



**Montgomery
County Office of
Community
Partnerships**

**Asian Pacific
American Advisory
Group**

Health care providers' handbook on

Hindu patients





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For more information, please contact:

Montgomery County Office of Community Partnerships
Asian Pacific American Advisory Group
<https://montgomerycountymd.gov/partnerships/>

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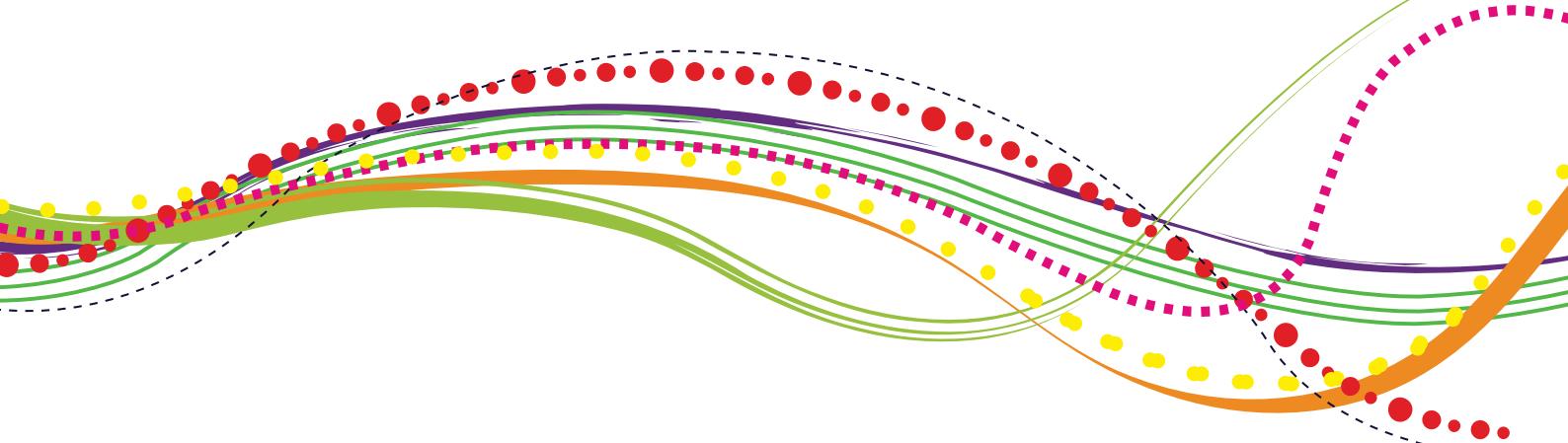
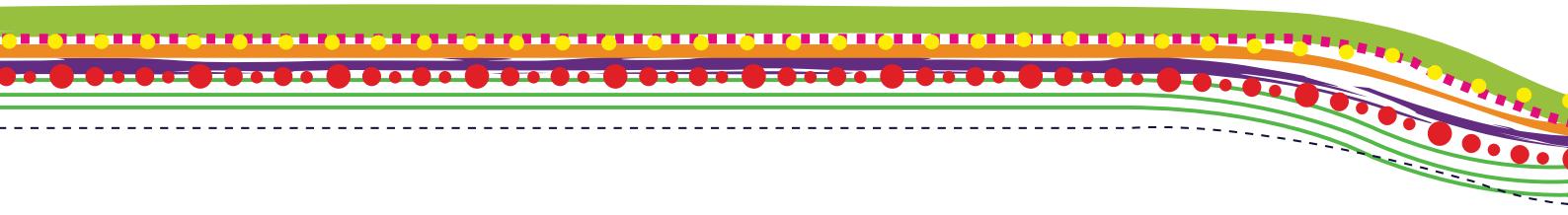


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Preface

This handbook, the Health Care Providers' Handbook on Hindu Patients, was originally created by Queensland Health (Government of Australia) and covers a range of topics and aims to inform health care providers about the religious beliefs and practices of Hindu patients that can affect health care. It also contains information regarding dietary practices of Jain patients. It has been adapted for use in the State of Maryland, United States of America, by the Montgomery County Office of Community Partnerships, Asian Pacific American Advisory Group.

The handbook has three sections:

- Guidelines for health services
- Hindu beliefs affecting health care
- Additional resources

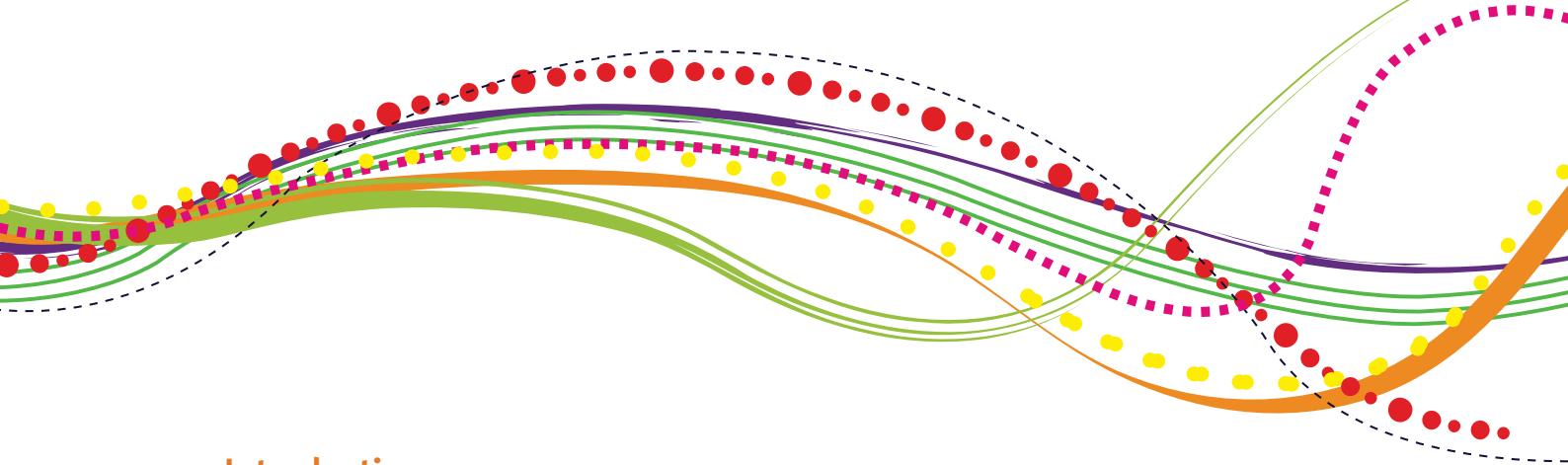
Each section provides practical advice and information for health care providers which is designed to answer some of the more common questions about Hindu patients and the religious practices of Hinduism that affect health care. The handbook also provides links to further information and contacts within the Hindu and Jain communities of Maryland.

