

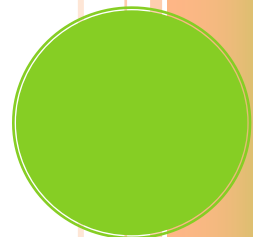
Providing Diversity Competent Care to People of the Sikh Faith

A handbook for health care providers

This handbook will provide you with information on the Sikh faith, and the important values, beliefs, and practices to take into account when providing care.



Strength through inclusion





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This handbook was created and is authored by **Fraser Health Diversity Services (FHDS)**. One of the services FHDS provides is education and training on diversity competency. This handbook is meant to be *one* educational tool to help Fraser Health staff, physicians and volunteers provide diversity sensitive care to people of the Sikh faith. Click [here](#) to find the handbook online (on the Fraser Health Diversity Services Intranet website under “Resources”). Feel free to print this resource for you and your team. For further information, training, help, and/or to provide feedback, please email diversity.services@fraserhealth.ca or call 604-587-4486.

Fraser Health Diversity Services would like to acknowledge the contributions of the **World Sikh Organization of Canada**, who provided great content detail and information for this handbook, as well as photographs, and revisions. For more information visit <http://www.worldsikh.ca/> .

Fraser Health Diversity Services would also like to acknowledge **Queensland Health** (Australia) for their resource¹ on the Sikh faith, which contributed greatly to the content of this handbook. For the full version of the Queensland Health Resource, visit http://www.health.qld.gov.au/multicultural/support_tools/hbook-sikh.pdf

¹ Queensland Health. Health Care Providers’ Handbook on Sikh Patients. Division of the Chief Health Officer, Queensland Health. Brisbane 2011.

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An Important Note on Diversity Competent Care

When we provide education on diversity competent care to patients/clients/residents of a certain community (e.g. religious communities or cultural communities), it is important to keep in mind that diversity exists *within* these communities. This means that individuals within a community will interpret and practice their religions and cultures differently from each other. In the case of religious communities, the degree of religious observance varies within a population, and thus we must emphasize the importance of **person-centered care** – asking each individual patient/client/resident, and their family what is important to them, and what is needed to respect their individual values and beliefs during the care giving process.

An Important Note on Cultural and Religious Literacy

To be culturally and religiously literate health care providers, we need to understand that culture and religion is not solely defined by devotional practices such as rites, rituals, religious festivals or rules and regulations. Instead, we look at culture and religion as something that shapes and changes depending on the **environmental factors** in which somebody lives (e.g. political environment, economic environment, social environment, etc.), by the **personal experiences one has had during their lifetime**.

This approach helps us understand why a religion is practiced and depicted in different ways in our population. Thus, in your own personal health care practice, it is important to note that not everyone will practice, adhere and explain their culture/religion in the same way, nor will their cultural or religious beliefs impact their health behaviours and health attitudes in the same way.

For more information on cultural and religious literacy, please contact Diversity Services (diversity.services@fraserhealth.ca) or take the online course on this topic which is on the CCRS website. Go to www.ccrs.vch.ca and search “religious literacy”.

Purpose of Handbook

This handbook is meant to be a reference guide for health care providers to maintain their awareness on the Sikh faith after taking either the Fraser Health online module on providing culturally sensitive care to people of the Sikh faith, or attending an in-person workshop. This handbook provides caregivers important information on the Sikh faith, as well as information on Sikh beliefs, values and practices that will affect the provision of care.

For an in-depth training program on the Sikh faith, healthcare providers should take the online course “Providing Culturally Sensitive Care to People of the Sikh Faith” on CCRS and/or participate in an in-person workshop on this topic.

Please contact Diversity Services for further details at: Diversity.Services@fraserhealth.ca

Communication

What is important for communication?

