

The Healthcare Provider's Guide to Islamic Religious Practices



ACKNOWLEDGMENTS

CAIR-Ohio is a chapter of the Council on American-Islamic Relations (CAIR), America's largest Muslim civil liberties and advocacy organization. Its mission is to enhance the understanding of Islam, protect civil liberties, promote justice, and empower American Muslims.

The information in this guide is designed to assist healthcare providers in developing policies and procedures aimed at the delivery of culturally competent patient care and to serve as a guide for the accommodation of religiously mandated practices of Muslim patients. This guide is not comprehensive; rather, it is intended to serve as a general outline of Islamic practices, beliefs, and customs. As with any religion, the degree of religious adherence varies based on the individual's personal level of religiosity. While this publication embodies information gathered from different sources and literature, it does not necessarily represent the opinions of CAIR-Ohio.

CAIR-Ohio and other CAIR chapters nationwide regularly provide cultural competency trainings for healthcare professionals to understand the unique needs of their Muslim patients and to provide appropriate accommodations when needed. Each year, CAIR-Ohio distributes literature to agencies and other organizations in Ohio to facilitate cultural understanding and foster diverse environments.

Please consider our office a resource for you and your organization. You are welcome to contact us whenever you need help or answers to specific questions. We also encourage you to contact us if you are interested in bringing a workshop or training to your institutions.

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SECTION I: INTRODUCTION

According to demographers, Islam is the world's second largest faith, with more than 1.6 billion adherents worldwide. It is the fastest-growing religion in the U.S. with one of the most diverse and dynamic communities. Representing a variety of ethnic backgrounds, languages, and nationalities, Muslims are adding to the diverse character of patients. Many Muslim patients are new immigrants from various parts of the world and may experience language barriers. Therefore, healthcare providers should take time in explaining tests, procedures, and treatments to the patient and next of kin involved in the decision-making process. In some cases, it may be necessary to arrange for an interpreter.

In order to provide optimal care, healthcare providers need to have an understanding of, and respect for, the beliefs and religious preferences of their Muslim patients. To avoid patient-provider miscommunication, mistrust, and perceived discrimination, healthcare providers should prioritize the patient's needs while respecting his/her autonomy and religious views. When in doubt, healthcare providers should consult with the patient and the patient's family to guide them on religious and cultural needs. It may be beneficial for healthcare providers to seek the assistance of Muslim healthcare providers and staff who can act as liaisons with Muslim patients.

U.S. LEGAL PROTECTIONS OF RELIGIOUS RIGHTS

Prayer, fasting, religious celebrations, dietary restrictions, and clothing requirements are some of the practices and beliefs of members of the Islamic faith. They are considered bona fide religious practices and beliefs, and those who practice them regard them as mandatory religious duties.

The First Amendment to the U.S. Constitution and Article 1, Section 7 of the State of Ohio Constitution obligate government institutions to accommodate the religious beliefs and practices of patients. In private institutions this obligation to accommodate the religious beliefs and practices of patients is mandated by Title II of the 1964 Civil Rights Act and the Ohio Revised Code Chapter 4112.

ISLAMIC VIEW ON ILLNESS AND TREATMENT

Muslims consider illness, like other life hardships, as a test from God, and often respond with patience and prayers. Islam has a spiritual and societal dimension with defining principles that safeguard human rights, honor, dignity, and the preservation of life. Trying to maintain good health is essential; as such,



Tip: Mental health providers are encouraged to connect with a local Imam or Muslim organization for assistance in serving Muslim patients.





a believer must seek medical aid to bring about cure and recovery, if at all possible. According to one saying of Prophet Muhammad, "no disease has been ordained except that it has a cure."

PERSPECTIVES ON MENTAL HEALTH

American Muslims generally adhere to the dominant biomedical model of mental illness. A lack of understanding of the Islamic beliefs and rituals of Muslim patients by healthcare providers may be an impediment in establishing a therapeutic relationship. Some patients prefer to seek counseling from their Imam – an Islamic spiritual leader. A person diagnosed with severe mental illness or intellectual disability is absolved from all religious obligations in Islam.

