

# Clarifying the concept of the four-season symphony (I SEA) in nursing practice: A Wilson's approach to concept analysis

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## Abstract

Acquired knowledge provides one with intuitive rationality as a means of achieving a goal. Spiritual, ethical and esthetic competencies are also required for acquiring intuitive rationality. Nurses pay less attention to intuitive rationality, think only with their brain rather than observe with their heart and therefore deprive themselves of proper, immediate and comprehensive cognition of their environment. An initiative to harmonize sensory receptors in charge of thinking, speaking, and acting in nurses is required for establishing a symphonic intellectual, spiritual, ethical, and aesthetic (I SEA) nursing practice. The present research was conducted to clarify the concept of four-season symphony of I SEA in nursing practice. The present study was conducted by employing Wilson's method of concept analysis and searching databases including Google Scholar, ScienceDirect, Scopus, PubMed, SID, and Magiran using symphony, rationality, intellectuality, spirituality, ethics, aesthetic, and nursing practice as keywords. According to the integrated concept of the four-season symphony in nursing care, nursing practice refers to performing the symphonic action of four seasons of I SEA in orderly and smart thinking, speaking and acting in looking, listening, speaking, heartfelt sympathy and using the hands for caregiving and steps for accompanying patients. This symphony provides an opportunity for the emergence of perfect nurses of four seasons and helps with individual and organizational symphonic improvements in nursing care and nurses. According to this perspective, nurses should always ask themselves whether their thought, speech, and action are intellectual, spiritual, ethical and aesthetic.

## KEYWORDS

concept analysis, four-season symphony, nursing practice, Wilson's method

## 1 | INTRODUCTION

Oxford dictionary defines symphony as a combination of different elements and an ensemble piece of music for a complete orchestra in four movements, one of which is traditionally a sonata.<sup>1</sup> Four-season or four-chamber is a style of music, especially in Persian traditional music, that comprises fast, slow, and dance-like movements. Each movement is distinguished with its gamut, keys, rhythmic patterns, and harmony. Most of these pieces are filled with the spirit of

symphony, which is perceived and boosted by the ears, eyes, heart, mind, and tongue. The sound of the four-season harmony manifests itself as four-season music, as in the case of human life spectrum comprising four harmonic seasons.

In addition, four seasons is the most popular collection of pieces made by Antonio Vivaldi.<sup>2</sup> The four seasons comprises a romantic and melancholic spirit, clear melodies, strong, and varied orchestration, extremely honest and influential music and an extremely technical and emotional piece with imagination and passionate vivacity.<sup>3</sup> This piece

expresses four seasons of the year in four movements and its 12 months in 12 parts<sup>2</sup> and induces human emotions using string instruments. Vivaldi's Four-Season mainly emphasizes the musicians' performance, virtuosity and perception of music, the conductor's understanding, knowledge and dexterity in the piece, proper performance of different nuances and tempos and in-depth delicacy. Unquestionably, no piece of music has ever been as intermingled as the four seasons with covert and feminine delicacy. It also features both pluralism and a special harmony.<sup>3,4</sup>

Nursing and four-season symphony have a lot in common; nurses provide care for the patients with their intellectually, spiritually, ethically, and aesthetically keen eyes, ears, heart tongue, hand, and mind. Nursing includes understanding the meanings in dealing with the patient, establishing a meaningful relationship, skillfully performing interventions, rational determination is a suitable way for nursing practice, ethical, and spiritual guidance of nursing practice.<sup>5-7</sup> Nursing is a creative and purposeful use of self, based on skills, and competence to convey feelings and concepts to others, which is a mental process and requires interpretation, sensitivity, imagination, and active participation.<sup>5</sup> Maintaining individual balance, harmony, rhythm and unity is the power of inferential judgments aims at improving biological, psychological, social, and spiritual well-being<sup>5,8,9</sup> and realizing I SEA well-being in nursing care. The four seasons of I SEA work together in a symphonic interrelated manner in nursing practice to provide patients with quality nursing care.

Many aspects of nursing, such as nursing metaparadigms potentially relate to symphony and include the symphony of four components of person, health, environment, and nursing. A person has biological, psychological, social, and spiritual dimensions. A perfect existence or human in the world is an integrated whole and in fact, it is more than the sum of its components.<sup>10</sup> Health includes biological, psychosocial, social, and spiritual well-being of an individual and refers to perfectly achieving the potential optimized living ability and unity or integration of mind, body and soul. This whole, that is, mind, body, and soul, dynamically interacts with itself and the world, and well-being results from balance and harmony among all the parts.<sup>11</sup> Both patients and nurses interact with the environment.