Research has shown that the following three things must be considered for **effective communication** between the caregiver and the patient/client/resident/family:

1. Your patient's **health literacy level**
2. Taking into account **your patient's culture**
3. Your patient's **language ability**

Bearing in mind these three areas will aid you in understanding your patient's needs and plan appropriate treatment. Further, taking these elements into account will not only ensure your patient understands your prescriptions, but they will also affect how safe your patient feels under your care, the quality of care they are receiving, and their ability to access other health resources.

Health Literacy (of your Patient, Client, Resident or Family)

Health literacy is the ability to access, understand, evaluate and communicate information in order to promote, maintain, and improve health in a variety of settings across a lifetime. When we talk about health literacy, we are referring to your patient/client/residents' health literacy level, not the health literacy level of the care provider.

FH provides training and information on how to understand the health literacy levels of your patients/clients/residents, communication tips that take into account health literacy levels, and how to overcome the barriers created by limited health literacy. Contact FH's Health Literacy Team:

Katherine.Scarborough@fraserhealth.ca or CarolA.Wilson@fraserhealth.ca

FH also has a patient education resource catalogue that you can use, which has patient education material that fits health literacy standards:

<https://patienteduc.fraserhealth.ca/>

http://fhpulse/EDUCATION_AND_PROFESSIONAL_DEVELOPMENT/CLINICAL_EDUCATION/PATIENT_EDUCATION/Pages/Default.aspx

Culture

Culture is shaped and formed by a variety of environmental factors and does not necessarily remain intact from generation to generation. **Culture affects health behaviours, attitudes and outcomes.**

Today, the majority of the Sikh population in the Fraser Health region is of **South Asian** background and come from a province in India called **Punjab**. However, healthcare providers must understand that due to immigration and migration, there are large Sikh populations in various areas around the world, including other parts of India (outside of the province of Punjab), parts of Africa (Kenya, Uganda, Tanzania), Britain, and the United States. Migration, immigration and settlement patterns have had a large effect on the cultures – values, beliefs, and lifestyles – of these different populations.

To learn more about culture, how culture affects health, the South Asian culture, history in BC, and epidemiological and demographic statistics, contact Diversity Services at: Diversity.Services@fraserhealth.ca

Language Ability

As noted above, the vast majority the Sikh population in the Fraser Health region is from the province of Punjab, India. Thus, the languages that are most spoken in the Sikh population in the Fraser Health region are:

- Punjabi
- English
- Hindi

Services for Communication

Interpreter Services

If a patient is assessed to have inadequate English, health care providers should involve a professional interpreter. Requests for interpreting services (facilitating **spoken** language communication between two or more persons who do not share a common language by conveying as accurately as possible the information) are processed at the PHSA's Provincial Language Service. All Fraser Health patients have access to an interpreter at no charge.

Many staff use other **medical staff members as an interpreter**. This is appropriate as long as the staff member speaks the same **dialect** as the patient/client/resident. Fraser Health policy is to always use a professional interpreter and to **only use friends or family in an emergency**.

To request an interpreter, please visit <https://plscustomer.phsa.ca/> or call them at the numbers below:

Contact numbers to request, change, or cancel an Interpreter

Fraser South and North

Fraser South (Surrey, Delta, Langley, South Surrey/White Rock) and Fraser North (Burnaby, New Westminster, Coquitlam, Port Moody, Port Coquitlam, Maple Ridge)

Telephone: 604-675-4099

Fax: 604-708-2148

Fraser East

(Abbotsford/Mission)

Telephone: 604-870-3769

Fax: 604-854-8033

Feedback to Diversity Services

Lower Mainland Interpreter Services Customer Service Committee is responsible for ensuring that the Interpreter Services is operating to expected levels and meeting quality standards for all Lower Mainland Health Authorities. **FH Diversity Services is responsible for providing feedback to the Committee on any service issues within Fraser Health**. If you have a very positive or adverse experience with an interpreter, we want to hear about it. Please contact diversity.services@fraserhealth.ca

Translation Services

Providing printed information and educational material to your patient/client/resident in a language they can understand is important in the provision of care and for ensuring adherence to prescriptions/care plans. Fraser Health staff can have **approved** patient education material translated into various languages that meet your patient population's needs through Diversity Services.