Health care providers work in an increasingly diverse environment. Those who display cross-cultural capabilities in their work use self-reflection, cultural understanding, contextual understanding, communication and collaboration to provide culturally appropriate, responsive and safe health care. This handbook aims to support health care providers by building their knowledge of the needs of Hindu and Jain patients.

The **Health Care Providers' Handbook on Hindu Patients** was written under the guidance of an advisory committee comprising:

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A special thanks to Ishani Chowdhury (Co-chair of the Montgomery County Asian Pacific American Advisory Group; Maryland Governor's Commission on South Asian American Affairs) for her work on this book, and to Sharad Doshi (JAINA; Maryland Governor's Commission on South Asian American Affairs) for his guidance in adapting the book to include Jain adherents.



Introduction

There are approximately 2.5 million Hindus in the United States, with Maryland among one of its many culturally rich and religiously diverse states.¹⁶ While Hindus can be found from various ethnicities, South Asian Americans, particularly Indian and Nepali Americans, tend to be the most predominant background. The 2020 Census identified 6% of the state population was of Asian descent, with Indian Americans constituting 1.7% of the overall state population. These 104,982 Indian Americans account for one of the most rapidly growing ethnic populations in Maryland. According to the 2020 census, there are around 6,450 Nepali in Maryland.¹

The increasing cultural, linguistic and religious diversity in Maryland's population means that to be safe, health services need to be culturally appropriate and responsive. Research indicates a strong link between low cultural competency, and poor quality health outcomes and significant risks.²

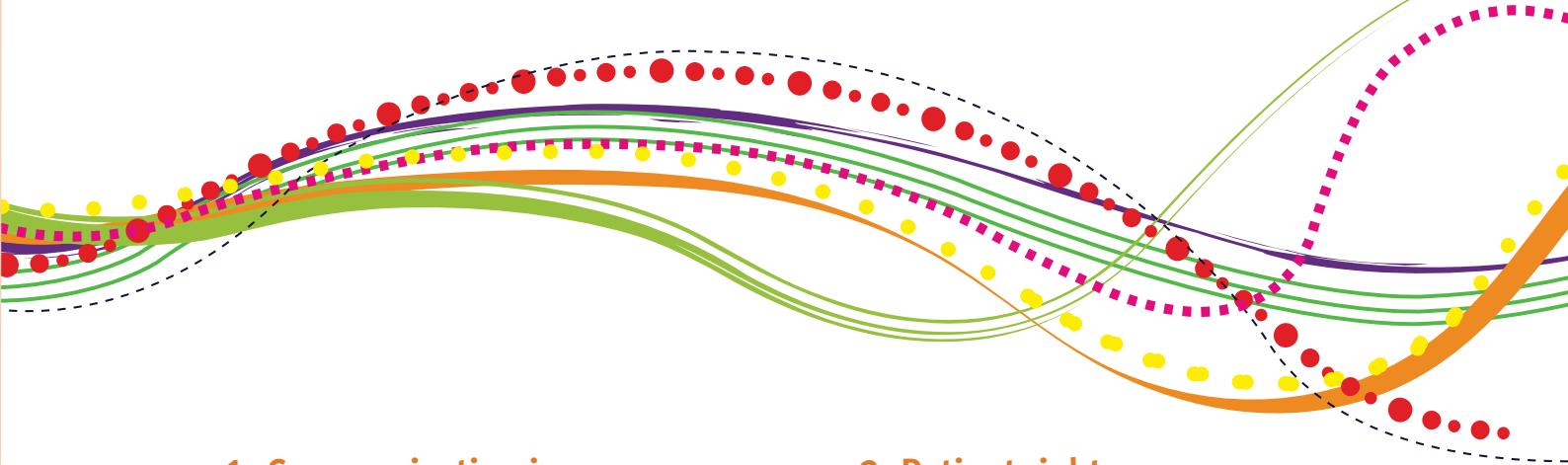
Personal level of adherence

Hinduism is the world's oldest living faith and third largest religion. It is practiced in many countries around the world, including by large populations in Southern and South East Asia, Europe, Africa, North America, the Caribbean and Australia.

There is much diversity in the beliefs and practices of Hindus, with hundreds of diverse sects and no central doctrinal authority. As Hinduism grants individuals complete freedom to practice his or her religion as they choose, there are personal and cultural variations that make it difficult to provide definitive rules and regulations that apply to all Hindu patients. Because of these personal variations, it is important that health care providers consult the patient about their personal level of religious observance and practice.

However, Hindu patients should not be regarded as a 'special' group that require additional attention from health care providers. Due to the common Hindu beliefs of *karma* (the belief that every action has a consequence which is experienced in this or future lives) and reincarnation, Hindu patients may display acceptance of difficult circumstances and be inclined to comply with the instructions of health care providers.

This handbook also covers dietary information for patients of the Jain faith tradition. Jainism is the religion promulgated by 24 spiritual masters called Jinas. The most important of the 24 Jinas was the last one, Mahavira (599-527 BCE). It is a non-theistic religion. The majority of Jains are of Indian descent.



1. Communication issues

The 2020 census showed that more than 68% of Maryland's Hindu population was born overseas, with the majority of people coming from a non-English speaking country. Health care providers should be aware that many Hindu patients may not be proficient in English.

