Redefining of concepts of nursing’s meta-paradigm from the perspective of Islam

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Background & Aim: The four elements of the nursing meta-paradigm, namely, human, health, environment, and nursing have attracted much attention in the West for years. This study redefined the meta-paradigm or core concepts of nursing from the perspective of Islam.

Methods & Materials: A qualitative content analysis was used to collect and analyze data. Data collection were based on in-depth semi-structured individual interviews and focus groups with religious experts and nursing faculty members with many years of experience in training nurses and providing clinical patient care. The samples were selected purposefully and to the extent that data saturation was reached. The data were analyzed using deductive content analysis.

Results: Human in the Islamic model of care, the concept “human being” describes a creature capable of growing unified and holistic; capable of acting, choosing, and willing; and God’s successor who was assigned to reach a goal by God, and the human should move on the path to the goal. From the perspective of Islam, “health” encompasses sickness and disease in a holistic view that considers illness as a path to blessings, and purification of the heart (and spirit or mind). The environment includes not only the physical world but also the metaphysical world. Based on the Islamic model, all creatures are interconnected through webs of relationships that connect across space and time. Finally, “nursing” is a reciprocal relationship between the nurse and patient that optimally leads to (mutual) growth. The concept of nursing encompasses caring that includes God, through the establishment of win-win relationships with patients (and their families) through prayer, caregiving, and professional behaviors, and actions associated with faith and Godliness in Islam.

Conclusion: In the Islamic worldview, not only the nursing meta-paradigms but also the whole universe has been formed on the basis of the monotheism core concept that is different from the Western philosophy. Thus, redefinition of nursing meta-paradigmatic concepts on a monotheistic basis in Islamic countries is of special importance. Redefining nursing Islamic meta-paradigm is beneficial for both Muslim and non-Muslim countries, because it can promote understanding and exchanging of dialogue between nursing scholars and health care professionals and also it can introduces a new point of view about human, sickness and health, environment, and care for them. Hence, this article can be helpful for cross-cultural nursing because understanding the differences and commonalities between cultures can help us go beyond our differences and share our common values to deliver person-entered care. In fact, as Muslims benefit from Western models, non-Muslims can use this concept to provide care to their patients, too.

Key words: meta-paradigm, nursing philosophy, ontology of nursing, epistemology of nursing, Muslim, qualitative research, Islam

Introduction

The exclusive perspective of a discipline is defined by its meta-paradigm, or general perspective that serves as a central focus, distinguishing fields of study (1). Every discipline has its own meta-paradigm. The most professions have individual meta-paradigms from which numerous theories arise, and the theories deter-
mine the phenomena with which the profession is concerned and explain how a discipline discusses the phenomena in its own way (2). The words paradigm and meta-paradigm are frequently used in nursing. Paradigms provide the parameters and frameworks for organizing the knowledge of a discipline. Therefore, the most subjective core concept of nursing discipline is its meta-paradigm that is detected with the four concepts person, environment, health, and nursing. In every conceptual model, this concept is defined according to the philosophical models of that model (3).

Through the logical expression of ideas, philosophies define the meaning of nursing and its phenomena. They provide people with broad general statements of nursing that clarify nursing values and answer the questions related to the domain of discipline (3). In this respect, although the four core concepts of meta-paradigm are discussed in theories, theorists tend to discuss them from different perspectives. As a result, the definition of nursing, person, environment, and health is different from one theorist to another one (4).

The relation of nursing to philosophical beliefs is now obvious. The relation mainly involves the new philosophy of existentialism that has been employed by nursing theorists, such as Paterson and Zedrad, Wiedenbach, Watson, Levin, Orem, Margaret Newman, Rosemarie Parse, and Travelbee (2). Existentialists introduce the human as a creature with absolute freedom. The existentialist theory is different from what Marxism, sophism, stoicism, and so forth thought of humans (5).

Therefore, the transfer of ideas from one nationality to other nationalities is not wrong, while the generalization of a group’s functions over other groups may not be always right. Moreover, most of the nursing theories are developed in the United States and have a different cultural context, healthcare structure, and educational programs (4).

However, the Islamic worldview is monotheistic, that is, the universe was created out of a wise providence on the basis of goodness and mercy for conducting the creatures to the perfection they deserve. The monotheistic worldview is a “single core” world with the essence of “we belong to God” and “we shall return to him” (6). This kind of worldview that considers the universe as a dependent entity results in different views of the universe, human, and values (7).