Please visit the FH Diversity Services intranet website to get a document translated (under "Translation Services"), or click here: http://fhpulse/clinical_resources/diversity_translation_services/Pages/TranslationServicesGuidelines.aspx

Other Resources from Fraser Health

Please contact Diversity Services (diversity.services@fraserhealth.ca) or look on our Intranet website for:

- Cue Cards in 60+ Languages (including Punjabi), which have been developed to assist health care providers with their patients/clients/residents who have English language difficulties.
- Punjabi Language Course that is specifically catered to health care workers learning beginner-level Punjabi
- Diversity Consultation Services
 - Providing FH staff, physicians and leaders advice about diversity issues pertaining to the workplace and/or patients

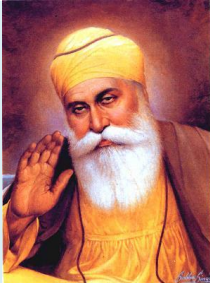
Specific Information on the Sikh Faith

Again, to understand a religion, we need to understand the collective practice. Here are a few basic ideas that are part of the Sikh value system.

Overview of the Religion

History

- The Sikh religion began in the 15th Century in the Punjab
- The aim of the religion was to create equality and social justice for all
- *Sikh* can be translated as “disciple/student” in Punjabi
- The founder of the Sikh faith is **Guru Nanak** (1469-1539)
- *Guru* can be translated to “Spiritual Teacher”
- There are 10 Gurus in total



Guru Nanak is the first Guru (of ten) of the Sikh faith. You might find his picture in the homes of Sikh families, or perhaps by the bedsides of patients/clients/residents. Guru Nanak is **not** worshipped in the Sikh faith.

Basic Beliefs

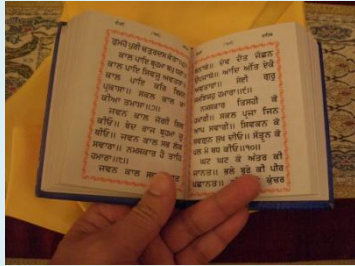
- The Sikh religion is a **monotheistic** religion, meaning that people who follow the Sikh faith believe in **one God (but Guru Nanak is not god)**

There are 3 Principles of Sikhism:

1. Earn an honest living
2. Share earnings with others/community
3. Always remember and meditate on God

Religious Scripture

- The religious book/scripture in the Sikh faith is the **Sri Guru Granth Sahib**
- It is a compilation of hymns and is treated with veneration by followers
- It is considered the final and eternal Guru of the Sikh faith
- Usually, a **smaller version of the scripture** is found by the bedside of patients/clients/residents – it is called a **gutka**



Creative Commons Photos by Hari Singh (Flickr)

The **gutka** is a smaller version of the Sikh scripture, the Sri Guru Granth Sahib. It is usually wrapped in a cloth.



IMPORTANT PRACTICAL TOOL

If you need to move the gutka, make sure your **hands are clean**. The gutka is treated with incredible respect, and should not be put on the floor, near the washroom, or underneath other books/magazines.

Patients/clients/residents of the Sikh faith may read the hymns aloud from the gutka.

Religious Observance

Levels of religious observance vary within the Sikh population, as with any religious population. The following are religious observances that are considered most in-line with traditional or initiated Sikhism. Again, it must be emphasized that not all people who consider themselves Sikh will follow the religious observances in the same way or to the same degree. **Have a conversation with your patient/client/resident to understand what is important to him/her to help you provide culturally sensitive care.**

Appearance:

- Sikhs **may or may not** have a distinctive appearance or wear all of the Articles of Faith (see below for more details)
 - Men may have long, uncut hair and a beard, and wear a turban.
 - Women may wear a turban as well

Prayer:

- Sikhs may or may not observe the **three daily prayer times** (see below for more details)

Ethical and Social Conduct:

- Sikhs may or may not abide by the ethical and social conduct outlined by the faith (e.g. ethical rules of conduct, the teaching of the Gurus, the wearing the of the Five Articles of Faith)

Dietary Restrictions:

- Sikhs may or may not adhere to all or some of the dietary restrictions outlined by the faith (see below for more details)

Initiated Sikhs

- An Initiated Sikh is someone who has committed themselves to the Sikh faith
- After being initiated, Sikhs adhere to a formal **ethical social conduct** including some **dietary restrictions** and wearing **Articles of Faith** (explained below)
- **Both** men and women can be Initiated
- The Initiation Ceremony takes place when someone fully comprehends the implications of being initiated, and there is no age limit for being initiated



IMPORTANT PRACTICAL TOOL

Some **children** are raised in a household where the commitments of an Initiated Sikh (e.g. wearing the Articles of Faith) are followed. When providing care for children, we use the rule “parents know best”, if you are in doubt about providing care in a certain way, always ask the parents.

The Five Articles of Faith

- The Five Articles of Faith are typically never removed from a follower’s body, and patients will likely expect to wear the articles during their hospitalization/stay in the health facility, even when sleeping
- All Articles of Faith must be treated with clean hands and not put near washrooms or on the floor
- If removal of any of the Articles of Faith is absolutely required for a medical procedure or intervention, **always ask for permission and provide a respectful explanation**

Example:

Mr. Singh is scheduled for an MRI of his abdomen for which he is asked to remove any metal objects. You, as his nurse, observe that Mr. Singh is wearing two Articles of Faith - his *kirpan* (stylized representation of a sword) and *kara* (bracelet), and they are made of metal. You explain to Mr. Singh and his family that metal objects cannot be taken into the MRI area/room and ask that they be removed for the scan. (If Mr. Singh is using an interpreter, have the interpreter explain this to him as well).

“Mr. Singh, unfortunately it is very dangerous and unallowable to have metal objects in the MRI area/room. To have the MRI done, you will have to remove your kirpan and kara. We can keep it in a safe and clean place for you, and give it back to you as soon as the procedure is done. Is that OK?”



Kesh – Hair (Covered with a turban or scarf)

What is it?

- Kesh is defined as uncut hair for both men and women
- All the hair on the body are considered to be kesh, from head to toe
- For men, kesh includes an untrimmed beard and moustache

Why?

- Hair is considered a gift from God, and so hair becomes a symbol of loving God and respecting everything God has given

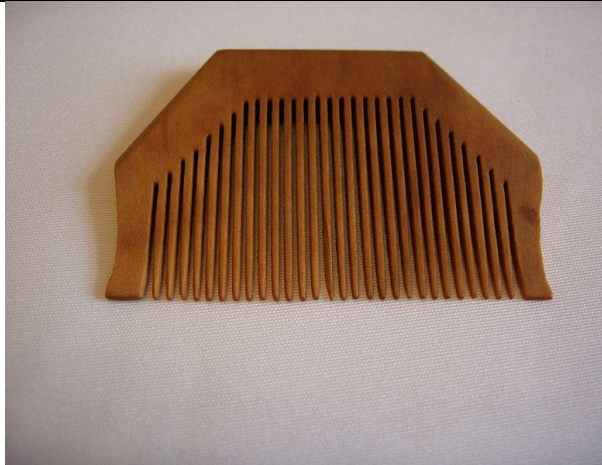


IMPORTANT PRACTICAL TOOLS

- A patient must be consulted and give **explicit permission prior to trimming, cutting or shaving any hair from any part of the body** (even for routine procedures such as taking blood)
- The turban is **not** like a hat – privacy must be given for removing or tying it
- People who wear a turban are not necessarily Initiated Sikhs

Tied Hair – Potential Effects on Swallowing and Breathing

- Sikh males might care for their hair by running a string from under the jaw, around the ears, and tying the ends together on the top of the head where it is placed under the turban
- The string gets tighter as the beard grows, and may impair a patient's/client's/resident's ability to swallow big portions of food, their ability to open their mouth widely, which in turn, could restrict breathing
- Stay aware of the potential problems associated with the practice of string tying – **adjusting the string may provide a simple solution to a patient's breathing or swallowing problems** (you can ask patient/family to do this).



