



A time to reflect

As a holy month of fasting, patience and community begins for millions of Muslims in the UK, we look at the impact Ramadan can have on patients and colleagues and what those not observing it need to be aware of.

Words Alia Waheed

The holy month of Ramadan is beginning for more than a billion Muslims around the world. Ramadan is one of the five pillars of Islam, when Muslims fast from dawn until dusk. Rather than being considered a month of hardship, Muslims perceive Ramadan as a spiritual bootcamp, where they can focus on self-discipline and reflection – culminating in Eid al-Fitr, a day of family and feasting to celebrate the end of the fasts.

‘Ramadan is a month during which Muslims believe that the Quran was sent down to mankind,’ explains Dr Wajid Akhter, assistant secretary general of the Muslim Council of Britain and a practising GP. ‘The month can be seen as a recharging of spiritual batteries, where Muslims are encouraged towards reconnecting with their faith through prayer, fasting and charity.’



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Dr Wajid Akhter

them a sense of identity, routine and comfort.

‘Many of the elderly population make it difficult for themselves by trying to follow their religion strictly although their medical condition prevents them,’ says Abeeha Zayyab-Shahid, lead clinical podiatrist at Foot Soul Podiatry in Edinburgh. ‘Always ask patients to seek medical advice and reassure them that, if they have medical conditions that would make fasting difficult or life-threatening, it’s not compulsory.’

The British Islamic Medical Association provides a compendium of evidence for clinicians to have informed discussions with patients who wish to fast despite their medical conditions (see *Resources*).

It asks whether, for patients falling under high-risk or very high-risk categories wishing to fast, shorter fasts in the winter would be a safe alternative. If not, or if patients are unwilling to defer fasts, it says they should be supported and receive structured education where appropriate; be followed by an appropriate specialist/primary care contact while fasting; monitor their health regularly; adjust their medication dose, frequency and timing as per recommendations; and be prepared to break the fast or abstain from fasting in case of adverse events. ➤

Eat, sleep, pray, repeat – my Ramadan routine



Abeeha Zayyab-Shahid,
lead clinical podiatrist at Foot Soul

Podiatry in Edinburgh, shares her Ramadan routine.

We have to wake up before sunrise to eat before our fast begins – this time can vary from 1am to 5am. After waking up to eat, I pray; then I catch up on sleep with a power nap. I then have to wake up for work at 7am. This disturbance in sleep is one of the biggest challenges, and goes on for a month or so. It does take its toll and it is a huge adjustment for your body clock, in addition to fasting.

However, after a week or so your body does start to adjust and your disturbed sleep pattern is your new normal. As I am not eating, I try to move my lunch hour to suit prayer time.

I find it beneficial to eat light and healthy food, and go to sleep as early as possible to prepare for the next working day.

Breaking the fast

Fasting during Ramadan is intended as a discipline and requires abstinence from anything taken orally during daylight hours, including water and smoking. Patients who are fasting may be reluctant to book appointments that clash with prayer times or the hours prior to breaking the fast because they need to prepare food or may feel tired.

Children, the elderly and people with a health condition (particularly heart problems) – as well as those who are temporarily unwell, pregnant or menstruating – are not expected to fast. Of course, there are many Muslims with chronic conditions, such as diabetes, who are exempt but may still choose to fast. For some, a steadfast commitment to Ramadan goes beyond religious beliefs: it is psychological, and gives

Clear communication

When faced with a situation where medical advice contradicts a patient's religious inclinations, it's obviously important to respond sensitively and supportively. Suggesting that fasting is bad for someone's health or could stop them from doing their job properly, and making assumptions about someone's beliefs, could leave patients feeling defensive.

When faced with a determined patient, practitioners need to be prepared to work around it and adjust treatment to fit around fasting. Often it is better to initiate the conversation beforehand, as there is a danger that patients may alter or stop taking their medications without consultation during fasting, which can lead to serious complications such as dehydration, hypoglycaemia, hyperglycaemia and diabetic ketoacidosis.

Ritual ablutions

A key part of Ramadan that has particular implications for podiatry is the adherence to performing ablutions called wudhu, in preparation for the five daily prayers. The process of wudhu involves washing different parts of the body, including both sides of the feet up to the ankles, and is considered an act of worship in itself.

Research by Shankhdhar (2021) found that the process of performing wudhu could have a positive impact on diabetic amputation prevention. The focus on washing feet means people are more likely to notice lesions or changes to their nails, leading them to seek medical attention earlier.

However, if performing wudhu would have negative implications on a patient's health, there are other alternatives. 'If you have been asked to keep your foot dressing clean and dry but need to perform wudhu, there are ways around it,' says Abecha.

'Firstly, you can completely refrain from washing that foot and your wudhu will still be complete.

+ RESOURCES

- Compendium of evidence for clinicians to support patients with medical conditions who want to fast: britishima.org/guide/ramadan-compendium
- An overview of the effects of fasting on patients: bit.ly/Ramadan-primary-care
- Ramadan health guide for patients: bit.ly/Ramadan-health-guide
- Managing medications during Ramadan: bit.ly/Ramadan-medication
- Template for initiating a positive conversation about Ramadan in the workplace: bit.ly/workplace-conversations

However, to instil good hygiene and prevent the surrounding skin devitalising, there is no harm in cleaning around your dressing as this will also ensure your wudhu is accepted and keep your feet healthy.'