In this respect, when the fundamental philosophy of a system has a different view of the universe and the human as the center of the universe, it needs models appropriate for its philosophy. So far, little has been written about development of a theoretical framework for care from the Islamic perspective, and current models cannot meet the holistic needs of Muslim patients. Therefore, Muslim nursing scientists should develop a nursing framework applicable for Muslim and non-Muslim patients in Islamic countries (8). Unfortunately, the efforts made to embed the religion in all individual and social aspects, especially in medicine, did not study the subject from the Islamic perspective (9).

It is essential to improve the nurses’ basic knowledge about the fundamental principles of different cultures and religions. Nurses must be aware of the health functions and the restrictions that may have a cultural or religious origin (10). Therefore, the researchers conducted a qualitative study for redefining of concepts of nursing’s meta-paradigm in the perspective of Islam.

**Methods**

For this study, a qualitative content analysis method was used. “Qualitative content analysis has been defined as a research method for collecting the subjective interpretation of the content of text data was the through the systematic classification process of coding and identifying themes or patterns” (11).

The qualitative content analysis as an inductive approach is a process of reflection, deconstruction of data into codes and reconstruction into interpretive themes and patterns, and finally, the eliciting of meanings from the text (12).

The study participants consisted of 26 persons (14 males and 12 females). All participants volunteered to take part in the study. In general three religious experts, 23 members of the nursing school of Universities of Medical Sciences in Tehran participated in this study. Details are given in table 1.
The researchers gathered the data from individual deep interviews and focus groups. The individual interviews were obtained from three religious experts and three members of the nursing school of Tehran University of Medical Sciences about the identification of Islamic model of care in Tehran and Qom, Iran. They were interviewed at their workplace for 1 hour on average. The interviews were based on an interview guide relating to the main questions of interest for the study. It included the following questions: these questions were asked from both of group (1) How is the care based on Islamic model? (2) What elements should be in the Islamic caring model of? And (3) Which factors do you think act as barriers Islamic caring model and also were asked from nurses about their experience of the monotheistic caring model?

The results of the individual interviews were discussed within two focus group meetings. Each meeting was held with the presence of the researchers of this study, two religious experts who participated in the individual interview, and 10 members of the nursing Faculty of Universities of Medical Sciences in Tehran, in the School of Nursing and Midwifery of Tehran University of Medical Sciences. The meeting lasted 90 minutes on average. A video record was prepared from both meetings.

Ethical issues in the study involved the assurance of confidentiality and autonomy for the participants. The participants were informed about the purpose and design of the study and were voluntary nature of the participation. Medical Ethics and History of Medicine Research Center of Tehran University of Medical Sciences also approved and financed the original research.

The interviews were recorded digitally. Content analysis was applied for data analysis after each interview; the digitally recorded was transcribed verbatim and analyzed as the information was being collected. Each interview was coded and analyzed before going on to the next one. After the transcripts were carefully and thoroughly read and reread line by line, key sentences and concepts were highlighted and coded. In the next stage, the meaningful units and initial themes in the data were identified and grouped into domains. The analysis process was iterative, and themes evolved (added, deleted, and merged) as re-reading was completed and analysis progressed. Then, major domains were regrouped into main themes.

Then, similar to that of individual interviews, the video’s content in focus group sessions was typed and encoded word by word. The new codes were integrated to the codes obtained from the individual interviews, and the emerged themes were introduced as the Islamic model of care.

To increase the rigor and credibility of the findings, several methods such as member checking and peer checking were combined. The following measures were carefully carried out taking daily notes while collecting the information, close and prolonged interaction of the research team with the participants for the more accurate interpretation of the collected data when analyzing the data, and all of the participants to verify the interpretations of the research team. The overall level of agreement about peer checking and member checking was above 95%.

Results

In Islam, all elements of creation refer to a definition of a single core “Velayi” system for the universe on which everything is defined. A single core is Allah, it means all of things are created by him, be guided with him and he has the right to determine the rules for human life. Therefore, definition of everything in this world gets the essence of “we belong to God” and “we shall return to Him.” Relevant to this definition, concepts of nursing’s meta-paradigm in the perspective of Islam were completely redefined as follow and also abstract of definitions was shown in table 2.
Concepts of nursing’s meta-paradigm from the perspective of Islam


Table 2. Definitions of concepts of nursing’s meta-paradigm in the perspective of Islam