Kanga – Comb

What is it?

- A wooden comb is used to properly groom and care for the hair (kesh)
- This is worn in the hair, above the top-knot of men and above the bun or plait in women (under the turban)

Why?

- The comb represents hygiene and ridding oneself of impurities and what is morally undesirable



IMPORTANT PRACTICAL TOOLS

- Sikhs may brush their hair with the kanga (comb) two times a day
- Sikhs may keep the hair from the comb after they have finished brushing so that it can be disposed of respectfully (not thrown in the garbage)



Kirpan –

Stylized representation of a sword

What is it?

- The kirpan is made of metal and secured in a belt across torso, underneath clothing, or in plain view
- It is worn **at all times** by Initiated Sikhs – at home, at work, sleeping or bathing

Why?





- The kirpan signifies the duty of a Sikh to stand up against injustice
- It represents spiritual power and is not to be used as a weapon



IMPORTANT PRACTICAL TOOLS

- The kirpan cannot be replaced by wood or rubber
- Have a discussion with the patient/client if the kirpan has to be removed for medical purposes (e.g. MRI)



	<ul style="list-style-type: none"> • In some situations (i.e. CT scan), the kirpan can be held to the side by the patient and the image can be taken • In some facilities and programs in Fraser Health (e.g. Mental Health), patients wear necklaces with symbols of the kirpan and comb due to safety concerns. However, it is important that before your patient/client/resident wears any type of replacement, you have a conversation with them and/or their family to see if this is acceptable.
	<p style="text-align: center;">Kachera – Undershorts</p> <p>What is it?</p> <ul style="list-style-type: none"> • The undershorts are unisex cotton breeches that resemble boxer shorts with a drawstring <p>Why?</p> <ul style="list-style-type: none"> • It represents chastity/sexual morality <p> IMPORTANT PRACTICAL TOOLS</p> <ul style="list-style-type: none"> • The undershorts may be worn at all times, including during bathing • Women during childbirth may want to tie the undershorts to one of their legs • Patients may request that the undershorts be tied to one of their legs during surgery
	<p style="text-align: center;">Kara – Bracelet</p> <p>What is it?</p> <ul style="list-style-type: none"> • The kara is an iron or steel bangle worn on the wrist <p>Why?</p> <ul style="list-style-type: none"> • It is a reminder of the Sikh’s bond with the Guru and also that God is eternal (like the circle, without beginning or end) <p> IMPORTANT PRACTICAL TOOLS</p> <ul style="list-style-type: none"> • Have a discussion with your patient/client if the bracelet needs to be removed for medical purposes



- It may not be possible to remove the bracelet because the hand no longer slips through. In such an instance, work with your team and the patient to determine what accommodations can be made. Examples include:
 - Surgery: the bracelet can be taped off
 - CT Scan: The hand with the bracelet can be moved to the side

Prayer Duties

- Prayer is an important part of the daily routine of many Sikhs
- Sikhs may pray to seek God's help in recovering from illness. They remember God's name to obtain peace
- Prayers occur **three times a day** (usually at dawn before breakfast, in the evening after sunset, and at night before sleep) with the **gutka**
- The prayers involve recitation of verses from the Sikh scriptures
- Sikhs may not eat until after their morning prayer is completed
- Prayers can occur individually or in congregation
- Prayers can take place in any location, including in bed or in designated prayer rooms
- Bathing or abluion is done before prayers

Ablution, bathing and cleanliness

- Cleanliness is an important consideration for Sikhs
- Sikhs may follow a ritual of cleanliness and prayer each morning and evening
- The morning ritual includes showering, cleaning the teeth and mouth before prayer and then eating
- Washing occurs before the other prayers
- Washing the hands before eating is important as cleanliness is observed during meals
- Sikhs are required to wash with water after defecation (e.g. bidets are used)