The other languages most widely spoken by Hindus in Maryland include:

Bengali	Marathi
Fijian Hindi	Nepali
Gujarati	Oriya
Hindi	Punjabi
Kannada	Sindhi
Kashmiri	Tamil
Malayalam	Telugu

If a patient is assessed to have inadequate English, health care providers should engage a professional interpreter.

2. Patient rights

The American Hospital Association developed "A Patient's Bill of Rights" with the belief that it will add more effective patient care and be supported by the hospital on behalf of the organizations, its medical staff, employees and patients. However, it is not State law.

Health care involves a partnership between patients, doctors and other health care professionals. Open communication, respect for personal and professional standards and understanding of differences are important for the best possible patient care. Hospitals should:

- Provide a base for understanding and respecting the rights and responsibilities of patients, their families, doctors and other caregivers;
- Respect the role of patients in decision making about treatment choices and other care; and .
- Be aware of cultural, racial, language, religious, age, gender and other differences as well as the needs of persons with disabilities.

Hospitals have many functions to perform, including treating injury and disease, health promotion and prevention, rehabilitation of patients, education of health professionals, patients and the community. These rights apply to patients from all cultures and faiths in the health care setting. All these activities should be conducted with concern for the values and dignity of patients.³

For more information on the Patient Bill of Rights, please visit:

[https://health.maryland.gov/springfield/ Documents/patrights.pdf](https://health.maryland.gov/springfield/Documents/patrights.pdf)



4. Religious observance

Hinduism grants individuals complete freedom to practice his or her religion as they choose. As a result, it is important that health care providers discuss religious observance needs with each patient.

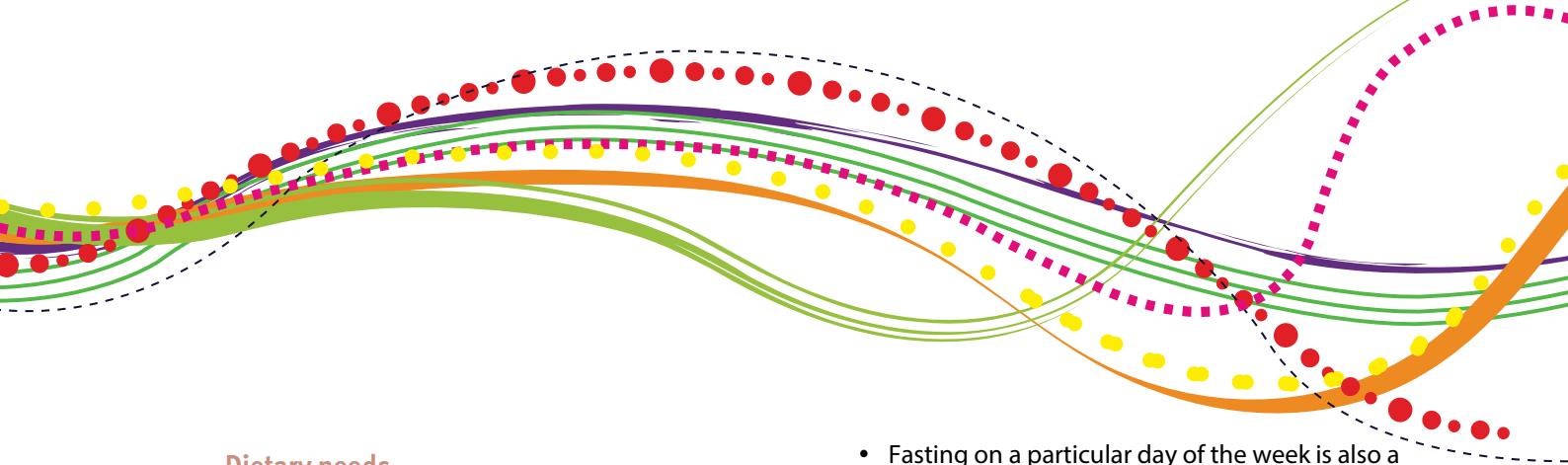
Some topics that health care providers may wish to discuss with their patients include prayer and meditation, bathing and cleanliness, dietary needs and astrological beliefs.

Prayer and meditation

- Prayer and meditation are important to many Hindus.
- There are no set times for prayers. However, most Hindus prefer to pray in the morning and evening.
- Prayer can take place in any location, including in bed or in hospital prayer rooms.
- Hindu patients may wish to have religious icons close by when in hospital.

Bathing and cleanliness

- The concept of purity is important to Hindu life and some Hindus may be quite meticulous about bathing and cleanliness.
- Most Hindus have a ritual of cleanliness and prayer each morning which includes brushing the teeth immediately upon waking, followed by bathing, prayer and then eating.
- A delay in eating to follow this ritual should not be interpreted as a refusal to eat.
- Washing of hands prior to eating is important as many Hindus eat with their hands.
- Washing with running water is important to Hindus and most will prefer a shower rather than a bath.
- Women may be considered impure or unclean when menstruating or following childbirth⁴⁵.



Dietary needs

- Many Hindus are strict vegetarians, abstaining from all meat, fish and eggs. Vegetarian Hindus do consume dairy products.
- Hindus who choose to follow a vegetarian diet do so because of a belief in non-violence which extends to animals, and a belief that non-vegetarian food impedes spiritual development⁶.
- Some Hindus choose to eat meat and do not follow a vegetarian diet.
- Most non-vegetarian Hindus do not eat beef or pork⁷ as cows are considered sacred and pigs are considered unclean⁴.
- Many non-vegetarian Hindus may choose to abstain from eating meat on particular days of the week. For example, a strict vegetarian diet may be observed on Mondays.
- Some strict vegetarian Hindus will not eat from plates or use utensils that have previously been used to serve meat.
- Most Hindus will eat only with the right hand. Some may not eat food which has been passed to them with the left hand.
- Fasting is common for Hindus and can vary from complete abstinence to only avoiding certain types of foods⁷.

- Fasting on a particular day of the week is also a common practice.
- Jains, who are also vegetarian, do not eat onions, potato or garlic (or anything grown underground). Furthermore, on certain days of the year, Jains refrain from eating any type of vegetables. Please consult with your patient or nearest Jain temple for more details.
- *Refer to section three for a table of foods suitable for vegetarian Hindus and Jains.*

Astrological beliefs

- Many Hindus hold strong astrological beliefs and may believe the movement of the planets has a strong influence on health and wellbeing⁵.
- Patients may wish to schedule appointments or surgeries according to these beliefs.