<table>
<thead>
<tr>
<th>Concepts</th>
<th>Definitions</th>
</tr>
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<tbody>
<tr>
<td>Human being</td>
<td>Human as a creature capable of growing</td>
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<tr>
<td></td>
<td>Human as a unified and holistic entity</td>
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<tr>
<td></td>
<td>Human capable of acting, choosing, and willing</td>
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<tr>
<td></td>
<td>Human as God’s successor</td>
</tr>
<tr>
<td>Health</td>
<td>Considering the purpose of humanity in the Islamic model of care</td>
</tr>
<tr>
<td></td>
<td>A holistic view to health</td>
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<tr>
<td></td>
<td>Diseases as a promoting blessing</td>
</tr>
<tr>
<td></td>
<td>Having a sound heart, the highest level of health</td>
</tr>
<tr>
<td>Environment</td>
<td>includes physical and metaphysical world</td>
</tr>
<tr>
<td>Nursing</td>
<td>Care means establishing a win-win relation between patient and nurse</td>
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<td></td>
<td>Care as praying God</td>
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<td></td>
<td>Virtuous caregiver</td>
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<td></td>
<td>Care in the sense of emanating attributes of God</td>
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</table>

**Human being**

Based on this concept, human has five main characteristics in the Islamic model of care, including a creature capable of growing; unified and holistic; capable of acting, choosing, and willing; and God’s successor who was assigned to reach a goal by God, and the human should move on the path to the goal. An example of participants’ statements was given for each of the following subcategories:

*Human as a creature capable of growing*

One of the religious experts stated: “We must notice differences between humans and stone, objects, and animals. The types of care for these items are different from one another. The model of care must be defined for every difference between them. As the humans can grow, unlike stone, nursing care of them would be much more difficult.” (p3)

*Human as a unified and holistic entity*

In this subcategory, the participants paid attention to the point that human has multiple dimensions that are inseparable and should be considered comprehensively in the health system. One of the healthcare professionals who had Ph.D. in nursing and had educated in religious affairs for years explained: “It’s the case of holistic philosophy. I mean we can’t separate the existential dimensions of human, and say that we, as nurses, only concern the physical pains of patients! We have nothing to do with their beliefs and thoughts that have been damaged by the disease, or the patients’ emotions that have been hurt! As a nurse, I am responsible to consider the impact of patients’ mental status on their physical condition.” (p15)

**Human capable of acting, choosing, and willing**

In this subcategory, the human is capable of acting and willing, so he can play an important role in his well-being. This means that human can decide to be healthy or sick regarding the lifestyle he chooses. Therefore, this subcategory emphasizes on the role of human in choosing health or sickness. One of the participants who had studied and taught nursing for years pointed out: “In view of all monotheistic religions, human is a creature with capability of acting, choosing, and willing. This means monotheistic religions believe that human determines his destiny and can choose with the willing and acting power God grants him.” (p11)

*Human as God’s successor*

In monotheistic religions, the human has been always considered as God’s successor, that is, God has given human capabilities that can be a manifestation of God’s attributes, or a perfect human, according to divine religions. In this regard, a healthcare specialist participating in the study stated: “As God has breathed his soul into human, it means that there is a stage in which the soul is given to human body. The human dignity can boost to the extent that God allows him as His successor. It means that God has given him the capacity of becoming a successor.” (p2)

*Considering the purpose of humanity in the Islamic model of care*

The purpose of creating human must be considered in the Islamic model of care. One of the participants explained: “The purpose of reaching humanity is also embedded in the Islamic model. It doesn’t mean only a comfortable life
but the purpose must govern all the aspects of life, I mean, it must be respected in health and sickness the same.”(p17)

Health

In the Islamic model of care, health and sickness are tools for helping humans to move toward the purpose of humanity that has been determined by God. In this respect, health is having a sound heart. Three subcategories were extracted for this concept as follows: A holistic view to health, diseases as a promoting blessing and having a sound heart.

A holistic view to health

In the monotheistic system, being healthy means the emanation of health in all aspects of life. In this respect, Islamic instructions do not endanger humans’ health but even ensure humans’ health in all aspects of life. In his interview, a religious expert pointed out: “If you pay attention to the Islamic commandments, you see that every instruction has many health benefits besides the sense of worshiping, instructing, and the purpose God has embedded in it.”(p1)

Another participant emphasized on the monotheistic system’s holistic view to the health and stated: “If we’re supposed to separate the domain of human dignity and spirituality from human, providing service to human is practically senseless. It means human is considered as an object, like many other objects.”(p3)

Diseases as a promoting blessing

In monotheistic religions, diseases have been introduced as an element of human survival that can conduct humans toward the truth of life, that is, diseases are tools making people aware of the truth of life or conducting their spirit toward perfection. In this regard, three statements of the participants are as follows:

“Diseases are generally considered as an element of human survival.”(p1)