HYGIENE

Islam places great emphasis on hygiene in both spiritual and physical terms. In addition to the ritual cleansing before prayer, Muslims also follow other hygiene-related rules, including:

- · Washing with water after urination or defecation
- · Removing underarm and pubic hair
- · Keeping nostrils clean
- · Keeping fingernails trimmed and cleaned
- · Taking a full bath/shower, or ghusl, after seminal discharge, sexual intercourse, after menstruation, or post-natal bleeding

Tip: A small container, such as a cup, bottle, or beaker, can be placed near the toilet to assist with washing. For a bedbound patient, a beaker of water or sanitary wipes are suitable for washing after use of a bedpan.

ABLUTION - RITUAL WASHING

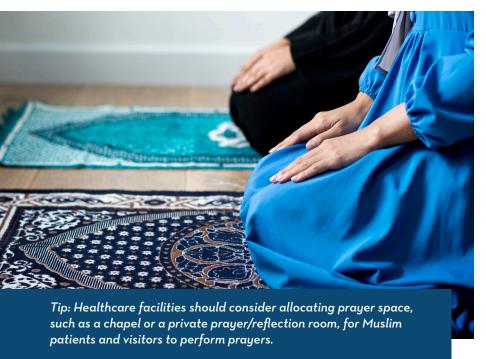
Before prayer, Muslims rinse their mouth and nose and wash their hands, face, arms, and feet with water. This is called wudu, or ablution, and it is intended to physically cleanse the person before prayers are performed. It is performed in a restroom or another facility with running water and takes about two minutes. In hospital settings, some patients may require assistance with washing. The procedure may also take longer depending on mobility limitations.

Patients with severely limited mobility may perform tayammum, or a symbolic ablution using dry earth, if no one is available to assist. Tayammum can also be performed when there are areas of the body that cannot come into contact with water for medical reasons, such as over a cast or bandage. The most common performance of tayammum involves patting the hands on clean, dry earth, sand, or rock and then wiping the face and both hands.

DAILY PRAYER

Islam urges Muslims to lead a "God-conscious" life. To that end, Islam prescribes that believers perform five daily prayers. Each prayer takes five to ten minutes and is completed during the following periods, which are based on the position of the sun:

- 1. Fajr: Dawn, before sunrise
- 2. Dhuhr: Midday, after the sun passes its highest point, until late afternoon
- 3. Asr: Late afternoon until just before sunset
- 4. Maghrib: Sunset until full darkness
- 5. Isha: Darkness until midnight



The prayer itself includes specific recitations from the Qur'an and physical components of standing, bowing, and prostrating; all prayers are performed while facing towards Mecca (which is in the general northeast direction in the United States). Muslims may pray on a prayer mat or rug. During prayers, patients cannot respond to questions and will wait to respond until prayer is finished. In the event of an emergency, Muslims will, of course, stop their prayer to respond. Individuals with limited mobility may use a chair to complete some of the physical components of prayer. Patients who cannot stand, sit, or kneel may pray using head motions or eye motions while lying down. Women are exempted from prayer during times of postnatal bleeding or menstruation.

Hospitalized patients and individuals in nursing homes may ask to be alerted of prayer times to fulfill this religious duty. Relatives and friends who visit patients at prayer times would appreciate it if healthcare providers could inform them about the nearest chapel or other designated spaces

where prayers can be offered. These spaces should be clean, quiet, and dry, and should preferably offer some privacy; if possible, the prayer space should be free from images of people or religious icons. It should be large enough for Muslim worshipers to stand, bow, kneel, and prostrate.

FRIDAY/JUMU'AH PRAYER

Friday is the day for congregational prayer, or Jumu'ah. It is customarily understood to be mandatory for men and highly encouraged for women to attend. Jumu'ah lasts around one hour and takes place at the mosque during the midday prayer. It includes a khutbah, or sermon, delivered by the Imam. After prayer is complete, the worshiper will continue with the rest of his/her day. For the exact timing of Friday prayer, contact a local mosque or Islamic center.

Sick persons are not required to attend congregational prayer. However, many Muslim patients, who are not contagious, may still wish to attend Jumu'ah in order to benefit from the khutbah and to connect with their community. Seniors in nursing homes would benefit from assistance in traveling to the nearest mosque for Jumu'ah prayers. Mosque administrators may be willing to help arrange for transportation and accommodation for the elderly or those with limited mobility.