5. Decision-making

Hinduism views the needs of the individual in the greater context of family, culture and environment⁸.

As a result, family members, especially elders, can have a strong influence on decision-making related to health matters, including informed consent.

Hindus may wish for family members to be responsible for making treatment decisions.



6. Administration of medicines

Traditional medicines and remedies

Hindus may use a variety of *Ayurvedic* medicines, home remedies and spiritual remedies, often in conjunction with allopathic medicine. It is important for health care providers to be aware of their patient's preferences.

Ayurveda is a holistic system of medicine practiced by many Hindus around the world. It is a highly valued and respected health science in India.

Ayurveda is practised by many Hindus in the United States.

Based on *Ayurvedic* principles, Hindus believe that all illnesses, whether physical or mental, have a biological, psychological and spiritual element. *Ayurveda* seeks to maintain a balance between the body's three elemental energies (humors). Good and bad health is related to the level of balance of these three energies.

Many Hindus also use traditional home remedies which are based on *Ayurvedic* medicine and are easily available from Indian grocery stores.

One of the most common Hindu spiritual remedies is *vibuthi*, or holy ash. *Vibuthi* is commonly used in Hindu religious worship and is believed to contain protective, purifying and healing properties when applied on the skin (particularly on the forehead), consumed in small quantities, or carried on the person in a small packet.

Medicines of animal origin

Some medicines may not be suitable for Hindu patients because they are derived from cows, pigs or other animals.

Health care providers should inform patients about the origins of their proposed medication if it is derived from animals and no suitable synthetic alternative exists. Patients should be encouraged to make informed decisions regarding their treatment.

The manufacturer's *product information* gives details about the composition of the medicine (i.e. listing the active and inactive constituents/ingredients) and provides a description of how the medicine was produced (e.g. whether manufacture of the product included exposure to animal derived materials).

7. Clinical examination and procedures

Modesty is an important consideration for Hindu men and women, and patients may prefer to be examined by a health care provider of their own gender. Hindu patients may also wish to have a family member present during a clinical examination or procedure.

The need for invasive examinations may need to be carefully explained, particularly if a same-sex clinician cannot be accommodated.

Hindu women may wear a sacred thread, ring or gold chain around their necks and Hindu men and boys may wear a sacred thread across the chest. All Hare Krishna followers, and some other Hindus, may wear sacred *tulsi* beads around the neck. The permission of the patient or their family should be sought before these items are removed during a clinical examination or procedure.

8. Hygiene

Hinduism places great emphasis on purity, in both physical and spiritual terms.

A Hindu may wish for water to be made available whenever they use a bed pan and toilets should be equipped with a small water container to assist with washing. Older Hindus may have a preference for showering after defecation.

Patients who are washed in bed or who require assistance with washing, may have a strong preference for washing to start with the face and proceed towards the feet.



Oral hygiene

- Oral hygiene is very important to most Hindus, especially those who practice *Ayurvedic* principles.
- Many Hindus prefer to brush their teeth immediately after waking in the morning and some may also scrape their tongue with a metal tongue scraper. This is done to avoid the ingestion of impurities that may have built up in the mouth during sleep.
- Hindu patients may also wish to brush their teeth immediately after waking from general anaesthesia or surgery for the same reason.
- Health care providers should explain the benefits of also brushing the teeth after eating.
- Many Hindus use home remedies for oral hygiene and health purposes, including chewing mint leaves, cloves or fennel seeds.
- Oral health examinations and treatments are usually not regarded as invasive by Hindu patients.

9. Maternity services

- A small number of Hindu ceremonies accompany pregnancy and childbirth.
- While most of these ceremonies are completed in private, there are some which may be completed while the mother and infant are in hospital care.
- After childbirth, a Hindu father may wish to perform the *Jatakarma* ceremony to welcome the infant into the world. As part of the ceremony, the father touches and smells the infant and whispers mantras (religious verses) into the infant's ears.
- Another rite which is performed shortly after birth involves drawing a small dot (often in the shape of an *Om* ॐ) behind the infant's ear. The *Om* symbol may also be placed on a chain around the infant's neck or placed in the cot⁹.

- A family member may also wish to write the *Om* symbol on the infant's tongue with *jaggery* (unrefined whole cane sugar) dipped in ghee or honey¹⁰.
- Health care providers should advise parents that feeding honey to infants below the age of 12 months is not recommended due to the risk of infant botulism.
- The sixth day after birth is considered the most auspicious in a person's life. On this day, a fragile white cotton thread is ceremoniously tied around the infant's wrist, ankle or neck. A pen and blank piece of paper may also be placed in the infant's cot as it is believed that on this day *Saraswati* (The Goddess of Learning) charts the child's future¹⁰.
- Some Hindus may wish to bury the umbilical cord on the sixth day after birth. If there are clinical reasons for not providing the umbilical cord to the parents, this should be explained.
- The naming ceremony (*Namakarana*) usually occurs at the infant's home after birth.
- Depending on family customs, the ceremony may be delayed if the infant requires extended hospital care.
- Some Hindu women may wish to express colostrum before feeding their baby for the first time.
- Health professionals should inform women of the benefits of feeding their infant colostrum.



10. Community health services

Home visits

- Hindus may prefer for shoes to be removed when entering a home.
- If this is not possible for Workplace Health and Safety reasons, alternatives should be explored (e.g. wearing plastic shoe covers).
- Health care providers should avoid taking meat products into the homes of vegetarian Hindus and Jains.