Establishing and maintaining a four-season therapeutic environment comprising I SEA is crucial for appropriately reacting to patients and creating a favorable atmosphere. As a theoretical system of I SEA, nursing pursues the four-chamber goals of health protection, promotion, optimization, and prevention through diagnosing and treating human responses and supporting the provision of I SEA care for individuals, families and communities. The nature of nursing as a symphonic I SEA phenomenon should be therefore clarified, its dimensions and features be determined, its realization methods be proposed and nurses' methodology to create harmony for this symphonic care be determined.

For these purposes, the four-season symphony of I SEA in nursing practice should be identified and defined. Knowledge can be acquired about many components of a symphony by gaining an insight into the overall function of the harmonic whole and valuing its power, emotions and esthetic. The efficiency of compound nursing practice should be decomposed into the defined efficiency of its individual components as

an initial yet vital step. Different definitions of I SEA components of nursing practice can therefore merge into a harmonic whole. Consequently, as an objective and participative-centered, pragmatic, and coordinated system "for and with patients," the field of nursing practice seeks to maximize symphonic I SEA embedded well-being and ultimately realize a peaceful death and dying.

The purpose of I SEA based nursing practice is that the fields of nursing practice are intertwined in a complicated web of emotions, meanings and expressions in patients.<sup>12</sup> Caregivers can satisfy the needs of another human by taking an accountable attitude and intention while establishing a relationship based on "being, living and becoming" stream of ontological, epistemological, and axiological nature of care.<sup>12</sup> Nurses can discover the needs, values and limitations of patients in their life. The consistency between patient expectations and nurse interpretation of these expectations is the cornerstone of providing appropriate and synchronous care.<sup>13</sup> Health and well-being are maximized by achieving coordination and harmony among mind, body, and soul as all the components of an individual. A lack of balance and coordination in human, between humans, and between humans and their environment disrupts the feeling of individual well-being.<sup>14,15</sup> Nurses should use their hands, heart, eyes and smart thinking power to create a symphonic therapeutic environment for taking care of patients' body, mind, and soul. They should take serene and smart steps in concert with the healthcare team and patients and their families to actualize I SEA supported care.

Taking into account of above introduction, the purpose of this paper is to explore I SEA in nursing practice including an introduction to symphonic thought, speech and deeds of nurse in every day practice in lens of I SEA. Applying Wilson's method of concept analysis will indicate the structure and semantic underpinnings of I SEA in nursing harmonic practice. The I SEA in nursing practice provides a theoretical definition of the features, criteria and requirements for its application, which can help clarify the concept and apply it in nursing practice. It seems that the value of nursing depends on the symphony of I SEA in nursing practice.

## 1.1 | Understanding the four seasons in nursing practice

Intellectuality as the first season of nursing practice constitutes a philosophical or wisdom basis for nursing practices. Intellectuality is also used as the reason, sharp perception, prediction, or common sense.<sup>16</sup> The process of thinking assists nurses in comprehending the wholeness of patients and create coordination and detect and resolve disharmony.<sup>14</sup>

Spirituality is the second season of the four-season nursing practice. The phenomenon of spirit is the center of human existence and the most complicated and mysterious component of human nature. According to Newman's system model, spirituality is an inherent variable in the fundamental structure of an individual that helps maximize well-being, health, and stability.<sup>17</sup>

Ethics is the third season of the four-season nursing practice. Decisions made by nurses in care provision should be ethical.

The International Council of Nurses introduced Code of Ethics for Nurses in 1953.<sup>18</sup> Alongside of this authentic international code of ethics for nurses, a national code can provide nurses with culturally-adapted guidance and help them to make ethical decisions more closely to the national background. Given the general acknowledgment of the need, the National Code of Ethics for Nurses was compiled as a joint project (2009–2011). The Code was approved by the Health Policy Council of the Ministry of Health and Medical Education and communicated to all universities, health care centers, hospitals, and research centers early in 2011.<sup>19</sup>

Esthetics as the fourth season of nursing practice refers to delicacy and art.<sup>20</sup> As the spirit of life, art, and esthetics are hidden in a unity within diversity, as is the case of the nature integrity.<sup>21</sup> Anthropology in esthetics and art mostly relates to “meaning.”<sup>22</sup> Anthropology paves the way to comprehend processes of creativity and creative action and develop an insight into human cognitive systems and how people conceptualize every moment of their daily life and build their world on their own behalf.<sup>23</sup>

The symphonic I SEA nursing practice be achieved by harmonizing sensory receptors in charge of thought, speech, and action in nurses. Therefore, they are enabled to think and act beyond their routine roles and activities. Consistently, with a better approach every day than yesterday, they permanently learn how to identify opportunities and challenge ahead based on this symphony.

