GUIDELINES FOR HEALTH CARE PROVIDERS INTERACTING WITH PATIENTS AND THEIR FAMILIES WHO ARE MEMBERS OF PROTESTANT RELIGIOUS GROUPS

BACKGROUND AND INTRODUCTION

There is no “Protestant Religion” as such. “Protestant” is a term which applies to a large number of Christian groups. The Handbook of Denominations lists over 240 groups that can be identified as such. See the appendix for a representative list of religious groups which fall under the category of Protestant.

These groups do not accept the authority of the popes of Roman Catholicism or the patriarchs of Orthodox Christianity. For most Protestants, the symbol of faith is the empty cross rather than the crucifix. Some groups have historical roots in the Protestant Reformation during which time the founders seceded from the Roman Catholic Church. Some developed later as a result of disagreements over points of faith or practice in those original Protestant groups. Others have arisen around leaders who gathered a following after having a religious experience or insight.

Some Protestant groups are identified as “denominations” in which the individual congregations are affiliated with one another in a more or less centralized organization. Other groups prefer a more independent or autonomous style of church government and are identified as “nondenominational” although they may have some affiliation with a loose-knit association of congregations. Some will share a name and some practices but will differ in the interpretation of their beliefs. For example, there are nine groups which use the name Lutheran, but each is a separate faith group.

RELIGIOUS BELIEFS

Protestant groups vary widely in beliefs, forms of worship, interpretation of the Bible, and expressions of faith. In general, all believe in one God as creator, affirm a belief in Jesus Christ as God in human form, claim the Holy Spirit as God’s currently active presence in the world, observe the rituals, or rights, of baptism and holy communion, and view the 66 books of the Old and New Testaments (the Bible) as the authority for faith and practice. Members believe that life is to be lived as an expression of gratitude for God’s love as revealed to them in Jesus. A member is expected to enter into a personal relationship with God.

There is wide variation, not only between groups but within each group, in how these beliefs and practices are interpreted. For example, the understanding and timing of baptism, the significance and frequency of Holy Communion, and the expected personal behavior of members will be interpreted differently from group to group. Some groups practice infant baptism and others postpone baptism until the believer can make a personal statement of faith.
The method of baptism also varies from total immersion of the body to the pouring or sprinkling of water on the head.

For some, it is important to have Holy Communion daily or weekly and for others four times a year is sufficient. Some groups encourage freedom of thought and do not have a specific set of beliefs one must affirm, while others have a more clearly identified creed.

Leadership generally is provided by clergy, although not all groups agree on the need for training or ordination for clergy. There are also differences regarding the ordination of women as clergy for church leadership.

As with all patients, regardless of religion, a thorough personal history is advised to identify specific religious and personal preferences and practices.

**CULTURE AND CELEBRATIONS**

Protestant groups include persons from many ethnic, racial and cultural backgrounds. Ceremonies and celebrations are held at times of birth, confirmation or coming of age, marriage and death according to the individual’s culture and family tradition more than according to the religious group.

Advent and Christmas in December, and Lent, Maundy Thursday, Good Friday and Easter in the spring, are the most widely recognized observances for Christians. Advent is the 4-week season of preparation for the celebration of the birth of Jesus (Christmas). Lent, beginning on Ash Wednesday, is the 40-day period of preparation for the celebration of Easter. Maundy Thursday, the Thursday before Easter, is the time for remembering and reenacting the Bible story Jesus’ Last Supper with his 12 disciples. Good Friday is the observance of the day when Jesus was crucified. Easter Sunday is the day when Jesus is believed to have risen from the dead (resurrected). The resurrection of Jesus on Easter is the reason most Christians worship on Sunday, the first day of the week, rather than on the seventh day, or Sabbath, (which is the practice in many other religions).

These holidays and seasons are observed with varying degrees of intention and adherence to beliefs. There are no specific requirements of members during these times, but there may be individual preferences, such as the having ashes applied to one’s forehead on Ash Wednesday or observing periods of fasting during Lent. Most practicing Christians will want to spend time with family on Christmas and Easter and will not want to be hospitalized on these days. If they must be hospitalized, provision should be made for visitation by family.

**BELIEFS RELATED TO HEALTH CARE**

Protestant Christians will differ in their understanding of the cause of illness, some seeing it as a consequence of personal behavior and expressing guilt or shame. Others may view their illness as coming from causes over which they have no control and may see themselves as victims. Some may interpret illness as punishment or as a personal test from God. Some will view illness as a part of the natural course of events and will take responsibility for doing what is necessary to overcome a temporary inconvenience and return to their normal routine of life. Since these ideas are often related to a person’s experiences and relationships, it is best to refer patients to their clergy or to the Chaplain if staff finds the patient’s views troublesome.
A number of Protestant groups do not practice infant baptism. In some cases the rite associated with birth involves the naming of the child. Staff should ask the parents’ preferences regarding baptism if a newborn is in crisis.

