at-Ash'ari reported the Messenger of Allah (pbuh) said:
“**Cleanliness is half of faith**”
Sahih Muslim 223

Abu Hurairah narrated that Muhammad (pbuh) said:
**"If it were not that it would be difficult on my nation, then I would have ordered them to use the Siwak (toothbrush) for each prayer."**
At-Tirmidhi Book 1 Hadith 22

# Cleanliness and Prayers

- Patients will ask to face a certain direction (in NA this is North-East, the direction of Mecca) to say their prayers
- They are able to say their prayers standing, sitting, or lying down depending on their mobility

To keep it simple:

“I understand that cleanliness is very important for many Muslim patients. What are your needs and how can I facilitate them to ensure you are comfortable?”

# Death rituals

- Muslims believe they should meet illness and death with patience, meditation and prayer.
- Even after death, modesty is to be preserved. The body should remain covered. Corpses should not be needlessly exposed.
- To end one's own life consciously (suicide and its derivatives, like MAIDs) is impermissible for Muslims.
- Muslims believe in swift burials. After death, they will want to complete the burial within 24 hours.

# Key Points

- Modesty is a priority for Muslim patients: ask permission, and limit exposure
- Muslims may ask to follow a “halal” diet. “Halal” means “permissible,” and encompasses a vegetarian or pescatarian diet.
- Cleanliness is highly valued and is a component for Muslims to meet their religious obligations

# Resources

Leong, M., Olnick, S., Akmal, T., Copenhaver, A., & Razzak, R. (2016). How Islam influences end-of-life care: education for palliative care clinicians. Journal of pain and symptom management, 52(6), 771-774.

https://www.sciencedirect.com/science/article/pii/S0885392416307564

Quran (English translation): https://www.amazon.ca/Clear-Quran-Dr-Mustafa-Khattab/dp/097730096X/

Health Care Providers' Handbook on Muslim Patients, second edition, by Queensland Health AU:

https://www.health.qld.gov.au/multicultural/health_workers/hbook-muslim

Cultural competence in nursing Muslim patients by G. Hussein Rassool:

https://www.nursingtimes.net/roles/nurse-educators/cultural-competence-in-nursing-muslim-patients-30-03-2015/

# Thank you

- Questions
- Please take 3-5 minutes to fill out the evaluation form. Thank you!