“Diseases are just like background, simply preparing humans to detect the truth.”(p6)

“When people think of diseases as tools for their punishment, or tools for promoting them, so they always see diseases as instructive tools.”(p15)

“When people get sick, they can strengthen their will if they define the philosophy of their creation in a way encompassing the sickness that may have benefits for them.”(p5)

Having a sound heart, the highest level of health

Having a sound heart refers to the condition that human gains God’s satisfaction and heartfelt peace and confidence. In such a position, if human gets sick physically, he lives in peace and confidence of God’s satisfaction. Relevant statements of the participants are as follows:

“A trial for a faithful person with a sound heart is a cause for promoting spirit, a confident heart, and reaching the high position of God’s satisfaction.”(p10)

“Having a sound spirit that is our final purpose is important for all monotheistic religions and care of all diseases in the entire world.” (p23)

Environment

The environment as an element of care is a concept of nursing meta-paradigm. In the Islamic model of care, the environment includes not only the physical world but also the metaphysical world. Based on the Islamic model, all the creatures have hierarchies besides their chain-like relations and interactions. Actually, it does not consider all the things under the title of environment, which is called “the creation system” in the Islamic model and influence people’s health and sickness, only related to the physical world that is understood by senses but also related to the metaphysical world. Having classified the universe into three worlds, one participant pointed out: “Our environment involves the physical, sensible and imaginable worlds, that is, we should consider the influence of the unseen world, souls, and angels on our destiny.”(p15)

The above participant continued: “In the environment, we believe in “we belong to God, and we shall return to Him, thus, all creatures have hierarchies of life and soul, and hierarchies of the soul made the creatures praise God. So, if we can be coherent with the creation world, our wellbeing is ensured ... Therefore, we, as humans, are influenced by environmental circumstances, and the environment develops the states, or conditions, we feel in ourselves...”(p15)

Nursing

The Islamic model of care regards the care as a patient-nurse reciprocal relation that leads to their growth in the case of the good practice of
both parties. As the care provided to human who is God’s successor on earth, it can provide the ground for emanation of the attribute of God. In this respect, the caregiver has a special position, and his/her practice is considered as praying God. Relevant to the right understanding of the sense of caregiver and care, the following subcategories emerged: Care means establishing a win-win relation between patient and nurse, care as praying God, virtuous caregiver, and care in the sense of emanating attribute of God.

Care means establishing a win-win relation between patient and nurse

In the Islamic model of care, care of a human as God’s successor on earth is so important that if the caregivers provide the care properly to God’s satisfaction, they promote their position before God besides helping patients to recover. Therefore, care in the Islamic model is a reciprocal relation that benefits both patient and caregiver if it is performed appropriately. In this regard, the statements of a healthcare specialist and an Islamic scientist are, respectively, presented as follows:

“As the nurse practices the care more accurately and intentionally for God’s satisfaction, he/she promotes him/herself as well.” (p18)

“Well, this is really beautiful that when people look at the act of God, they can promote themselves. But, acts of God are different; flowers is an act of God, humans are acts of God. But they are different each other’s, God praised itself for creation of human. How much do humans grow in these acts?” (p3)

Care as praying God

In the Islamic thought, humans are rewarded or punished for their acts. Moreover, the care practice in Islam will be taken as praying if it is provided properly to God’s satisfaction. Therefore, caregivers will be “reward recipient” before God. Statements of two participants were as follows:

“So, caregivers are continually praying when they are providing care.” (p4)

“If they really provide the care to God’s satisfaction, all their tasks will be praying, and God rewards them instead. When a nurse doesn’t sleep at night to help patients who may need care during the night, this nurse’ vigilance can be a kind of praying.” (p12)

“Providing care and treatment to patients is very important and worth of rewards before God.” (p1)

Virtuous caregiver

In Islam, virtue means avoiding what makes God wroth and behaving what satisfies God. In the Islamic thought, caregivers’ being virtuous affects the process of providing care and accelerates patient recovery. In the Islamic model of care, caregivers are encouraged to be virtuous. Regarding virtuousness, two participants explained:

“We, as influencing agents, can speed up patient recovery by enhancing our will power and the patients’ will power.” (p5)

“I am a trustee as a nurse and God’s successor prostrated by angels, so, my behaviors, actions, and reactions against my patient must be highly controlled.” (p15)