IMPORTANT PRACTICAL TOOLS

- If a patient requires assistance to bathe, healthcare providers should be aware of the patient's preferred timing for this ritual
- If bathing is medically contraindicated, discuss this with the patient and ask if it is ok to just wash the face and hands before prayer

Place of Worship

- The **Gurdwara** is the place of worship for people of the Sikh faith (and the place of community congregation)

Diet

- Many Sikhs are **lacto-vegetarian**, meaning that they abstain from all meat, fish, and eggs, but do consume dairy products
- Some Sikhs do not follow a vegetarian diet. Non-vegetarian Sikhs may still choose not to eat beef or pork
- Non-vegetarian Sikhs are not permitted to eat any meat that has been ritually slaughtered and so should not be offered halal or kosher meals
- A Sikh patient's family may wish to provide meals prepared at home

Note to health care workers:

- A family or friend may bring "parshaad", a sacramental food that is made in the Gurdwara (made of sugar, flour, and clarified butter), to the patient/client/resident. If eating this food is medically contraindicated, please let the family or patient know, or suggest adjustments (e.g. eating only a small amount)
- Sikhs may not eat with their head uncovered and may want to have their heads covered while they eat (e.g. with a turban or scarf)

Table 1: Foods Suitable for Vegetarian Sikhs

(Note to health care workers: Please have a conversation with your patient to see their personal dietary needs and restrictions, as all might not adhere to the list below)

Foods suitable for Vegetarian Sikhs	Ingredients and additives that may be found in these foods that would make them unsuitable if present (food becomes non-vegetarian)
Milk and milk products	
<ul style="list-style-type: none"> • Cream • Cheese • Yogurt • Butter • Coconut milk and other milk substitutes • Ice cream • Milk 	<ul style="list-style-type: none"> • Gelatin • Animal based thickener (e.g. chitin) • Animal based emulsifiers (e.g. animal or egg-based lecithin) • Animal based food colouring (e.g. cochineal/caramine) • Enzymes (e.g. lipase, pepsin, animal rennet)
Fruits and vegetables	
<ul style="list-style-type: none"> • All fruits and vegetables 	<ul style="list-style-type: none"> • Fruits and vegetables prepared with animal fats, gelatin or tallow
Alternatives to Meat	
<ul style="list-style-type: none"> • Beans • Lentils • Nuts 	<ul style="list-style-type: none"> • Eggs • Beans, lentils and nuts prepared with animal fats, gelatin, or tallow
Bread and cereals	
<ul style="list-style-type: none"> • Bread, cakes, biscuits and cereal products made without egg or animal fats • Pasta and pastry made without egg • Noodles made without egg • Rice 	<ul style="list-style-type: none"> • Eggs • Pastry brushed with egg whites • Animal-based emulsifiers (e.g. animal or egg-based lecithin)
Fats and Oils	
<ul style="list-style-type: none"> • All vegetable oils • Butter • Margarine made using vegetable oil • Mayonnaise made without egg • Ghee 	<ul style="list-style-type: none"> • Animal fats • Lard dripping • Suet • Egg • Fish oils
Beverages	
<ul style="list-style-type: none"> • Juices and cordials • Tea and coffee • Soft drinks, mineral and soda water 	<ul style="list-style-type: none"> • Gelatin • Animal-based food colouring (e.g. cochineal/caramine)
Soups and Sauces	
<ul style="list-style-type: none"> • All soups and sauces made with vegetables and vegetable stock 	<ul style="list-style-type: none"> • Animal stock/fats • Fish sauce

	<ul style="list-style-type: none"> • Worcestershire sauce
Desserts	
<ul style="list-style-type: none"> • All desserts made without eggs or other animal products 	<ul style="list-style-type: none"> • Animal fats • Animal based emulsifiers • Eggs • Gelatin
Other	
<ul style="list-style-type: none"> • Spices, pickles, chutney • Jam, honey, sugar • Vegetable-based gelatin 	<ul style="list-style-type: none"> • Gelatin • Animal based food colouring (e.g. cochineal/carmine) • Enzymes (e.g. lipase, pepsin, animal rennet)

Health Related Subjects

The following are generalizations and may not apply to individual Sikh patients. So whenever you read “Sikh”, know that it means “for many Sikh people...”