The concept analysis of the four-season symphony of I SEA is therefore essential in nursing practice. Nursing researchers mainly seek to integrate the concept of the four-season symphony into the four pillars of nursing, including nursing practice, to promote nursing curricula in terms of clinical practice, management, and research. To the best of the authors' knowledge, this concept and the fourfold composition have not yet been addressed in literature. The features and methods of applying this concept can be investigated and explained to improve nursing science. The present study adopted a Wilson's approach to the concept analysis to clarify the concept, integrate its meanings, and increase stability in its conversational and written applications.<sup>24,25</sup>

## 2 | METHODS

The present study was conducted in 2019 to conceptualize and characterize the four-season symphony in nursing using the principles of Wilson's model according to nursing theories and searching credible databases including Google Scholar, ScienceDirect, Scopus, PubMed, SID, and Magiran for relevant articles published between 1990 and 2019 based on symphony, intellectuality, rationality, spirituality, ethics and aesthetics in nursing practice as keywords. Accordingly, the articles relevant to the concept of “symphonic nursing” and elements of “I SEA,” which their full texts were available, and published in English or Persian, were included in the study. The exclusion criteria were lack of proper referencing, and non-nursing articles. Three thousand and five hundred total records identified through database searching and finally 58 studies

comprising of articles and web-based additional relevant records were included.

Concept analysis is a valuable conceptualization approach that helps researchers define and clarify the concepts originated from nursing practice, research and theory, and discriminate them from similar and different concepts.<sup>26</sup> The present study adopted the Wilson's approach to analyzing the concept of the four-season I SEA symphony in thought, speech, and deeds or action in nursing practice to clarify the concept, integrate its meanings and increase stability in its conversational and written applications, for example, in cardiac critical care units (CCUs).

## 3 | FINDINGS

Wilson's method was used in this study.<sup>25</sup> The Wilson method is useful in clarifying a concept when one word has more than one meaning in different contexts by using case development (see Table 1).<sup>27</sup>

### 3.1 | Isolating the questions of the concept

Isolation of the questions of concept requires that the concept and the criteria being used to define it be described as seen from the viewpoint of the user. Wilson suggests that it is important to separate questions of concept from questions of fact, and value.<sup>27</sup> That is, “What does the symphonic four-season nursing practice mean in CCUs?,” “What does the symphonic four-season nursing practice involve in CCUs?,” “What are the criteria and features/indicators of each season in nursing practice in CCUs?,” “How is the four-season symphony in nursing practice applied in CCUs?,” “What are the movements of an effective symphony performed by a nurse as the conductor of the symphonic orchestra in nursing practice?”

### 3.2 | “Right” answers to the questions

As concepts may have multiple meanings and multiple contexts, the researcher must identify the primary statement and uses that are at uses that are at the “heart” of the concept.<sup>25</sup> Given the unpredictable rapid changes in the clinical status of patients in CCUs as dynamic units, decisions on patient care are consistently made by nurses, who are in charge of comprehensive caregiving. Nurses play a key role in managing CCUs and reporting the status of patients to other members of the medical team. Competence in caregiving is essential for nurses working in CCUs, as an effective nursing practice can significantly reduce morbidity and mortality. The core and heart of the four-season symphony in nursing practice therefore include manifestation of intellectuality, spirituality, ethics and aesthetic in the thought, speech, and deeds or action of nurses in the face of a patient with cardiac diseases in the CCU.

As the most fundamental season for the other seasons, intellectuality explains how a nurse with special knowledge should behave. Thinking is a magic wand for making harmonies or diagnosing disharmonies and fixing that. Philosophy is the cornerstone of

**TABLE 1** Eleven steps of the Wilsonian technique of concept analysis

Step	Summary
1. Isolating questions of concept	Essential to isolate concept-related questions from questions of fact and questions of value.
2. "Right" answers	For concept to need analysis, there must be more than one meaning depending on the context or environment in which the concept is used. However, there are essential or at least typical elements linking the concepts.
3. Model cases	Exemplary cases displaying all essential or typical elements. Wilson recommends more than one model case be presented in the analysis.
4. Contrary cases	These are cases that none of the essential or typical elements. Wilson recommends more than one contrary case be presented in the analysis.
5. Related cases	These are cases that have linking elements of one context of the concept to another context.
6. Borderline cases	Deliberate use of difficult terms to classify cases.
7. Invented cases	Sometimes needed when concepts are very rare or very common. These are imaginary cases that do not exist in everyday life.
8. Social context	Consideration of how the concept will be used and by whom.
9. Feelings attached to the concept	Is there debate or underlying emotion related to the use of this concept?
10. Practical results	What difference does it make? Referring to developing this concept.
11. Results in language	What is the most advantageous use of this concept?