Care in the sense of emanating attributes of God

According to the Islamic model of care, when humans are God’s successors, they can be manifestations of attributes of God. This refers to the point that humans can emanate all attributes of God. In Holy Quran, God says, “We taught all the names of God to the human.” In this respect, providing care is also a way of emanating the attributes of God. In this regard, one participant stated: “If we want to practice nursing for the sake of God, it’s a very serious duty. If we consider Breathed some of my spirit into him,” how should the nursing be practiced?! … If we want to emanate God’s names; preserver, knowledgeable, allegiant, pious, guide, compassionate, and merciful; we should care of the divine soul.” (p7)

Discussion

Results of the study showed that some extracted themes are similar to those of western models of care. For instance, holism in all human aspects has been attracted the attention of some theorists, such as Parse and Watson. However, some themes of the Islamic model had differences with those of the Western model. The most significant differences regarding the definition of human were related to the purpose of humanity and paying attention to capabilities of human as God’s successor. In the health concept, the most significant differences were relat-
ed to the sound heart and the disease as a gift of God. In the environment concept, the most significant differences were related to paying attention to all worlds, especially the unseen world, which causes different senses of care and caregiver. In fact, all meta-paradigmatic concepts in the Islamic model of care are interpreted according to the monotheism and religion. However, the definitions of these concepts in most nursing theories of the Western model are based on existentialism (2).

Definitions of these concepts on the basis of monotheism are different from those spiritual senses mentioned in the Western models. In this regard, Tanyi (13) points out that spirituality is inherent, and it is a subjective, multidimensional, and intangible concept that may be relevant to the religion for some people. For instance, it is directly related to the religion for Muslims and Christians, and this relation is evident in their religious texts. However, for others, it may be the purpose of life regardless of the religion.

Therefore, similar to the nursing theories in which the concept of the individual has a core role, and a major focus of nursing meta-paradigm was based on the individual (14), monotheism also introduced the monotheistic human as the core care. However, in the western thought, the core role belongs to human’s own wisdom irrelevant to the revelation (15). In monotheism, humans are creatures to which God breathed of His spirit. Their body and soul are connected to the soil and God, respectively (16). Therefore, the utmost effort must be made to maintain humans’ health to let them flourish their faculties toward perfection (17).

On the health concept, the Islamic model of care regarded humans’ utmost health as the spiritual health in the sense of a sound heart (20). According to the Holy Quran, a sound heart is devoid of doubt, suspicion, hatred, envy, blasphemy, hypocrisy, deceit, worldliness, attachment to passions and the physical world, and generally things other than God. Therefore, sickness is an examination and blessing that reduces humans’ heavy burden of sins and reminds people of the value of past blessings (21).

In the Islamic thought, providing care to patients is deemed a kind of praying, and the caregiver is rewarded by God. In Islam, providing care means to be accountable, sensitive, motivated, and committed to the proper practice of instructions to reach perfection. The spiritual and metaphysical aspects of providing care can be interpreted as enjoining good and forbidding wrong (8). In Islamic narratives, the reward of one night of providing nursing care to patients is equal to 70 years of praying because the care practice gives a spiritual life to the human and helps him/her on the path to perfection (22).

In this respect, the life of human who is considered as God’s successors in the Islamic model of care is not limited to this world, but rather, after this world, human enters another world that is an unlimited area for their growth. In this evolutionary movement that is the goal of human creation, health is an instrument for providing human with necessary requirements for going through the path of perfection. Therefore, health-treatment services are of high position in Islam (17).

It is obvious that nursing theories are like a beam of light guiding nurses in practice. The various perspectives and priorities of nursing theories have resulted in different types of nursing (23). Moreover, every social system requires an appropriate model for identifying the internal and external phenomena, and this model should know and define the human clearly. In general, this clear definition can be used to define other concepts, such as health and, subsequently, the care practice (9). In this respect, the redefinition of nursing meta-paradigmatic concepts on a monotheistic basis in Islamic countries’ models of care is of special importance.
The core concepts of nursing discipline are person, environment, health promotion, and nursing. These concepts are present in writings of almost all philosophers and nursing theorists in Western countries. The healthcare professionals in Islamic countries also have paid attention to these concepts. Regarding the difference between worldviews of Western and Islamic countries, the cause of paying attention to these nursing meta-paradigmatic concepts must be the worldview governing Islamic countries, that is, the monotheistic worldview. Therefore, Islamic countries must focus on these nursing meta-paradigmatic concepts on a monotheistic basis. The results of the study showed that some extracted themes are similar to those of Western models of care. However, some themes of the Islamic model had differences with those of the Western model.

The restriction of this study is that all participants were Iranian Muslims, so findings should be generalized with caution in other Muslim countries.

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Conflict of interest

The authors declare no conflict of interest.

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