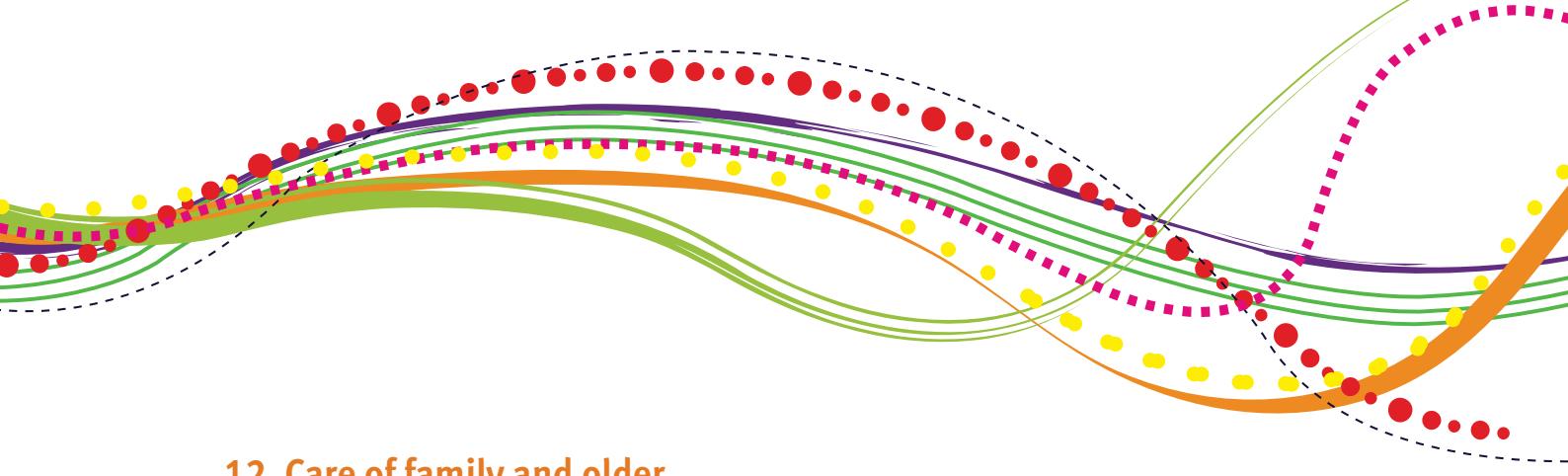
Rehabilitation issues

- Self care practices involving eating or drinking are ideally performed with the right hand.
- Health care providers should be aware that where a patient has lost the ability to use their right hand, sensitivity may be required.

- Similarly, loss of function in the left hand may affect the patient's comfort with bathing and washing habits.

11. Visiting arrangements

- Visiting the sick is an important responsibility for Hindus.
- Hindu patients may have large numbers of visitors, including those from outside their immediate family.
- Health care providers should discuss with the patient, or their family, the impact a large number of visitors may have on rest or care requirements, and other patients.
- Patients may wish for family members to stay in the hospital overnight. This should be accommodated, if possible.



12. Care of family and older persons

- Hinduism encourages family members to take a role in the care of family members.
- Hinduism especially emphasises respect for all older people, with children having a special responsibility towards their parents¹¹.
- It is considered a family obligation to care for the elderly and the sick¹¹.
- Health care providers should take this into account when developing care plans or suggesting nursing or residential care.

13. End of life issues

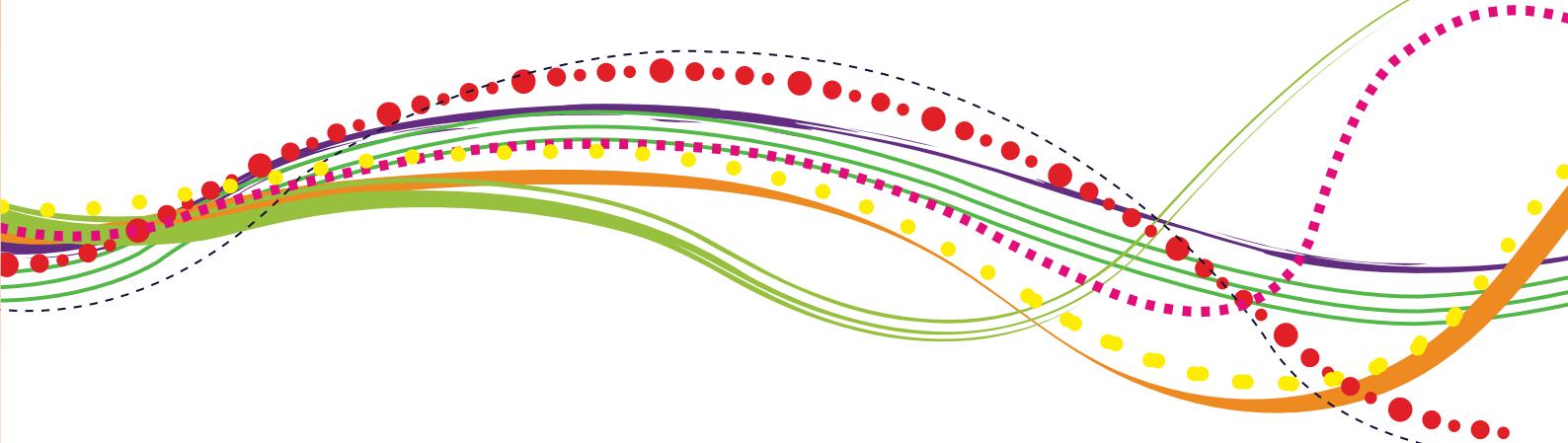
- The sanctity of life is central to Hindu teachings⁸.
- Hindus believe that all living beings possess a soul which passes through successive cycles of birth and rebirth⁸.
- Hindu patients may wish to die at home, as this has particular religious significance¹².
- The patient's eldest son is expected to be present before during and after death, even if the son is a small child⁴.
- Other family members may wish to be present and to participate in the care of the patient.
- Family members may request that patients not be told about a terminal diagnosis directly⁵.
- A Hindu patient may wish for a *Pandit* (priest) to be present to perform certain rituals including:
 - tying a sacred thread around the neck or wrist
 - placing a few drops of water from the River Ganges into the patient's mouth
 - placing a sacred *tulsi* leaf (holy basil) in the patient's mouth⁴.
- A Hindu patient, especially a Hare Krishna follower, may wear sacred *tulsi* beads (a string of small wooden prayer beads) around their neck. It is important that these be on the body at the time of death.
- If it is necessary to remove these beads, they should be retied around the wrist (preferably right).
- Patients may wish to read or recite religious chants and prayers. However, some patients may prefer to listen on a personal media player or small radio.