Most Protestants will affirm that God is the source of all healing and that health-care workers, procedures and medications are instruments of God. A small number of Protestants come from a tradition which originally practiced, and in some cases still practices, faith healing. These persons will have some reluctance to trust modern medical practices. They may have attempted self-treatment and may want to be ministered to by faith healers in addition to receiving care from hospital staff and physicians.

A number of Protestant groups regularly offer services of healing and spiritual renewal. These services, which may include prayers, reading of Scripture, and anointing with oil, are presented in conjunction with the support of the healing ministry within the health care community.

There is no universal agreement among Protestant individuals or groups on abortion. Some are pro-life and some are pro-choice.

**MEDICAL & NURSING CARE**

In general, Protestants will be receptive to medical care as practiced in today’s health care environment. Individual preferences, expectations, and demands will be related to the patient’s personality and family/cultural system rather than to their religious beliefs.

Many Protestant groups affirm gender equality even though individual families may not practice it. Staff may encounter some families in which males are expected to be the decision-makers.

**SPIRITUAL CARE / PRAYERS**

Although there is no universal standard for training of clergy, many require seminary education. Most major Protestant groups expect the clergy to receive some training in pastoral care of the sick, such as clinical pastoral education (CPE).

Visitation by clergy is usually welcomed, often expected. Some prefer only their own clergy and others will be receptive to visits from the hospital chaplains. Although there is no universal standard for training of clergy, most major groups expect the clergy to receive some training in pastoral care of the sick. There will, however, be noticeable differences in competence of the clergy in this area. Staff should respect the privacy/confidentiality of patient/clergy visits and refrain from entering the room when clergy are present.

Many Protestants will not expect to receive Holy Communion on a daily basis while in the hospital, but some may request the sacrament at times of heightened anxiety, for example, some time prior to surgery. The patient should be asked if they prefer the sacrament from their own clergy or from the hospital chaplain.

Some Protestant groups practice anointing for healing, usually with oil, and patients in these groups will request this from their own clergy and/or congregation members.

Many Protestant groups have members who take responsibility for praying for those who are ill or hospitalized. Sometimes those persons will come to the hospital to pray with the patient. Privacy should be provided when this occurs.
**DIET / FOOD PREFERENCES & PRACTICES**

While there are no specific Protestant prohibitions or requirements related to diet, individual preferences may vary, especially regarding consumption of caffeine, meat, and alcohol. Always ask the patient for his/her preferences.

**END OF LIFE CARE**

In general, Protestant groups support the drafting of advance directives. Most groups do not forbid cremation. Stillbirth, miscarriage and infant death are occasions for grief and families are provided with support and care, depending on the competence of the clergy.

Some groups make available specific rituals and practices at the time of one’s dying and death. Many prefer family members, friends and their own clergy to be present for comfort and prayers at this time. Consult with the family regarding their preference.

Typically, Protestant groups do not prohibit organ/tissue donation or autopsy. Most groups encourage organ and tissue donation as a way of caring for others. However, individuals will have their own beliefs and preferences regarding these issues, so staff should ask the patient/family and/or surrogate about those preferences.

**RESOURCES AND REFERENCES**

Contact your facility’s pastoral care department for specific information regarding local congregations.


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Appendix - List of Religious Groups Identified as Protestant

(Note: This list is not exhaustive but is presented as representative)

Adventist groups
Amana Church Society
American Evangelical Christian Churches
Apostolic Christian Church
Assemblies of God
Baptist groups (26 groups)
Bible Fellowship Church
Bible Protestant Church
Bible Way Church, Worldwide
Brethren groups
Christian and Missionary Alliance
Christian Catholic Church
Christian Church - Disciples of Christ
Churches of Christ
Church of God (7 groups)
Church of God in Christ
Church of God of Prophecy
Church of God, Holiness
Church of the Nazarene
Community Churches, International Council
Congregational Bible Churches, Inc.
Congregational Christian Churches

Episcopal/Anglican groups
Evangelical Covenant Church
Evangelical Free Church
Foursquare Gospel
Independent Fundamental Churches of America
Lutheran groups (9 groups)
Mennonite (13 groups)
Methodist groups (11 groups)
Metropolitan Community Churches
Moravian
New Apostolic Church of North America
Pentecostal groups (9 groups)
Plymouth Brethren
Presbyterian groups (9 groups)
Reformed Churches (6 groups)
Salvation Army
Spiritualist
Swedenborgian Church
United Church of Christ
Unity School of Christianity
The Wesleyan Church