**INTERCULTURAL CARE**

**IN THE SOCIAL AND HEALTHCARE SECTOR**

**(I-CARE)**

**module 3 Eating, Drinking, Celebrating & Fasting**

**www.i-care-project.net**

**Project Information**

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* KEY TO SYMBOLS

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|  | **TRAINER INPUT** | X:\A. ACTIVE PROJECTS\2018 KA2_AE_NO ALTERNATIVE FACTS_UK\IO2 Train the Trainer Format\icons for modules\knowledge.png | **ACTION PLAN** |  |  |

# Introduction (The Rationale)

This module explores attitudes to eating, drinking, celebrating, and fasting across cultures.

## Module Aims and Objectives

The purpose of this module is for learners to:

* Know the main basic information about food traditions in different cultures
* Have the awareness of the connections between these traditions and religion
* Have an increased understanding for traditions and why they can be important for your clients /patients
* Understand that the focus in care is always on the individual, no matter which cultural or religious background a person has
* Have practical insights on how they can support their clients in practising their religious/cultural traditions or rituals

**Learning Outcomes**

After studying this module, you will be able to:

* Identify the different food traditions and fasting rules in the main world religions
* Discuss with others, personal cultural attitudes to eating, drinking, celebrating, and fasting, and how these may be similar or different to others
* Ask questions of those you are caring for, to better understand what specific needs they have to follow their traditions and how to find practical ways to support this

## Understanding, Skills and Competences developed:

* Intercultural Awareness and Skills: Awareness on religious/cultural traditions and understanding their benefits for clients
* Life Skills: Knowledge on practical support of clients to follow their traditions
* Social Skills: Communication skill; knowing how and when to ask which questions to guarantee respectful & culturally sensitive care
* Personal Skills: showing empathy
* Competences: intercultural competences, competence to live and develop in a diverse society

## Training method applied/ What you have to do

This module is available as e-learning and can also be delivered face-to-face in a classroom, or with a class via a virtual platform.

It involves

* Reading background information on the subject of the module
* Completion of exercises and activities either by e-learning or attending a face-face course, or via a virtual platform
* Exercises for reflection and checking understanding

## Duration: 2 hours

## Further Reading

You will also find a range of supporting resource materials for further information, available in the **I-CARE Toolbox** and on the **I-CARE App.**

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# Section 1: Dietary rules and the meaning of fasting in the world religions

# Trainer input Introduction *‘...When it comes to a hospital stay or a stay in a health resort or even when it comes to moving to a retirement home - there are many questions about food that concern Muslims.*

# *For example, I know people who take whole suitcases of food or cool bags with them [when they have to go to hospital or to a health resort] because they fear that they cannot or do not want to eat the food there. But this doesn't just affect Muslims. It also affects people of Jewish origin. There are many parallels between kosher and halal food preparation. The most common is the rule concerning pork, but there are also numerous religious subgroups - and they all have their own rules for dealing with it.*

# *It is difficult for conservative, strictly devout Muslims, because there are also rules regarding food preparation - pots, cutlery, glasses must not have come into contact with forbidden food. About 20 years ago, I organised an Iftar meal for 300 women in a community centre. The food was supplied by a Turkish restaurant. We had borrowed the glasses from the neighbouring Chinese restaurant. Well, that was a problem! The women didn't want to drink from these glasses! It could have been that wine was once served in them. So I ran to the supermarket and got plastic cups. I [note: Muslim myself] was not prepared for that either.*

# *.... When staying in hospital, there is little choice for Muslim patients when it comes to food. As a result, many have their food brought by relatives. I don't know if the hospital staff are always very happy about this. Or sometimes it might bother the other patients in the room - because of the smell...I have the feeling that more could be done in hospitals to accommodate such groups of people who eat halal or kosher food....*

# *Social worker, Vienna, Austria*

Trainer’s Notes (slide 3, 4. 5. 6)  
Start this module by reading out the short text above, to get the learners thinking about the different dietary needs in different religions and how this can influence health care services. Ask them if they have experienced anything like this either personally or with their patients or clients.