14. Deceased patients

- A deceased Hindu's body is usually washed by close family members with the eldest son taking a leading role⁴.
- The family may wish to light a small lamp or burn incense near the body.
- If possible, all jewellery, sacred threads and religious objects should be left in place.
- Health care providers should advise family members if it is necessary to remove these items.
- The deceased patient's family may have a preference for the position of the body after death.
- Hindus are usually cremated as soon as possible after death⁵.

15. Autopsy

- Hindus generally regard autopsies as unacceptable. However, autopsy is permitted if required under statutory laws⁵.
- Hindus are usually cremated as soon as possible after death, and autopsy may affect this practice.
- Health care providers should consult with the family of a deceased Hindu patient before proceeding with an autopsy.



1. Food beliefs

Hindu dietary practices can vary depending on the individual's beliefs and customs.

Most Hindus do not eat beef or pork and many follow a vegetarian diet. Fasting is common among Hindus, but there are no set rules and the decision to fast is up to the individual.

Many Hindus follow Ayurvedic dietary practices. Under this system certain foods are classified as *hot* or *cold* and can adversely or positively affect health conditions and emotions¹¹.

The classification of foods as *hot* or *cold* is unrelated to temperature. *Hot* foods are generally those foods which are salty, sour or high in animal protein, while *cold* foods are generally sweet or bitter⁴.

Some strict Hindus do not consume garlic or onion as the properties of these foods disturb spiritual practices such as meditation.

Refer to section three for a table of foods suitable for vegetarian Hindus and Jains.

2. Karma

- A central belief of Hinduism is the doctrine of *karma*, the law of cause and effect¹³.
- Hindus believe that every thought, word and action accumulates *karma*, which can affect current and future lives. Hindus believe in reincarnation¹³.
- Actions from a past life can affect events in the current life, including health and wellbeing¹³.
- Health care providers should be aware that a strong belief in *karma* can affect decision-making regarding health care.

3. Holy days

Hindus do not observe a specific day of worship, although some days of the week may be associated with particular deities.

Hindus do observe a number of holy days and festivals which can have an impact on health care due to associated fasts.

Most Hindu holy days are based on the lunar calendar and the dates can vary from year to year. Some festivals can occur over an extended period with celebrations lasting for days or weeks.

4. Fasting

Fasting is an integral part of Hinduism and is seen as a means of purifying the body and the soul, encouraging self-discipline, and gaining emotional balance⁷.

Fasting may be practiced on specific days of the week, during festivals or on holy days, or in conjunction with special prayers.

It is not considered obligatory for a Hindu patient to fast during hospitalisation. However, some patients may wish to fast while in hospital.

There is no specified way to fast, but individuals may choose to abstain completely from all food and drink or only abstain from certain foods.

5. Dress

While there is no religious requirement for modest dress, many Hindus choose to dress modestly and may be reluctant to be examined by health care providers of the opposite sex.

Hindu women may wear a sacred thread or gold chain around their necks and Hindu men and boys may wear a sacred thread across the chest. These items should not be removed during examination. If it is necessary to remove an item, permission should be sought prior to removal¹⁴.

Hare Krishna followers, and some other Hindus, may wear sacred *tulsi* beads around the neck. If it is necessary to remove these beads, they should be retied around the wrist (preferably right).

In addition, some jewellery worn by Hindus may have a sacred meaning and patients should be consulted before removal.

6. Mental health and/or cognitive dysfunction

Hindus believe that all illnesses, whether physical or mental, have a biological, psychological and spiritual element. Treatments which do not address all three causes may not be considered effective by a Hindu patient⁹.

Many Hindus attach a stigma to mental illness and cognitive dysfunction.

Many Hindus have a strong belief in the concept of the *evil eye* and may believe this to be a cause of mental illness¹².

In addition, all illness, including mental illness, may be seen as the result of *karma* from this, or a previous life.

7. Transplants and organ donation

Hinduism supports the donation and transplantation of organs. The decision to donate or receive organs is left to the individual.

8. Sexual and reproductive health

Contraception

There is no official Hindu position on contraception.

Abortion

Beliefs about abortion may vary depending on cultural or religious interpretations.

Many Hindus believe that the moment of conception marks the rebirth of an individual, which may make abortion unacceptable, except in emergencies⁴.

Assisted reproductive technologies

There is no official Hindu position on assisted reproductive technologies.

9. Pain management

Hinduism encourages the acceptance of pain and suffering as part of the consequences of *karma*. It is not seen as a punishment, but as a natural consequence of past negative behaviour and is often seen as an opportunity to progress spiritually¹⁵.

This may affect triaging or the monitoring of pain levels as Hindu patients may not be forthcoming about pain and may prefer to accept it as a means of progressing spiritually.

However, this behaviour may be less prevalent in United States, especially among young people.

10. Death and dying

Hindus believe that the time of death is determined by one's destiny and accept death and illness as part of life.