ISLAMIC HOLIDAYS

Islamic holy days and festivals are determined according to the lunar calendar. Like the solar calendar, the lunar calendar has twelve months. However, a lunar month, marked by the appearance of a new crescent moon on the horizon, may last only twentynine days. A lunar year is about eleven days shorter than the solar year. This means that Islamic festivals occur about eleven days earlier each year and that the dates for significant holidays will change according to the Gregorian calendar.

The major celebrations common to all Muslims are two Eid (Islamic festival) days. The first Eid day is celebrated on the day after the month of Ramadan (the month of fasting) and is called Eid al-Fitr (translated as the Festival of the Breaking of the Fast). The second is celebrated on the tenth day of the twelfth Islamic month and is called Eid al-Adha (Festival of Sacrifice). Eid al-Adha coincides with the timing of Hajj, the annual Islamic pilgrimage. Because the occurrence of Eid depends on the sighting of the new moon, the exact date cannot be determined with certainty until a few days before the holiday.

Eid festivities include congregational prayer, gatherings with family and friends, and gifts and entertainment, especially for children. A typical greeting on these occasions is "Eid Mubarak" or "blessed Eid." Another acceptable greeting is "happy Eid." Since Eid days are devoted to spending time with family and friends, elective medical tests and other procedures should be scheduled around these holidays whenever possible. Hospital administrators should consider adding Islamic holidays to their calendars.



Tip: It may be beneficial to consult with local Islamic centers for the exact dates.



SECTION II: ISLAMIC PRINCIPLES AFFECTING HEALTHCARE

RAMADAN FASTING

The month of Ramadan, the ninth month of the Islamic lunar calendar, is the time when Muslims are required to fast. Fasting during this month is compulsory for all healthy Muslims who have reached puberty and who are physically and mentally fit. The dates of this fast change each year, so Ramadan will eventually rotate throughout the full solar calendar.

Ramadan is a period of self-restraint and a time to focus on moral conduct and one's relationship with God. During this month, Muslims refrain from eating, drinking, and sexual activity from before dawn until sunset. It is recommended for Muslims to consume a pre-dawn meal before fasting the whole day.

Generally, an illness exempts a person from fasting if the performance of the fast would exacerbate the illness or condition. Exemptions to fasting also include menstruation, postpartum, travel, and severe illnesses; pregnant and breastfeeding women are exempt if fasting poses a risk to their health or the health of the fetus. Each situation needs to be judged on its own merits; fasting should not become harmful, detrimental, or injurious to one's health. Fasting does not inhibit the provision of emergency medical care.



The following medications/medical treatment will not break a Muslim's fast:

- · A drop in the eye or the ear, ear washing, nasal drops or puffing, provided that the liquid reaching the throat is not swallowed
- · Tablets placed under the tongue to treat a chest angina or any other illness, provided nothing is swallowed
- · Anything introduced into the uterus, be it suppositories, bath water, ureteroscope, intra vaginal auscultation, or an intrauterine device (IUD) or any other similar device
- · Anything introduced into the urinary tract of a man or a woman: probe, ureteroscope, radio-opaque substances, solutions for cleaning the bowel
- · Tooth extractions, dental fillings or cleanings, and cleaning one's teeth with a toothpick or a toothbrush, provided nothing is swallowed
- · Mouthwash, gargle, mouth-spray, provided nothing is swallowed
- · Subcutaneous, intramuscular or intravenous injections, excluding any perfusions or injection of nutritious fluids (serums)
- · Oxygen, inhalers, nasal sprays, and patches
- · Anesthesia by vaporization and intravenous injections, provided nutritious fluids are not injected to the patient
- · Whatever penetrates into the body through the skin, like creams, ointments, or cutaneous patches containing medicinal or chemical substances
- · Introduction of a catheter for coronagraphy of heart vessels and other organs
- · Biopsy of the liver or other organs without administration of any solutions or liquids
- · Fibroscopy, laparoscopy, or gastroscopy without absorption of liquids or other substances
- · Introduction of any instrument or substance into the brain or spinal cord for treatment
- · Involuntary vomiting
- · Injections and blood tests
- · Physical examinations including rectal and vaginal examinations for medical purposes
- · Pessaries, douches, and suppositories

The following medications/medical treatments will break a Muslim's fast:

- · Any medication or medical treatment administered as a supplement for the purposes of providing nourishment
- · Any medication purposefully swallowed
- · Induced vomiting
- · Kidney dialysis

Tip: Patients struggling with eating disorders, such as anorexia nervosa or bulimia, should be closely monitored during Ramadan fasts.