intellectuality or rationality, and the comprehensive concept of philosophizing encompasses all the components of thinking skill.<sup>14</sup> As the love for wisdom and a lifestyle, philosophy determines a path to rationality. Philosophy refers to ontology, epistemology and axiology in nursing practice.<sup>28</sup> Intellectuality or rationality assists nursing in their confrontation with every-day problems in clinical practice, through which a nurse should simultaneously think, contemplate and act. Reflecting upon the meanings of their experiences and how to select the best practice in special circumstances involves nurses in philosophical and rational thoughts.<sup>29,30</sup>

The rationality and philosophizing criteria that empower nurses and ensure nursing interventions include employing appropriate knowledge, intuition, reflecting on experiences, close interaction between knowledge and perception, introspection, deliberation, attention, and analysis skills.<sup>31,32</sup> Other criteria of rationality include assessing challenging circumstances, pondering about others' ideas and emotions, values, and beliefs, acquiring proper attitudes, creative thinking, imagination, theoretical sensitivity, communication skills.<sup>32,33</sup> Other activities of rationality care are curiosity, use of evidence-based practice, research, critical thinking, clinical reasoning, learning new ideas, information gap, solving noetic problems, and developing innate knowledge.<sup>30,34</sup> Accordingly, practical rationality indicators include applying evidence-based care, knowledge management, knowledge translation and transfer and using care guidelines.

Spirituality is a way to achieve hope, meaning and goal in a sorrowful world. Spirituality is mainly defined as providing individuals with meaning, hope and goal and less commonly in a religion-associated manner.<sup>35</sup> Spiritual actions are associated with health, well-being, recovery and a sense of belonging to the community.<sup>36</sup> Activities, such as showing compassion, being committed

to observing individuals' dignity, respecting privacy, loving and harmonious relationships, building forgiveness, strength, trust, creativity, and kindness are all considered part of spiritual care.<sup>37-39</sup> As well, offering prayer, encouraging spiritual rituals, referring to support groups, active listening, and holding a patient's hand, listening and unconditional acceptance; providing hope; and being a catalyst for spiritual growth, assisting them in achieving inner peace, emotional well-being, sense of acceptance, positive feeling, and ethics are all other activities of spiritual care.<sup>38,40,41</sup>

Establishing an applied theoretical framework is essential for applying spirituality. In 1977, the American Association of Critical-Care Nurses introduced a modern approach to spiritual care based on the synergy model.<sup>7</sup> Providing appropriate spiritual care requires that nurses develop their knowledge and understanding of spirituality and integrate it with their nursing practice, hospitals employ spiritual care specialists and spiritual care departments be established.<sup>42</sup>

Ethical nursing practice focuses on kind behavior, trust building and gaining trust responsibility, having a conscience, and accountability.<sup>43</sup> Ethical actions are often composed of honesty, loving kindness/compassion, sympathetic joy, equanimity, discipline, responsibility, gentleness, respect for human beings, and privacy for the patient, family and those associated with the patient, dignity and rights, unanimity, devotion, sacrifice, and so on. These have been accepted as important characteristics that nurses would be better show in their practice.<sup>44,45</sup> Careful attention to patient care, appropriate decision making, using tact in performing obligations, patient advocacy, informing and educating the patient are other nursing ethical actions care.<sup>43</sup>

In fact, nursing ethics entirely encompasses nursing scope of work in terms of task-oriented ethics. Ethics is implemented by

orienting beliefs, intentions and actions towards codes of ethics, charter of patient rights and ethical norms and standards, establishing ethics committees in hospitals, and defining systematic ethical decision-making.

Esthetics focuses on the nature of beauty, delicacy, and art. Esthetic nursing practice, including orientation, strength, balance and rhythm, manifests itself in nurse perceptions, and actions or deeds.<sup>21</sup> The higher the cohesion and unity of a work with a pleasant and firm structure, the more its beauty or delicacy. The practical features for esthetics include spirituality, inspiration, imagination, creativity, commitment, valuing human presence, respecting patient opinions, communication, understanding, empathy, peace, comfort, pain relief, anxiety relief, touching, the joy of forgiveness, love and sensitivity to beauty and magnificence in thought, speech, and deeds. These features enable nurses to involve themselves in patient life experiences, identify their meanings from their own and patient perspectives, select appropriate interventions considering patients' preferences and artistically manage unique experiences.<sup>21,46,47</sup> Examples of employing esthetics in care include designing the technical decoration of the ward to actualize the four-season symphony, using poetry, painting, storytelling, play therapy, music and promising wise sayings and providing literary books, and artistic works.