Mention that knowledge about traditions and religious rituals **can** **not be used like a recipe**, since there are also differences between people of the same religions. Not every Muslim adheres to the strict guidelines. But a basic knowledge of different rules in different religions can help lead to an increased understanding of the needs of patients, especially when working with older people.

Lead a discussion by asking your learners the following questions. After this discussion you continue with the presentation on nutrition in connection with religion.

Activity – Think about these questions: (slide 6)

* How can we meet certain nutrition needs in care situations?
* How can we react in in situations, when these habits or rules cannot be followed due to medical indications and for treatment reasons?
* How should we act?
* How should we explain to the patient?
* How do we explain it to the family of the patient?

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Description automatically generatedTrainer input (slides 7, 8, 9, 10, 11, 12,)

There are dietary rules in every religion. They apply to everyday life and to feast days and fasting periods, and in some religions also to the way food is prepared. Some rules are for respecting animals. Others are meant to commemorate an event or a person, to promote health, to encourage reflection, or to train self-control. Some religions have their own words for permitted foods and other things. Muslims, for example, prefer to eat halal and Jewish people, kosher.

For devout Muslims, some foods are forbidden. These include, for example, pork and meat (including beef) from dead animals that have not died naturally or by slaughtered in a certain way. This must be done by throat cutting. **If these animals are slaughtered in this way, it is called “halal” = allowed.** The prohibitions also include the blood and animal products from pigs, such as lard, fat or gelatin. These may be found, for example, in some types of cheese and in some sweets. Alcohol is also banned. In order to provide a diet that complies with the Islamic dietary requirements, possible animal additives should be listed in menus.

Jews must never eat some foods and must not combine others together. This applies especially to meat and milk, and anything made from them. Other foods are forbidden at certain times. The method of preparation is also important. Many foods and menus must be produced, processed, and prepared in a special way. There are also rules for the storage of supplies and for the handling of dishes. **Kosher - what is pure and suitable?** They may be prepared with milk, cream, cheese, or other dairy products. Two basic rules: Meat and other animal components must come from "permitted" animals. 2. Dairy and meat are separated.

For many Hindus, a meal is also an important part of their religious life. Depending on the denomination and stage of life, certain rules of eating apply: Beef is taboo for Hindus, because cows are sacred animals in Hinduism. Many Hindus are vegetarians and therefore do not eat any dish that contains meat or other ingredients from an animal, because Hindus believe in eternal rebirth. According to this belief, a person's soul can also be reborn in an animal. Therefore, many Hindus do not want to kill an animal. Hindus wash their hands before every meal, because eating is a religious act for Hindus, and this always includes cleanliness. It is also about practical hygiene, because many Hindus eat without cutlery, with their right hand.

Buddhists have no uniform rules about what food they should and should not eat. Their main concern is not to waste food. Therefore, they should eat only when they are hungry and only enough to fill them up. In addition, it is forbidden to simply throw away or let food that is still edible go to waste. A precept of Buddhism forbids inflicting suffering on animals. This includes not slaughtering an animal just to eat it. Therefore, many Buddhists are strictly vegetarian. Others, however, do not abstain completely from meat. What else is put on whose table depends above all on the individual religious community and the place of residence of a Buddhist.

Generally speaking, there are no specific rules or restrictions for Christians regarding food and diet, although some denominations prohibit alcohol and others may have periods of fasting.

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Description automatically generatedTrainer’s notes (slide 13)  
Introduce the table on slide 13 and divide the group into pairs and ask them to decide which term would refer to which dietary restriction. There are others that are not mentioned in the input on different religions, ask the group to make guesses about these if they do not know and then take the answers from the pairs and discuss.

Activity– What matches? (slide 13)

Give some terms which describe nutrition habits – such as “halal”, “kosher”, “vegan”, etc. and let people find the correct definition.