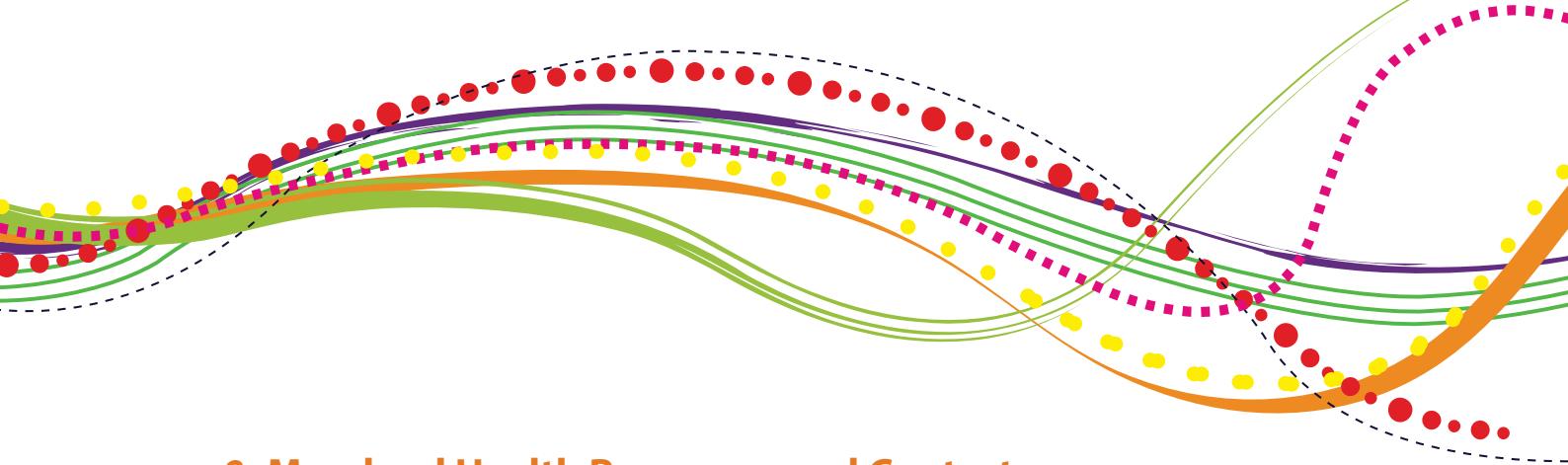
As a result, treatment is not required to be provided to a Hindu patient if it merely prolongs the final stages of a terminal illness.

Under these circumstances, it is permitted to disconnect life supporting systems. However, suicide and euthanasia are forbidden in Hinduism.

1. Hindu and Jain Organizations

There are numerous Hindu and Jain temples/organizations in Maryland. Below is a partial list, some of whom may be able to help in answering questions, locating another temple/organization nearby or provide last rites/funeral services information.

Sri Siva Vishnu Temple	6905 Cipriano Rd. Lanham, MD 20706 301-552-3335 www.ssvt.org	Largest Hindu temple in Maryland providing a variety of services.
ISKCON of DC (Hare Krishna Temple)	10310 Oaklyn Dr. Potomac, MD 20854 301-299-2100 www.iskconofdc.org	ISKCON of DC sits on 12 acres of land. Along with the Temple, there is a Cultural Hall and residential and guest facilities. The Temple is open daily from 4:30 a.m. to 9:30 p.m.
Jain Society of Metropolitan Washington	1021 Briggs Chaney Rd. Silver Spring, MD 20905 301-236-4466 www.jsmw.org	Largest and most active Jain temple in the DC Metro area.
BAPS Shri Swaminarayan Mandir	4320 Ammendale Rd. Beltsville, MD 20705 301-931-3135 www.baps.org	BAPS is a dynamic socio-religious Hindu organization with numerous centers around the world.
Hindu Temple of Metropolitan Washington	10001 Riggs Rd. Adelphi, MD 20783 301-445-2165 www.hindutemplemd.org	Hindu temple serving DC Metro area.
Association of United Hindu Jain Temples	www.dcunitedtemples.org	A non-profit organization of Hindu and Jain temples in the Metro Washington DC area. The website contains a listing and contact information of temples in the area.
Nepali Education and cultural Center (Pashupati-Buddha Mandir)	11650 Snowden Farm Pkwy Germantown, MD 20876 240-489-3672 www.neccusa.org	16 acre Hindu temple offering a wide variety of Nepali community cultural and religious services and programs.
Asa Mai Hindu Temple of Washington Metropolitan	230 Awkward Lane Silver Spring, MD 20905 301-388-0509 www.asamaihindutemple.com	Afghan Hindu religious and cultural association.
JSS Spiritual Mission	7710 Hawkins Creamery Rd. Gaithersburg, MD 20882 301-414-0144 www.jssmission.org	Activities include: spiritual discourses, the practice of yoga, Indian cultural education, prayer and devotional rituals at the temple, and worship of deities, celebration of all Indian festivals and dissemination of spiritual knowledge in the sacred texts.
Washington Kali Temple	16126 New Columbia Pike Burtonsville, MD 20866 301-476-8152 www.kalitemplewashington.org	Temple performs a wide variety of activities including language classes and <i>Vedic samskaras</i> (rites).
Chinmaya Mission Washington Regional Center	46 Norwood Rd. Silver Spring, MD 20905 301-384-8009 https://cmwrc.chinmayadc.org	Temple includes multi-purpose rental hall and offers classes in Vedanta, youth education, language, yoga, performing arts and <i>shloka</i> (Vedic Sanskrit chanting)
Sri Mangal Mandir	17110 New Hampshire Ave. Ashton, MD 20861 301-421-0985 www.mangamandir.org	Temple includes multi-purpose rental hall and provides youth education classes, Senior Citizen Club, cultural programs and perms a wide variety of <i>Vedic samskaras</i> (rites)



2. Maryland Health Resources and Contacts

Asian American Health Initiative:

1401 Rockville Pike, 3rd Floor, Rockville, MD 20852

Email: aahi@montgomerycountymd.gov

Website: <https://aahiinfo.org/>

Montgomery County Department of Health and Human Services:

1301 Piccard Dr., Rockville, MD 20850

Email: HHSmail@montgomerycountymd.gov

Website: <https://www.montgomerycountymd.gov/hhs/>

Office of Minority Health and Health Disparities:

201 West Preston Street, Baltimore MD 21201

Website: <https://health.maryland.gov/mhhd/Pages/home.aspx>

Ph: 410-767-6500

Centers for Medicare and Medicaid Services:

7500 Security Boulevard, Baltimore, MD 21244

Ph: 410-786-6557

Website: www.cms.gov

Maryland Access Point:

301 West Preston St., Suite 1007, Baltimore, MD 21201

Ph: 410-767-1100

Website: <https://aging.maryland.gov/Pages/maryland-access-point.aspx>

Maryland Department of Aging:

301 West Preston St., Suite 1007, Baltimore, MD 21201

Ph: 410-767-1100

Website: <https://aging.maryland.gov/>

3. Foods suitable for vegetarian Hindus and Jains

Many Hindus follow a strict vegetarian diet. The following table outlines foods which are suitable for vegetarian Hindus and Jains, as well as many common non-vegetarian additives and ingredients that may be found in these food groups. These non-vegetarian additives need to be identified as they would make these seemingly vegetarian foods unsuitable.