DIETARY RESTRICTIONS

Islam has specific rules about the types of food that are permissible (halal) and impermissible (haram). The Qur'an prohibits consumption of alcohol, pork, and any pork by-products or derivatives. Therefore, practicing Muslims are careful about the food they consume and how it is prepared. Some Muslims follow halal standards in the slaughter and preparation of meat and poultry, which are similar to Jewish kosher preparations but are not interchangeable.

Tip: Healthcare centers can order halal food options from certified halal food providers. If this is not possible, patients must be given choices that meet Muslim dietary requirements such as vegetarian, eggs, diary, and fish.



Some objectionable food items include:

- · Pork, pork by-products, or any food items containing pork or pork by-products
- · Gelatin and lard
- · Lipase and pepsin
- · Blood and blood by-products
- · Alcohol and food prepared with alcohol

Most varieties of fish are considered halal by default and are generally consumed by most Muslims in place of meat options.

Many medications such as cough syrups often contain alcohol; if possible, alternatives to these medications should be provided. For example, the pediatric formulations of most cough syrups do not contain alcohol and can be given to adult patients once dosage is adjusted. If no suitable alternative is available for medicines or vaccines of porcine origin or medicines containing alcohol, then Muslim patients must be made aware of the medicine's or vaccine's origins and contents, so they can make an informed decision.

Tip: Physicians should avoid prescribing medical pills coated with porkextracted gelatin.



DRESS, MODESTY, & PHYSICAL CONTACT

Islam prescribes that both men and women behave and dress modestly. Muslims believe that an emphasis on modesty encourages society to value individuals for their wisdom, skills, and contribution to the community, rather than physical appearance. There are several ways in which Muslims express such teachings, varying widely by culture and individual practices. Staff and administration should ensure that all healthcare providers respect the diversity of the Muslim community and the variations in how these practices are observed.

Many adults past the age of puberty place certain limits on relations between members of the opposite sex. For example, some Muslims prefer not to shake hands or hug people of the opposite sex. In some cultures, prolonged eye contact between individuals of the opposite sex is considered rude. This should not be taken as an insult, but instead regarded as a sign of personal modesty and politeness. Muslim women tend to prefer an all-female attendance (physicians, midwives, doulas, nurses, etc.) during childbirth. However, it is permissible in Islam for male healthcare providers to attend to a pregnant woman. There is no Islamic teaching that prohibits fathers from attending the birth of their child; this is left up to personal choice.

Muslim patients may request their medical examinations or procedures to be performed by healthcare providers of the same sex. If a healthcare provider of the same sex is not available, healthcare providers should show great sensitivity, understanding, and respect for modesty concerns. Alternatively, Muslim patients may seek the presence of a family member or friend during these examinations or procedures. Healthcare providers should always be ready to explain the need for more invasive medical examinations, if the need arises.







Tip: Doctors and nurses should not demand the removal of any piece of clothing unless there is a clear need for it.

Tip: If hospital gowns do not provide the level of modesty the Muslim patient prefers, he/she might wear additional clothing, like a cardigan, to accommodate. In such circumstances, communication between providers and patients is key.

Tip: Staff may hang a "please knock" sign on the patient's door, as to allow the Muslim patient the opportunity to cover before someone enters the room.

For Muslim Women

When in public, Muslim women often wear loose-fitting, non-revealing clothing and a headscarf known as a hijab. This attire, which may vary in style, usually includes covering the hair, neck, and body. Depending on personal preference, some women also opt to completely cover their hands and feet; to wear long skirts, rather than trousers or pants; or to wear loose-fitting robes, such as abayas. Some Muslim women may wear a face veil, commonly referred to as a niqab. As with any religion, the degree of religious adherence varies based on the individual's personal level of religious observance.

For Muslim Men

Muslim men, like women, are usually reluctant to expose their body for physical exams. Requesting permission before uncovering any part of the body and exposing as small an area as possible is highly recommended. Some Muslim men may wear a small head covering, called a kufi. Many men choose to grow beards for religious reasons.