This activity is to understand different concepts of diet, whether or not they are connected with a religion.

|  |  |
| --- | --- |
| This means, meat is allowed if the animal has lived as species appropriate as possible and has been slaughtered by throat cutting. | halal |
| The name for the Jewish dietary law is…. | kashrut |
| Meat, sausage and other animal components must come from "permitted" animals. Dairy and meat are separated. | kosher |
| In addition to the purely plant-based diet, eggs and milk are also allowed | ovo-lacto vegetarian |
| Any animal products are avoided in this diet | vegan |
| Dairy products/products with lactose must not be eaten | lactose intolerant |
| Fruit juices and dried fruits should be avoided. Likewise, anything sweetened with fructose or sorbitol. | fructoseintolerant |
| Alcohol and pork for Muslims are…. | haram |

*Option 2:* Prepare some cards with the terms:

* halal
* kashrut
* kosher
* ovo-lacto vegetarian
* vegan
* lactose intolerant
* fructose intolerant
* haram

Ask participants to explain these terms. A variation of this can be done in the form of a “taboo” Quiz, which means that people explain one term to the group, but are not allowed to use certain keywords to explain it. These keywords have to be listed by the trainer in advance.

e.g. term: **halal**

**Keywords forbidden to mention** in the explanation: butcher, blood, pork, cut

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Description automatically generatedTrainer input (slides 15, 16, 17,)  
**The meaning of fasting**. The practice of spiritual fasting builds focus and awareness. As such, the spiritual benefits of healthy fasting include a stronger sense of one’s connection with the universe. Spiritual fasting aims at making people feel less self-centered. It is a way to free oneself from the confines of what someone wants or thinks he/she needs. This is the definition of fasting in the spiritual way. Fasting is practiced in various religions in different ways and at different opportunities. In combination with medical problems, religious fasting can have negative effects on the general condition of patients. Therefore, it is important for the medical and care staff to inform about the possible risks as a consequence of fasting. In most religions, health takes precedence over the requirement to fast.

**Fasting in different religions**  
**Islam** Ramadan is the fasting month of Muslims. For 30 days, they are not allowed to eat, drink or smoke between sunrise and sunset. Sexual intercourse is also prohibited. The breaking of the fast in the evening takes place in larger groups - so Ramadan has a strong family and community-building character. Excluded from this duty are: The old, the sick, the weak, travellers, pregnant women, women who have recently given birth and menstruating women.   
**Judaism** In Judaism, there are various fasting periods. No one is allowed to completely abstain from food and drink for more than 25 hours at a time, because health comes first. **Yom Kippur** is the great Day of Atonement and fasting in Judaism. On this day, people are not allowed to eat, drink or smoke. One does not wash, is sexually abstinent and does not go to work.  
**Orthodox Church** In the Orthodox Church there are four fasts of several weeks in the church year: seven weeks in Passiontide, the Apostles' Fast one week after Pentecost, the Koimesis Fast in August and the Advent Fast from mid-November to 24 December. In addition, fasting takes place on every Wednesday and Friday. Meat, eggs and dairy products are forbidden on all fast days, as well as fish, wine and oil on strict fast.  
**Hinduism** Many Hindus fast to atone for something and to purify the soul, to ask a blessing for someone or to honor a deity or to be close to it. Who fasts when, for how long, and in what way is decided by each individual. Fixed fasting times or fasting rituals are not prescribed in Hinduism.  
**Buddhism** Buddhists do not have uniform fasting periods like other religions. They vary from one faith and country to another. Certain traditions, for example, Zen Buddhists believe that eating little, however, facilitates meditation on the path to inner peace and enlightenment. That is why Buddhist monks and nuns abstain from all food after noon every day. In addition, there are monthly fasting days.   
**Christianity** For Christians, Lent or Passion lasts from Ash Wednesday to Easter. During this time, people are supposed to reflect anew through abstinence, do penance and seek closeness to God. Today, however, there are no longer strict rules. Everyone can decide for themselves how they want to organise Lent.