Modesty and Gender Interactions

- Modesty is highly valued
- The patient/client/resident may prefer to be attended by a same-sex healthcare staff
- If an Interpreter is needed, a same-sex Interpreter may be preferred

Family and Living Arrangements

- Usually, families have a strong presence in the lives of Sikh people
- Culturally, households are sometimes joint-family systems, consisting of parents, grandparents, children, spouses or other relatives
- Culturally, the elders are considered the top of the family hierarchy
- Culturally, the elderly usually do not live alone, although this trend may be changing due to the fact that lifestyles are changing in Canada (family structure and work schedules may result in family members not being able to stay at home to take care of family members)

Decision Making

- Sikhs view the needs of an individual in the greater context of the family
- A Sikh patient’s family may have a strong influence on decision making relating to health matters, including informed consent to various medical procedures

Note to healthcare workers:

- Decision-making for health-related issues may include the patient’s/client’s/resident’s family, friends, dependents, or those whom they are dependent upon
- It is important to have a conversation with your patient/client/resident as to how they would like decisions to be made in a one-to-one conversation to ensure that the patient’s wishes are being understood without outside influences
- In the case where there is a language barrier between the patient/client/resident and the healthcare provider, have this one-to-one conversation with an Interpreter present

Some questions you could ask are:

- How would you like decisions to be made in regards to your care and/or treatment?

- What are you worried about in terms of decision-making when it comes to your care?
- Would you like family input in the decision-making process?

Administration of Medicines

Traditional medicines and remedies

- Sikhs may use a variety of traditional medicines and remedies, often in conjunction with Canadian medicine
- Herb and plant products, in addition to traditional treatments such as Ayurveda and homeopathy, have traditionally played an important role in treating illnesses in India and continue to be used today, including in communities in Canada

Medication Restrictions

- There are no religious rules affecting medication, although vegetarian Sikhs may want to avoid medications containing animal, fish or egg product

Clinical examination and procedures

- Health care providers should ask for **permission from the patient or their family before removing** any of the **five articles of faith**, including removing hair from any part of the body, or the turban or scarf
- The removal of the five articles of faith should be done in private (e.g. allowing the patient/client/resident to remove their turban in a private setting)
- Sikh patients may wish to have a **family member present** during any clinical examination
- Sikh patients (both men and women) may prefer to be examined by a health care provider of their **own gender**
- Culturally, sexual health information is considered very private and may not be discussed with health care providers, or in front of family members, and thus may make getting a complete medical history difficult. Try to have this particular discussion in private (**without family present**), and if needed, with an Interpreter of the same gender as the patient/client/resident
- The need for invasive examinations may need to be carefully explained, particularly where a same-sex clinician cannot be accommodated

Maternity services

The Mother

- Sikh mothers may wish to keep the **five articles of faith** on at all times during childbirth. This may require keeping the Kachera (undershorts) on one leg (or tied to one leg)
- Shaving of the perineum may not be acceptable – ask for consent
- Culturally, some Sikh mothers might expect a lying-in period of up to 40 days following childbirth (some families may seek to be secluded for up to 40 days after giving birth **if** they believe this to be a period of impurity (this is a cultural practice rather than a religious belief however).

The Child

- Infants are usually named soon after birth following a ceremony at the temple or at home
- Male infants are **not** circumcised
- **Avoid cutting an infant's hair**. If hair needs to be cut for medical reasons, always ask permission first from the parents. Be aware that this may cause significant spiritual distress.