CHILDBIRTH AND NEWBORNS

Following prophetic tradition, Muslim parents whisper the Adhan (the call to prayer) into the right ear of a newly born baby, which takes no more than 5 minutes. This ensures that the first words the infant hears are an invitation to follow God. Another Islamic tradition, called Tahneek, that is performed shortly after birth involves placing something sweet (e.g., dates) on the infant's palette. Additionally, Islam recommends that mothers breastfeed their children for up to two years of age.

Circumcision is required only of male babies and usually takes place within the first seven days of life, unless a medical reason requires the procedure to be postponed. Islam strictly prohibits the practice of female circumcision or genital mutilation. Religious authorities agree that this practice is irreligious and should be eradicated where it occurs. If providers are faced with such a request, local Muslim leaders may advise the family and educate them about the matter.

ASSISTED REPRODUCTIVE TECHNOLOGIES

Artificial reproductive technology and procedures, including in vitro fertilization (IVF), are only permissible between husband and wife during the span of an intact marriage. The use of donor sperm is strictly prohibited in Islam. The use of sperm that has been cryopreserved is prohibited if the father has died. Surrogacy involving a third person is not permissible.

ABORTIONS, CONTRACEPTION, & STILLBIRTH

In Islam, abortion is prohibited; however, there are exceptions to this rule. For example, religious authorities all agree that abortion is permissible if continuing the pregnancy threatens the mother's life or health. Additionally, abortion is permitted if the pregnancy was a result of rape or incest. Some schools of thought permit abortion in the early stages of fetal development, particularly when the pregnancy is less than 120 days old, because they believe that fetal viability is not possible at this stage in the pregnancy. For many schools of thought, the death of a fetus past the age of 120 days is considered the death of a viable baby.

In the event of a miscarriage, intra-uterine death, or stillbirth of a fetus past 120 days, Muslim parents may wish to observe full funeral rites.

Contraception is permitted, provided that it is mutually agreed upon between husband and wife. Permanent contraceptive methods, such as vasectomies and tubal ligations, are allowed only when the woman's health is at risk from additional pregnancies and when a genetic disease of the husband or the wife poses high risk of being transmitted to the fetus.

EMBRYO AND STEM CELL RESEARCH²

Embryonic experimentation, genetic testing, and cord blood and stem cell research are acceptable in Islam under certain conditions.

The Islamic position on stem cell research can be outlined as follows:

- Fertilized eggs are not considered fully human before development (3-month point) and implantation, since the fertilized egg would not survive and develop into a human being without implantation.
- The supernumerary embryos produced through IVF cannot be donated to other couples; when they are not used by the original couple, they are left to die/be destroyed. Rather than destroy them, it is preferable that they be used for stem cell research.
- · Creating human embryos for the sole purpose of research is prohibited.
- Cord blood banking is permissible with the permission of the parents.



- Fetuses intentionally aborted without legal and/or medical reasons;
- Intentional fertilization between a donated ovum and donated sperm; and
- Therapeutic cloning.

Stem cell research may only be conducted on stem cells derived from the following:

- · Frozen embryos that were created for the purpose of IVF and would otherwise have been destroyed
- · Adults who consent as long as it does not inflict harm on the adults
- · Children whose guardians consent for a legal benefit without inflicting harm on the minor
- · Placenta or umbilical cord blood, with the permission of the parents
- · Spontaneously aborted embryos, or those aborted for an acceptable cause, and with parental permission
- · Excess fertilized eggs produced during the course of IVF and donated by the parents, as long as they are not used to produce impermissible pregnancies (as noted above in "Assisted Reproductive Technologies")

Tip: Consult with the patient and his/her family or guardian regarding blood transfusions, transplant options, and organ donations.

BLOOD TRANSFUSION AND ORGAN DONATION

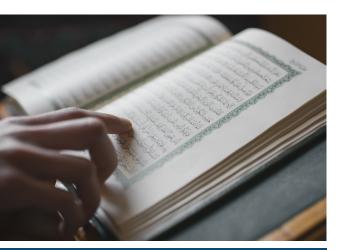
Blood transfusions are permissible. However, some patients may prefer direct blood donations from family members instead of anonymous donors.