Practical tips for professionals. Every patient is an individual with his or her own history, personality and worldview. There is therefore no all-encompassing "checklist" for dealing with patients of different religions. But you can consider the following aspects when it comes to **nutrition and dietary** rules: dietary habits and special diets or food intolerances should be recorded in the **medical history;** In order to enable a diet that complies with the nutritional requirements, **possible (animal) additives should be stated on any menus; Medication issues**: e.g., Muslim patients may refuse medication that contains animal products (e.g., gelatin in capsules, heparin) or alcohol. In general, it should be pointed out in such cases that things that are forbidden per se are permitted for healing and therapy if there are no alternatives. If alternatives exist, they should be used; Always try to **involve the family** and inform them in case of necessary nutrition or dietary issues; In case of religious concerns, it can be helpful to involve the **hospital chaplain, or another representative of the religious community** concerned to solve the problem.

Trainer’s Notes (slide 18)  
After the input on fasting, divide the group into pairs to discuss the following questions. Take feedback from the pairs and develop the discussion to learn about any specific experiences.

Activity: Self-reflection/pair activity (slide 18)

Think about the context you are working in:

* How can you find out about patient’s needs regarding food traditions or rules?
* What opportunities are there in your organisation to address these needs?
* What would you need to better address the individual needs of patients/clients?

Trainer’s Summary (slide 19)

Eating habits are often, but not always, determined by religion. Whether someone is vegetarian or vegan, wants to eat halal or kosher - this is based on different views and world views. In care, it is important to always emphasise the health aspect of nutrition, but to bring understanding for individual needs and also to create alternatives. Caregivers do not have to be experts in religious studies - but a basic knowledge of certain topics can be helpful.

Transcultural care should assess and respect people as individuals not because of their religion but because of their needs.

# Section 2: Celebrations in different cultures and religions

# Trainer input (slide 21) Introduction Give an input on the meaning of celebrations: Festivals are social places; they are mostly a collective occasion and have meaning not only for the individual but also for the celebrating group as a whole. Religious festivals in particular have a meaningful effect on the religious community. Cultural celebrations and religious festivals are also often an important distraction from the worries and stresses of everyday life. This gives festivals a special significance for sick and/or elderly people. Especially when they are not in their family or home environment, celebrating together can be an important emotional support.

Trainer’s Notes (slide 22)  
Divide the group into pairs and ask them to ask the following questions of their partners. When they have done this let each pair present the results of their interviews.  
  
****Activity – Cultural Expert for one day (slide 22)  
Interview with your partner   
Think about the diversity in your own team and ask -

* Where do you/your colleagues come from?
* What kind of celebrations do you/they have in their culture/traditions?
* Let them talk more about this!
* Do they practice them? How do they practice them?
* Are there any opportunities for them to follow their traditions in the workplace?

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Trainer input (slide 23, 24, 25, 26, 27, 28)  
Cultural traditions and celebrations in different religions – and how they can be integrated into diverse (health-) care settings. (ppt slides). Take especially the situation of elderly people into consideration. Older people in particular can be increasingly reflective on their origins and traditions. It is therefore all the more important for them to live in an environment where this need is respected. While religious traditions cannot always be taken into account in hospitals for medical reasons and due to the strict regimentation of everyday hospital life, the individual life situation of the patients should be better taken into account in old people's or nursing homes, since they live there permanently. Nutrition habits and religious/cultural traditions in health-/social care settings - culturally sensitive care. *“Culturally sensitive care contributes to a person in need of care being able to live according to their individual values, cultural and religious imprints and needs.”* According to this, culturally sensitive care means being receptive to each individual, their biography, their religious, cultural, gender-specific and/or migration-related backgrounds and their individual needs. Ultimately, this also includes respecting certain food rules and allowing religious traditions and festivals to be celebrated. The appreciation of the clients and their culture must be integrated into the care activities. Celebrations in Islam & Judaism. **Eid** is often called the festival of breaking the fast. It ends the fasting in Ramadan. In Arabic it is called **Id al-Fitr**. There are differences in the type of celebration depending on the country and region. The festive season is used to visit relatives and friends. Sweet dishes are usually served, and a lot of sweets are distributed and eaten.