### 3.3 | Exemplars

The 49-year-old chair of the city council admitted to the CCU the day before due to myocardial infraction is now on complete bed rest. Complaining about abdominal pain caused by failing to defecate since his admission, he asks nurse Y to help with his defecation. He is also worried about disruptions to his prayers caused by getting Najis (meaning bedraggled). Reciting a funny rhyme, nurse Y says, "soft bowel movements better than a kind friend." Nurse Y also confirms the need for treating constipation while empathetically sharing his similar experience with the patient. Respecting the patient's privacy, nurse Y examines his flatulence and abdominal sounds using auscultation.

Nurse Y asks the patient about his bowel habits and constipation symptoms, that is, headache, anorexia, abdominal distension, nausea, feeling full, intra-abdominal or rectal pressure and abdominal cramps. Nurse Y ruminates on possible least-complicated solutions to the patient's problem in a way that the Valsalva maneuver does not exacerbate cardiac ischemia. Referring to the textbooks of nursing diagnosis and interventions in NANDA and NIC, nurse Y asks himself what the latest scientific knowledge and evidence in this procedure.

He also thinks about how to provide privacy for the sound of passing gas, and therefore alleviate patient's worry and embarrassment. Nurse Y tends to know the patient's concerns about the situation by frequently asking questions and makes efforts to provide the patient with his favorable defecation conditions. Nurse Y warns the patient against holding in stool and offers the use of an ergonomic bedpan to optimally distribute the patient's weight on its wide surface and maximize comfort. While covering external genitalia, this

bedpan reduces the spread of the pungent smell and prevents the patient from getting Najis. Nurse Y teaches an assistant nurse sensitive points about observing patient dignity and places the patient in the right position for defecation in collaboration with the assistant nurse. The nurse seeks to help the patient feel relaxed during defecation by respecting his privacy, allows him adequate time, advises him against straining during defecation and provides him with a bell to inform the nurse when he finishes or needs help.

Nurse Y consults with his colleagues to lay plans and provide care, reports the patient status to the physician, follows the orders and trains the patient in doing exercises to his limit of endurance in bed 3–4 times a day after his defecation. Nurse Y then recommended that the nursing instructor in the ward allow nursing students to practice using bedpans and urine bottles in the skill lab of the department to realize the complexity of placing patients on bedpans and providing them with urine bottles and orient themselves to the symphonic nursing practice. After the patient care is over, nurse Y asks himself whether his previous thought, speech and action or deeds and generally his nursing performance have been I SEA.

#### 3.3.1 | Discussion

It seems that this is an accurate scenario of the practical presentation of interaction or interplay of four seasons with symphony that encompasses all the features of the concept. A symphonic CCU nurse uses the four seasons symphony in all nursing actions even, such as placing patients on bedpans. A nurse-led symphonic orchestra is characterized by pondering over the rational dimensions of practice, using knowledge and scientific evidence (rational thought, speech, and action), asking about patient concerns and providing favorable conditions, using ergonomic bedpans and reducing patient concerns about getting Najis, respecting patient religious beliefs, empathizing with patients, and sharing experiences with them (spirituality, aesthetics and patient-centered care model in practice).

Some other features of this symphony are indicated in leaving the room and giving a bell to the patient to call for help or announce the end of defecation, teaching the right position and allowing adequate time for defecation (esthetics), using metaphors and rhymes (verbal esthetics) respecting the patient's privacy and dignity, training the patient, providing favorable conditions for the patient, using ergonomic bedpans, and preventing the Valsalva maneuver (non-maleficence, ethical action, and thought). Ultimately, consulting with colleagues, reporting to the physician and following their advice, teaching important points to the assistant nurse to respect patient dignity and interacting with the nursing instructor can be seen in this example.

### 3.4 | Contrary cases

The 49-year-old chair of the city council admitted to the CCU due to myocardial infraction the day before is now on complete bed rest.

Complaining about abdominal pain caused by failing to defecate since his admission, he asks nurse Y for helping with defecation. He is also worried about disruptions to his prayers caused by getting Najis.

After calling for help several times, nurse Y angrily nags: "Should we fix your heart or your stomach?," "Let your stomach start working, then think about your prayers and getting Najis." Nurse Y asks an assistant nurse in the ward to provide the patient with a bedpan for defecation.

### 3.4.1 | Discussion

In this scenario, the nurse failed to use the symphony of I SEA in thought, speech and action in the CCU. Failure to think about the rational aspect of patient's problem and side effects of constipation on MI, lack of using knowledge, and scientific evidence (no rationality in thinking, speaking and acting) is not indicated. As well, failure to understand the patient, verbal violence (lack of esthetics in speaking and acting), carelessness to respect patient's dignity and privacy, ridiculing the patient (lack of ethics and fine tone language in speaking and acting), using sarcasm and ridicule (lack of esthetics in speaking) is indicated too. In addition, fail to address patient's fears and concerns (lack of spirituality in acting), lack of consultation with colleagues, failure to inform the physician, and incompetency to do teamwork is demonstrated.