Most non-vegetarian Hindus do not eat beef or pork, and may choose to follow a vegetarian diet on particular days of the week, or during festivals and celebrations.

Some strict Hindus do not consume garlic or onion as the properties of these food disturb spiritual practices such as meditation. Please consult with your patient for further information.

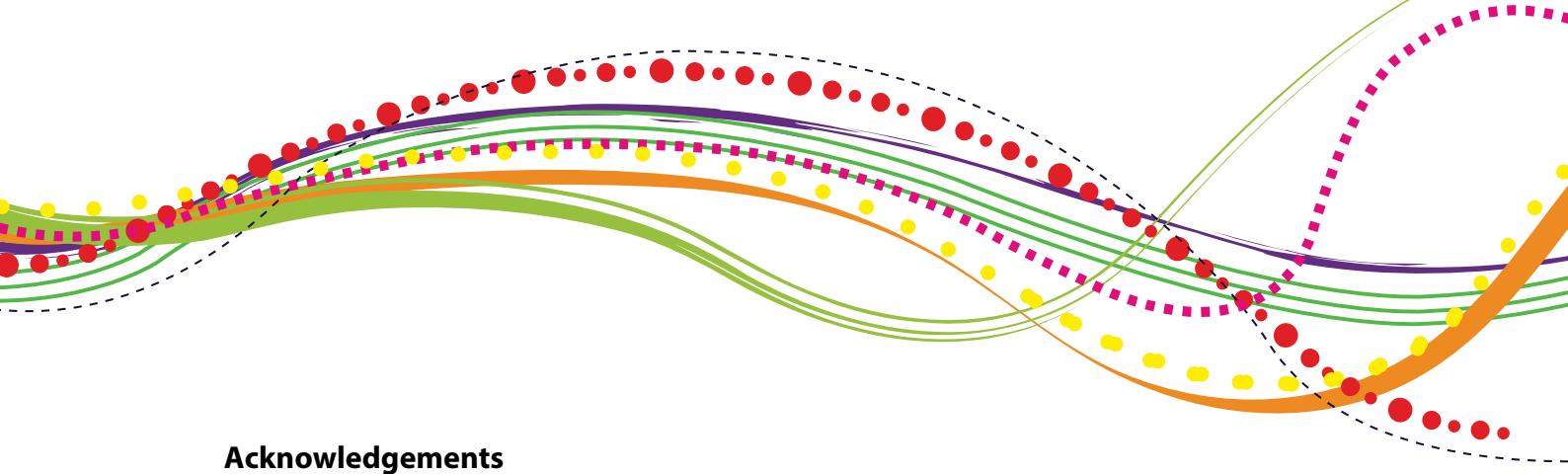
Foods suitable for vegetarian Hindus	Ingredients and additives that may be found in these foods that would make them unsuitable if present (food becomes non-vegetarian)
Milk and milk products	<ul style="list-style-type: none">• Cream• Cheese• Yogurt• Butter• Coconut milk and other milk substitutes• Ice 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 coloring (e.g. cochineal/carmine)• Enzymes (e.g. lipase, pepsin, animal rennet)
Fruits and vegetables	
All fruits and vegetables including beans, lentils and nuts	<ul style="list-style-type: none">• Fruits and vegetables 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/carmine)

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 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"> All desserts made with alcohol, lard, dripping and other animal fats Desserts containing gelatin or vanilla essence
Foods Suitable for Jains	
All of the above without eggs and animal fat. See additional exclusions on the right side table.	All above exclusions apply. Additionally, no onion, garlic or potato (including anything grown underground).



4. References

1. United States Census Bureau, 2020 Census, <https://data.census.gov/>
2. Johnstone M-J, Kanitsaki O. Cultural Safety and Cultural Competence in Health Care and Nursing: An Australian Study. Melbourne: RMIT University; 2005.
3. Maryland Department of Health, Patient Bill of Rights, [https://health.maryland.gov/springfield/ Documents/patrghs.pdf](https://health.maryland.gov/springfield/Documents/patrghs.pdf)
4. Hollins S. Religions, Culture and Healthcare: A Practical Handbook for Use in Healthcare Environments second edition. Second edition ed: Radcliffe Publishing Ltd; 2009.
5. Andrews JD. Cultural, Ethnic and Religious Reference Manual for Health Care Providers. Version 3.0 ed: JAMARDA Resources, Inc; 2005.
6. Brooks Nicky. Overview of Religions. Clinical Cornerstone 2004;6:7-16.
7. ElGindy G. Hindu Dietary Practices: Feeding the Body, Mind and Soul: Minority Nurse; 2005.
8. Coward H, Sidhu T. Bioethics for clinicians: 19. Hinduism and Sikhism. Canadian Medical Association Journal 2000;163:1167-2281.
9. Kang C. Hinduism and Mental Health: engaging British Hindus. Mental Health, Religion & Culture 2010;13:587-593.
10. Gatraj AR, Ray M, Sheikh A. Hindu birth customs. Archive of Disease in Childhood 2004;89:1094-1097.
11. Kemp C, Rasbridge LA, eds. Refugee and Immigrant Health: A Handbook for Health Professionals: Cambridge University Press; 2004.
12. Alagiakrishnan K, Chopra A. Curriculum in Ethnogeriatrics second edition: Health and Health Care of Asian Indian American Elders: Stanford University; 2001.
13. Babacan H, Obst P. Death, Dying and Religion: An examination of non-Christian beliefs and practices: Ethnic Communities Council of Queensland; 1998.
14. Mysorekar U. Eye on religion: clinicians and Hinduism. Southern Medical Journal 2006;99:441.
15. Whitman SM. Pain and Suffering as Viewed by the Hindu Religion. The Journal of Pain 2007; 8:607-613
16. Hindus in American Textbooks, Hinduism Case Study - Minority in America 2018. <https://rpl.hds.harvard.edu/religion-context/case-studies/minority-america/hindus-american-textbooks>



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