The **Feast of Sacrifice** is the most important festival for **Muslims**. It reminds them that they should and can trust God. Chronologically it is celebrated after Ramadan. **Yom Kippur** is the strictest holiday in **Judaism**. Yom Kippur is observed in a more or less strict form by a majority of Jews, even non-religious ones. **Hanukkah** is the festival of lights. Hanukkah is primarily a domestic celebration. On Hanukkah evening, families gather with friends for boisterous celebrations. Community celebrations are common, and children receive gifts and sweets. Celebrations in Buddhism & Hinduism In **Buddhism**, the most important festival is called Vesakha, which Buddhists all over the world celebrate as a unifying holiday. Vesakha is the birthday celebration for the Buddha Festivals in **Hinduism** often have something to do with the seasons. Holi is a joyful festival where all participants throw coloured flour or powder at each other. Hindus use it to celebrate the beginning of spring. Christians have around 20 feast/festival days a year, more than any other religion.

Did you know? The main **Christian** festival is **Easter** - the commemoration of the event with which Christianity stands and falls, the resurrection of Jesus Christ. This is followed by the feasts of **Ascension** and **Pentecost**. **Christmas** - Christians celebrate Jesus' birthday. There are many other customs surrounding Christmas: a fir tree is put up in the house and decorated. Many families sing and pray, presents are given.

**Hanukkah isn’t the Jewish Christmas.** Because Hanukkah and Christmas tend to fall around the same time of year, people often wonder if Hanukkah is a Jewish version of Christmas. It is not, although similarities can be seen in the celebrations.   
**Greek Orthodox - roasted lamb on a spit is the traditional dish of Easter Sunday.** It is served like this because according to the Apostle John, Jesus is the Lamb of God. He died on the cross as a sacrifice for our sins.  Eating lamb honors this.  
**Easter baskets have special symbolism.** The woven containers represent nests and new life, especially when filled to the brim with eggs.  
**The meaning of Diwali**. It is an important religious festival originating in India. People often think of Diwali as a Hindu festival, but it is also celebrated by Sikhs and Jains. Diwali takes place annually and lasts for five days, marking the start of the Hindu New Year. The exact dates change each year and are determined by the position of the moon – but it usually falls between October and November.   
**Chinese New Year**, also called Spring Festival, is primarily a family holiday. Traditionally, people get together on New Year's Eve to eat together. Many people also use the time to go on holiday. The festivities traditionally last seven days, ending with the Lantern Festival.  
**The Islamic calendar is shorter than a western Gregorian calendar**; there are just 354 days in a normal year, and 355 days in a leap year. The dates of the Islamic holidays change each year in relation to the solar calendar.

Trainer’s notes (slide 29)  
Begin a discussion about the difference between daily routines in a hospital and a care home and the framework of conditions that provide support to those from a variety of different cultures. Divide the group into smaller groups and ask them to discuss the following questions

Exercise: What could happen…? (slide 29)  
*1.* How do traditional celebrations/feasts influence the daily routine in a hospital/care centre? Think about concrete incidents or situations like e.g. planning surgery  
2. How can you as a caregiver create opportunities for different cultural celebrations to be celebrated in the hospital/nursing home?

Trainer’s notes (slide 30, 31, 32)  
Introduce the ABEDL structure model, which maps the needs, abilities and resources of the person and serves as a recording and data allocation tool with which the individual care needs can be named. The model illustrates that care should allow for the preservation of human independence and well-being. Care focuses on the **individual life history** and **life situation** as well as the person's support and ability. This also includes the consideration of a person’s cultural background.

**The ABEDL Model 13 activities and existential experiences of life.**   
being able to deal with existential experiences of life  
being able to communicate  
being able to move  
being able to maintain vital body functions  
being able to care for oneself  
being able to eat and drink independently   
being able to use the toilet independently  
being able to dress oneself  
being able to rest and sleep  
being able to occupy oneself  
being able to feel like a man/woman  
being able to provide safety in the environment  
being able to engage in a social life

Summary (slide 33)

Especially in the context of elderly care, it is important to take celebrations into consideration. Working with people from different cultures also means respecting their different traditions and celebrations and to value them. According to this, culturally sensitive care means being receptive to each individual, their biography, their religious, cultural, gender-specific and/or migration-related backgrounds and their individual needs.