### 3.5 | Related cases

While performing her routine tasks, a female nurse talked to a female patient with end-stage heart failure in the CCU. The patient talks with nurse Y about her life and how to forsake the mundane life. Noticing the patient's need for someone to hear her concerns, nurse Y sits at her bedside and holds her hands while listening (body and mind). They talk about afterlife (soul). After an in-depth talk (body, mind, and spirit), nurse Y notices patient's hair needs combing, which is usually performed by nursing assistants. Nurse Y then asked the patient if she would like to have her hair combed. The patient said she would like nurse Y to do it. At the end, nurse Y asks the patient if she needs to talk to the hospital clergyman (spirit, healing), and she says she feels better after speaking with the nurse (whole, body, mind, spirit, healing, and harmony). Being satisfied after spending time with the patient at her last moments of life, nurse Y leaves her although she feels embarrassed with directly talking about death. The patient dies in the following shift, and the nurses in that shift say she died in peace. In this scenario, holistic care is expressed with a harmony among body, mind, emotions, and soul.

#### 3.5.1 | Discussion

A review of literature on the four-season symphony suggests I SEA are related to symphonology and holistic care. The prerequisites of

symphonology as an ethical agreement include biological standards, such as independence, freedom, objectivity, self-regulation, benevolence and loyalty, which assist nurses in taking appropriate and timely measures to promote nursing care. This theory emphasizes the provision of holistic and unique care based on rational thinking.<sup>48</sup>

According to the American Holistic Nurses Association, holistic care refers to a harmony among body, mind, emotions and spirit in an ever-changing environment.<sup>49</sup> Patient-centered care is based on respect, accountability, needs, values, training, physical comfort, emotionally supporting patients, and relationships with patient friends and family. Patient-centered model caregivers with a biopsychosocial perspective emphasize the integrity of treatment and power and responsibility of patients and consider individual patients uniquely.<sup>50</sup> Depending on the cultural background of patients, the dimensions and features of patient-centered care model encompass diverse activities ranging from personal involvement of patients in their care to general participation in healthcare decision makings.<sup>51</sup>

### 3.6 | Borderline cases

The 49-year-old chair of the city council admitted to the CCU due to myocardial infraction the day before is now on complete bed rest. Complaining about abdominal pain caused by failing to defecate since his admission, he asks nurse Y for helping with defecation. He is also worried about disruptions to his prayers caused by getting najjis. Nurse Y asks him about his bowel habits and constipation symptoms, that is, headache, anorexia, abdominal distension, nausea, satiety, intra-abdominal or rectal pressure, and stomach cramps and performs an abdominal examination. Nurse Y warns the patient against holding in stool and offers the use of an ergonomic bedpan. Nurse Y encourages the patient to feel relaxed during defecation by respecting his privacy, helps him be placed on the bedpan and advises him against straining during defecation.

#### 3.6.1 | Discussion

This borderline scenario does not create the whole four-season symphony of I SEA in the CCU. It features only certain characteristics of the concept, such as checking bowel habits, performing physical examinations without employing the latest knowledge and scientific evidence (to some extent rationality in practice), placing the patient in the right position and allowing him adequate time for defecation (esthetics) and providing a private environment for the patient (relative observance of ethics). In this scenario, the nurse failed to prioritize the patient's comments and his concerns about getting Najis and provide desirable conditions for the patient and more effectively communicate verbally with him (lack of rationality, spirituality and esthetics). Furthermore, no regular teamwork was performed based on the four principles of the concept.

### 3.7 | Invented cases

In this case, the four-season symphony in nursing practice can be compared with a servant leadership, in which the main role of leaders is to respect their colleagues in an organization, hear their voice, easily pass on, transfer and implement their ideas and train them in becoming the best. Serving patients and doing what is appropriate for them are prioritized. Participative leadership and management are applied to provide patients with a high level of symphonic care.