Organ Donation is permissible but has to be done under the following guidelines:

- · Consent from the donor and the recipient must be obtained.
- · No commercial dealing of the organs sale of organs by any party is forbidden.
- · No permanent harm to the donor must occur.
- · Donation of sperm or ovum is not permitted.
- · Transplant of sex organs is forbidden.
- · Cadaver donation is permitted if mentioned in the person's will.
- · Transplant of an organ from a dead person is permissible if specified in their will.







Tip: In the event that the family cannot be present, a local Islamic leader can console the patient.

Tip: Healthcare providers should encourage their dying patients to put all their requirements about the funeral and burial in writing.

Tip: Healthcare providers should discuss advanced care planning and end of life issues with patients and their families.

SECTION III: DEATH & DYING

PALLIATIVE CARE

Caring for the seriously ill is more than just reducing pain and suffering; it is also about easing the transition between life and death.

Because Islam recommends and obliges Muslims to seek treatment when they fall ill, medications and medical technology should be used to enhance a patient's quality of life whenever possible. Islam forbids any acts that expedite death of the patient. However, maintaining a terminal patient, who is in a vegetative state on artificial life support, for a prolonged period is also not encouraged. In times of uncertainty, consulting an Islamic scholar or leader and a specialist physician is always an option.

SPIRITUAL CARE

Spiritual care is vital in caring for Muslim patients because it ensures a sense of calmness and well-being. Muslims will ask God for His help during these difficult times; they seek increased patience, forgiveness, peace, and gratitude. Reciting or listening to the Holy Qur'an is believed to enhance psychological and spiritual health. Consequently, Muslims will keep a copy of the Holy Qur'an to read or listen to on their electronic devices.

WILLS & TESTAMENTS

Islam places great importance on both the laws of inheritance and to create a valid will and testament. Healthcare providers should encourage their dying patients to put all their requirements about the funeral and burial in writing. They should discuss advanced care planning and end of life issues with patients and their families.

DEFINITION OF DEATH

A person is considered dead when:

- · A physician has determined that the cardiopulmonary function has come to a permanent stop.
- · A specialist physician has determined that the function of the brain, including the brain stem, has come to a permanent stop.

Islam does not require treatment to be provided if the treatment merely prolongs the final stages of a terminal illness. Under these circumstances, it is permitted to disconnect life support devices even if they are used to prolong organ function. However, no attempt should be made to withhold nutrition and hydration. The patient's family should be notified if death is imminent, as Muslim families may want to be present during the patient's last moments.

PHYSICAL CARE AFTER DEATH

The body of the deceased Muslim must be handled in a dignified manner and as gently as possible. After a Muslim dies, a ritual washing of the body, called the ghusl, is performed by a group of men or women (corresponding to the sex of the deceased) before the funeral and burial. Muslim funerals and burials are usually held as soon as possible after death. If autopsy is performed all incisions should be sutured. All tubes, leads, etc. should be removed before releasing the body to the funeral home.

FUNERALS

As mentioned, when a Muslim dies, funeral planning and preparations for burial begin immediately. The Imam or local Islamic organization should be contacted as soon as possible to begin preparations for the janazah, or funeral service. Cremation is not permitted, and embalming should not be performed unless required by law. Many patients have a provision in their wills or end-of-life directives that specify where they will be buried and who should handle their funeral and burial.

Tip: If no relatives or friends are available, healthcare providers should contact a local mosque, Islamic leader, or a CAIR chapter.

AUTOPSIES

Islam discourages the performance of autopsies as they delay burial and are considered disrespectful to the dead. However, if required by law or in the performance of a criminal investigation, an autopsy is permissible. Similarly, in cases where the cause of death is in question, an autopsy may be performed. Healthcare providers should consult with the family of the deceased before proceeding with an autopsy.

ASSISTED SUICIDE AND EUTHANASIA

Islam opposes the practice of assisted suicide, as the Qur'an teaches that God is the ultimate giver and taker of life. For a physician to take an active role in ending a patient's life and hasten oncoming death is viewed as an act of killing, which is a forbidden in Islam. Suicide, when committed by one who is mentally stable, is also viewed as a grave sin. In medically futile situations where life support equipment is used to prolong organ function, the condition needs to be carefully explained to the family to ensure there is no confusion between "do not resuscitate" orders and euthanasia.



Tip: Healthcare providers should consider this heightened level of family involvement when developing healthcare plans with patients.