The Family

- As soon as practical after childbirth, a family member may wish to perform a special ceremony
- As part of the ceremony, the infant is given a few drops of holy water and a prayer is recited
- In some Sikh families, the father will expect to be able to whisper the *Mul Mantra* (Guru Nanak's first poetic statement) into the ear of the new infant (if the father is not present during labour, it is advisable to keep him

updated on the progress of the labour to ensure that he will be able to carry out this wish as soon as possible after birth)

Community Health Services

- Tobacco products, alcohol or meat products should not be taken into Sikh homes
- Sikhs may prefer for shoes to be removed when entering a home

Transplants, organ donation and blood transfusions

- Sikhism supports the donation and transplantation of organs and allows for blood transfusions
- Sikhs are encouraged to help others in need and donating organs is considered a noble gesture

Sexual and reproductive health

Contraception

- Beliefs with respect to contraception vary within the Sikh community
- Some Sikhs do use contraception
- Many Initiated Sikhs will not use contraception

Abortion

- Many Sikhs believe the fetus to be alive immediately upon conception and abortion is not permitted unless there is a serious threat to the mother's life
- Abortion is not permitted on the basis of family planning

Assisted reproductive technologies

- Sikhs are permitted to use assisted reproductive technologies only during the span of marriage
- It is preferred for the husband to provide the sperm. However, if this is not possible, a donor can be used depending on the couple's preference.

Visiting Arrangements

- Visiting the sick is an important cultural and religious practice for Sikhs
- Sikh patients may have a large number of visitors, including those from outside their immediate family

Care of family and older persons

- It is traditionally the responsibility of children to care for ageing parents
- Older Sikhs may live together with extended family
- Sikhism encourages family members to take an active role in the care of other family members
- Health care providers should take this into account when developing care plans or suggesting residential care

Care for the Dying

- A dying Sikh may receive comfort from reciting hymns from the scripture (alone or with a group of family members and/or friends)
- Hymns may be played at the bedside 24/7 (and has occurred throughout the acute care setting)
- Extended family and friends may visit as a sign of respect
- Relatives or family may contact the Gurdwara (or Spiritual Care may contact them if needed)

Beliefs about Death and Dying

- **Reincarnation** is a central tenet of Sikhism (Sikhs believe that all living beings have an eternal soul which passes through successive cycles of birth and rebirth until the soul once again merges with God, through meditation on naam.)
- Sikhs are encouraged to accept death and illness as part of life and the will of God
- Due to the Sikh belief in the doctrine of **karma**, some Sikh patients may be accepting of death

- Family members should be consulted where the situation required treatment to be provided to prolong the final stages of a terminal illness. If it is acceptable to the patient's family, life supporting systems may be disconnected
- Suicide and euthanasia are forbidden in Sikhism

Long-Term Life Support

- Long-term life support is a personal or family choice

DNR Orders

- There are usually no religious objections to DNR orders

Consulting in Advance about End of Life

- Whenever possible, caregivers are advised to consult in advance with the family about their expectations for the care and handling of the deceased. This is to help avoid some of the distress that can occur for both family and providers when last minute accommodations need to be attempted.

Deceased patients

- Health care workers **should not remove the five articles of faith** (including the turban or the scarf) after death
- The patient's family should be asked if it is necessary to remove these items
- Although staff should always ask, it is usually okay for non-Sikhs to touch a dead body
- A Sikh's body should be covered with clean linen and shrouded
- The family may wish to wash and clothe the body immediately after death
- The family may wish to move the body to a funeral home for **cremation** as soon as possible (with the Five Articles of Faith intact)
- The family will immerse the ashes in a running body of water. Some will take the ashes to a sanctified river in India

Autopsy

- There are no Sikh religious objections to autopsy. However, as no hair on the body should be cut or removed, it is usually requested that an autopsy is not performed unless required by BC law
- If an autopsy is required, the **five articles of faith, including hair from any part of the body, should not be removed**

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