### 3.8 | Social contexts

The study concept is constantly received by nursing clients throughout four seasons and 12 months. This concept is used in the multicultural Iran based on illuminationism and the Peripatetic school and teachings of Mathnawi<sup>52</sup> an ancient civilization history that believed in “Good word, Good thought, and Good deed” and teachings of divine religions, mysticism, and literature. Iran is a country of four seasons, and its cultural and ethnic diversity should be considered in the social texture of this old country.<sup>53</sup> The caring spirit in nursing provides an opportunity to express unconditional love, open invitation, reciprocal sharing, and full attention toward patients' expectations. This relationship is established based on serving other and sharing the innermost feelings and the holiest existence. The respectful conduct, warmth of voice and body language in nurses create a sense of value and humanity in patients and a joint feeling between nurses and patients.<sup>54</sup>

Three major assumptions of Parse's Human Becoming theory emphasized on meaning, rhythmicity and transcendence for constant transforms.<sup>55</sup> Rosmarie R Parse defined her human becoming theory as an open process experienced by humans. She interpreted evolution as a healthy life, a constructive universal process, human models for value priorities, a contradictory process beyond facilities and integration of human.<sup>56</sup>

Martha E. Roger's Science of Unitary Human Beings or homeodynamic principles postulate a way of viewing unitary human beings.<sup>57</sup> The three principles of homeodynamics are resonancy, helicy, and integrality. Resonancy is an ordered arrangement of rhythm characterizing both the human and environmental fields that undergo continuous dynamic metamorphosis in the human environmental process.<sup>58</sup> Helicy describes the unpredictable, nonlinear evolution of energy fields as seen in non-repeating rhythmicities, and postulates an ordering of the human evolutionary emergency.<sup>57</sup> In fact, helicy is the continuous, innovative, increasing diversity of human/environmental patterns.<sup>58</sup> In fact, the human-environment field is a dynamic, open system in which change is continuous due to the constant interchange between the human and environment.<sup>59</sup> Integrality covers the mutual, continuous relationship of the human and environmental fields. Changes occur by the continuous re-patterning of the human and environmental fields by resonance waves. The fields are integrated into each other, but are also unique.<sup>57</sup> In Watson's theory, nursing is centered around helping the

patient achieve a higher degree of harmony within mind, body, and soul, and this harmony is achieved through caring transactions involving a transpersonal caring relationship.<sup>60</sup>

### 3.9 | Feelings attached to the concept

According to Mulla Sadrā and Avicenna, one will lose rationality, science and knowledge if they lose one or all sensory perceptions and they will not benefit from rationality if they fail to use senses and feelings.<sup>16</sup> This type of nursing accompanied with unexplainable feelings, such as motivation, energy, self-esteem, being different, self-concept, kindness and the need for protecting the needy and more vulnerable emphasizes the art, depth, and complexity of the nursing profession and its transcendence through love, especially unconditional love.

Another feeling attached to the concept suggests, in case of capability, nurses tend to provide patients with whatever they want and accept for themselves; nurse agrees to do for the patient what the patient would do if able. The nurse will not act against the patient and the patient will not act against the nurse.<sup>48</sup> Nurses are human beings who, through a round-the-clock effort, reduce the suffering of patients and take a selfless step towards the recovery of the suffering. In other words, the more mother-like, the more nurse-like. He/she has suffered from the suffering of others and has rushed to their aid. He/she has healed their wounds and treated them in recovery. Like an unexpected mother, who every day and night with good morals, with a kind hand and with compassionate eyes, tries to nurse the patient and immediately seeks the healing and comfort of the patients. The feelings of motherhood and altruism have served as a basis for preserving the art of pre-professional care for much of the history of nursing.<sup>61</sup>

According to Watson, interpersonal interactions and relationships realize the process of nursing practice as a science and art. She defined a combination of measures related to human nursing practice as Carative factors, which are actualized through demand, ambitions, values and commitment of nurses.<sup>62</sup> As well, nurses are ethically responsible for boosting characteristics that help patients think about life, health, and well-being.<sup>63</sup>

### 3.10 | Practical results

Personal and organizational promotion constitutes the ultimate goal of the four-season symphony of nursing practice. At organizational level, the guideline of four seasons symphony of care can be developed and applied to improve patients' quality of life and satisfaction through the following cases: providing a safe, effective and efficient healthcare setting, professional practice model, reducing the gap between theory and practice to improve the power and functional capacity of nurses according to modern theories,<sup>64</sup> commitment to ethical codes and spiritual health, applying science and skills in practice, visionary philosophy in the day- to- day operations of

nursing,<sup>64</sup> providing body and soul well-being, restoring power and responsibility, increasing self-awareness, increasing empathy between patients and nurses, creating self-confidence and self-efficacy in patients.