Tip: Healthcare providers should discuss with the patient, and/or the family, the ability to accommodate a large group of visitors.

SECTION IV: COMMUNITY HEALTH SERVICES

FAMILY UNIT & VISITING ARRANGEMENTS

Islam promotes guidelines for a healthy family unit and societal relationships. As such, Muslims have a close-knit nuclear and extended family structure. Children serve as caretakers of their elderly parents, and even elderly relatives and friends. Family consultations are important in the Muslim patient's decision-making process.

Islam encourages visiting those who are ill. Many Muslims consider this a communal obligation. Thus, it is common for Muslim patients to have many visitors, including friends and extended family.

IMAM/MUSLIM CHAPLAIN

Healthcare providers should discuss availability of chaplaincy services with patients. If suitable chaplaincy services are not available, a local CAIR chapter can assist healthcare providers with establishing appropriate services. A Muslim Chaplain can provide the following services:

- · Prayer services
- · Qur'an recitation
- · Educating on Islamic perspectives
- · Visiting the sick and praying for the sick
- · Overseeing funeral services
- · Counseling on ethical and religious obligations and medical decisions
- · Cultural broker assisting with communication barriers between patients, their families, and providers
- · Reciting the Adhan in a newborn's ear
- · Praying for the deceased
- · Providing spiritual support

HOME VISITS

If healthcare providers are required to perform home visits for Muslim patients, same sex healthcare professionals should be selected. In the event that this cannot be arranged, the Muslim patient may seek the presence of a friend or family member during the healthcare provider's visit. It is advisable for healthcare providers to be modestly dressed when visiting their Muslim patients. As Muslims often pray on carpeted areas, visiting healthcare providers should ask if their shoes should be removed before entering the carpeted area (or more generally, the home). If this is not permissible for workplace and safety reasons, alternatives should be explored (e.g., wearing plastic shoe covers or bringing an alternative pair of shoes that have not been worn outside).

SECTION V: GLOSSARY OF ISLAMIC TERMS

TERMS DEFINITIONS

Abaya A long, loose fitting dress or gown with long sleeves - often black

Adhan Call to prayer

Allah Arabic word for God

Asr The time from late afternoon until just before sunset

Dhuhr Midday, after the sun passes its highest point, until late afternoon

Eid Islamic festival/celebration

Eid al-Adha Festival of the Sacrifice; Muslim holiday celebrated on the tenth day of the twelfth

Islamic month, coincides with the timing of the Hajj

Eid al-Fitr Festival of the Breaking of the Fast; Muslim holiday celebrated on the day

after the month of Ramadan

Eid Mubarak Typical Eid holiday greeting, meaning "blessed Eid"

Fair The time from dawn until just before sunrise

Ghusl Ritual bath or shower
 Hajj Pilgrimage to Mecca
 Halal Permissible by Islamic law
 Haram Not permissible by Islamic Law

Hijab Clothing Muslim women wear in public; generally loose fitting and includes

a head covering

IftarMeal eaten after sunset to break fastImamReligious leader of a Muslim communityIshaThe time from darkness until midnight

Janazah Funeral

Jumu'ah Weekly congregational prayer on Fridays

Khutbah Sermon

Kufi Cap worn by some Muslim men

Maghrib The time from sunset until full darkness

Mecca Holy city located in Saudi Arabia; Muslims make pilgrimage to and pray

facing towards Mecca

Qur'an Islam's revealed scripture, sometimes spelled Koran

Ramadan The month of fasting; period marked by abstaining from consumption of food

and drink from sunup to sunset and by increased prayer and charity

Salat Daily prayers

Sawm Fasting during Ramadan

Shahada Declaration of the belief in God and Prophet Muhammad as the final prophet

Suhoor Meal eaten before dawn which precedes a day of fasting

Tayammum Dry ablution (using clean earth) performed when water is unavailable or unfeasible to use

Tahneek Putting something sweet on the infant's palette after birth

Wudu Ritual ablution or washing before daily prayer

Zakat Charity



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CAIR-Ohio is a chapter of America's largest Muslim civil liberties and advocacy organization. Its mission is to enhance the understanding of Islam, encourage dialogue, protect civil liberties, empower American Muslims, and build coalitions that promote justice and mutual understanding.