Supporting colleagues

While colleagues who are fasting will generally be able to get on with the job, the first few days while adjusting to the lack of sleep and going without food, water and caffeine for 15 hours a day can be taxing for the mind and body. Fasting colleagues may feel fatigued and struggle to concentrate, especially towards the end of the day.

For most Muslims, Ramadan is a part of life and they will take precautions to ensure fasting doesn't impact their work. Questioning a colleague's ability to do their job while fasting can be perceived as a microaggression.

'Communication is key,' says Usamah Khalid, vice-chair of the College's equality, diversity and inclusion committee. 'Speaking to colleagues about fasting and the needs and requirements of it

Medication during Ramadan

- If medication needs to be taken during the fasting period, patients should not fast.
- If the medication is required as treatment for a short illness, they can compensate for missed fasts by fasting on other days when they are well.
- If medication is required on a long-term basis as part of an ongoing illness or condition such as high blood pressure or diabetes, patients could discuss with their GP whether they could switch to a long- or short-acting variety as appropriate, to allow them to take it outside the time of the fast.
- Patients with a disease that is unstable or poorly controlled are advised not to fast.

Source: Muslim Council of Britain, 2014

will likely mitigate any perceived microaggressions. These may be innocent comments, as inquisitive colleagues may simply be asking to learn more.'

An awareness of Ramadan among staff will help pre-empt misunderstandings (see *Resources*). Basic courtesy, such as organising events that aren't based around eating, or scheduling important meetings at times that don't clash with prayers, goes a long way. Small gestures – like having a clean, quiet space that is given over to ablutions and prayer, and which everyone respects – can have a significant impact on staff morale.

Employers' obligations

Ensuring non-Muslim staff have access to information on the basics of Ramadan can help support their own work and ensure Muslim staff don't feel the pressure of having to educate their colleagues. There are plenty of helpful resources available, including Planned Parenthood Action's guidance on talking about Ramadan in your workplace (see *Resources*).

The Equality Act 2010 makes it unlawful to discriminate against someone because of religion or beliefs, meaning managers need to understand the implications of Ramadan for employees. 'Best practice would be for an employer to increase the general awareness of what Ramadan is and how it may affect their peers,' says Anwar Ali, employment relations officer at the College.

As a responsible employer, it's important to ensure there is flexibility around existing holiday entitlement and working patterns to accommodate prayer times and time off for Eid. 'As prayer is an important part of Ramadan, if someone wants prayer breaks – while there isn't a legal obligation – such requests should be considered sensitively by employers,' Anwar says. 'It's a bit of a balancing act. A common-sense approach is needed.'

Be mindful

Make sure genuine curiosity doesn't stray into the territory of microaggressions.

'People often get upset when others assume that fasting is unhealthy or causes those who are fasting to be incompetent at their jobs. Over a billion Muslims fast and still manage jobs that are complex,' says Dr Wajid Akhter.

Fasting is a personal decision – so if you spot a Muslim work colleague putting the kettle on during Ramadan, don't question them.

Although a lot of people are happy to chat about Ramadan, not everyone is. If somebody doesn't feel like talking about it, don't push the subject.

The key is that an employer must act 'reasonably', Anwar says. Requests for temporary accommodations during Ramadan – like the provision of flexible or remote working – shouldn't be turned down without good reason. This should not stray into preferential treatment: for example, only offering remote working to Muslim staff.

Employers have a duty of care to their employees, while staff have a responsibility to be aware of potential health issues related to their own fasting. It is important to make informed choices to fast safely while looking after patients effectively, without fear of creating a negative atmosphere at work. Practitioners should work with their employer to look through their job description or a list of the tasks they are planning to carry out during Ramadan, to assess if anything could put themselves or others at risk: examples might include driving long distances or attending clinics that run late into the evening.

Anwar also advises that employers shouldn't hold performance management meetings during Ramadan, especially if these are linked to annual bonuses. 'You don't want to be penalised if you're not working to the best of your ability,' he says. 'The symptoms of fasting can be fatigue and a lack of concentration. You won't be as sharp as you would be if you weren't fasting.' If a manager doesn't take these circumstances into account, there is a risk that this could become a case of religious discrimination.

Thinking ahead

Ultimately, Ramadan is a part of life for most Muslims. If non-Muslims accidentally offer a fasting colleague or patient a cup of tea or say 'Happy Ramadan' rather than 'Ramadan Mubarak', it wouldn't normally cause offence. But, as Abeeha says, better education would benefit everyone. 'It would be better if we all had the baseline information of major practising religions to prevent making individuals feel like an inconvenience when they request basic needs or adjustments to practise their religion.'

'From my experience, non-Muslim colleagues try to omit discussing food or drink or even eating during their lunch break if I am present in a bid to be respectful,' adds Usamah. 'This is not necessary. Muslims fast for their own personal and religious reasons, so please feel free to chat about your evening meal and dunk that biscuit in your tea – it's all good!'

Ramadan poses challenges but also presents an opportunity for Muslims to 'reset' their attitude to health and lifestyle by managing their eating habits and exercising self-control and discipline.

Fasting can also provide an opportunity for healthcare professionals to promote healthy lifestyle advice on topics such as diet and smoking cessation. With care and planning, podiatrists can invite Muslim patients to think about improving their health outcomes in the long term – not just during Ramadan. **TP**



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