Nurses throughout the organization perceive that voices are heard, their input is valued, and their practice is supported.<sup>64</sup> The personal transcendence is characterized by awareness of the spiritual aspects of self, one's relationship to others and the environment, and relationship to a higher being or purpose greater than the self. Furthermore, it can act as a coping resource that triggered when one feels threatened or vulnerable.<sup>65</sup>

Providing this type of symphony in nursing practice plays a key role in improving performance, skills, development, satisfaction, professional position, independence, and professional self-confidence in nurses.<sup>65-67</sup> It also turns nurses from a passive recipient of orders and a marginal member of the healthcare team into a creative person capable of making remarkable changes in the treatment process, which corrects the public opinion about nursing and causes its popularity.<sup>64</sup> According to the philosophical essence of this thinking, using the practical guideline of the four-season symphony of care is a *Wajib Ayni* (is a must of personal obligation) rather than *Wajib Kafai* (is a should).<sup>68</sup> In other words, to deliver the highest levels of quality and symphonic care, one must rather than should improve day by day. Personal transcendence can facilitate the caring behavior. Internal resources, such as reflective practice, emotional regulation, and intentional consciousness may involve personal transcendence, which facilitates integration of complex and conflicting elements of living and helps a person to organize challenges into a meaningful system for improving caring for others.<sup>69</sup>

Unethical practice, as individuals within organizations are enculturated into behaviors that prioritize profit at the expense of "being a good person" or "doing the right thing." Spirituality in general and in the workplace has been suggested as a potential counter to this problem. Spiritual individuals are likely to be more ethical and therefore, of significant value to the long-term viability of organizations and ultimately society. These dimensions allow individuals to act in ethical ways beyond organizational conditions. Such genuine spirituality leads to a more ethical workforce, a more ethical workplace, and ultimately a more ethical world, and allows organizations to thrive and survive.<sup>70</sup>

Finally, the spirit of individual and organizational transcendence is practically emphasized. As in the case of a perfect human, a perfect nurse can realize God's attributes on the earth and comprehend the esoteric world of humans through their heart and soul and their physical world with their physical senses and power. A perfect nurse is unique in terms of wholeness and perfection, as in the case of a perfect human.

Ultimately, the present study defined health as biological, psychosocial and spiritual well-being that is realized by achieving the full potential of life and unity of mind, body and soul. The whole (mind, body, and soul) dynamically interacts with itself and the world, and well-being is caused by balance and harmony among all parts.<sup>71</sup> Watson's theory of human being<sup>62</sup> is consistent with the WHO

definition of health. As stated by Thomson,<sup>55</sup> Parse perceives health as a way of being on the earth and a lively routine existential method rather than a spectrum ranging from health to illness or a dual term of health/illness. She defined health as a process of becoming and formation and meaning structures in different circumstances. According to metatheorists, health should be defined as an important process and outcome in nursing theories.<sup>72</sup>

### 3.11 | Selecting the language

As a combination of I SEA in thought, speech and action or deeds, the four-season symphony of nursing practice encompasses the comprehension of the meanings of discipline in affairs, such as thinking, speaking and acting in dealing with patients, establishing significant relationships with patients, artistic performance, rational determination of an appropriate solution and ethically directing nursing practice as symphonic comprehensive services. More closely to the Iranian-Islamic background, as in the case of a perfect man/human and mystic, a messenger of God and the God's hand in human sleeve, a nurse donates gifts to people, sees all the mysteries of pluralism from a unity perspective, knows the stand of everything, recognizes benefit from loss, says nothing but blessing and takes steps only towards people's benefit.<sup>73</sup> Nurses as a perfect man/human love mankind, consider all the part of themselves and themselves for all, serve everybody and everything and see bitter and sweet, nectar and sting, and pain and cure as the same.<sup>73</sup> It is seemed that nurses dynamically and symphonically move from particles to waves as per the hologram world theory.<sup>74</sup> As the nature of nursing, the concept of nursing practice and care dominates nursing literature.

## 4 | CONCLUSIONS, IMPLICATIONS, AND RECOMMENDATIONS

The Wilson's model of concept analysis was used to provide a systematic approach to identifying and clarifying the concept of four-season symphony I SEA in nursing practice. Given the infinite potential of all the four seasons for dynamic transcendence, this symphony requires transcending the status quo and a day-by-day improvement in thought, speech and deeds of caregivers. Being refers to concepts, such as nature, essence, deeds, and righteousness. On the other hand, becoming preserves the idea of having a future and concepts of evolution and self-improvement, which are accompanied with individual, organizational and professional transcendence, and human potential development.

The concept analysis of four-season symphony (I SEA) in nursing practice provides a theoretical definition of the features, criteria and requirements for its application, which can help clarify the concept and apply it in nursing practice. It seems that the value of nursing depends on the symphony of I SEA in nursing practice. This nursing symphony provides an opportunity for a perfect four-season human



to emerge and nurses to transcend symphonically, individually, and organizationally. It is suggested that while performing tasks at the moment, nurses ponder over their previous actions and dynamically ask themselves about the intellectuality, spirituality and ethical and aesthetic nature of their thought, speech, and action or deeds. Through identifying the facilitating and inhibiting factors and the concept of the four-season symphony in nursing practice and relying on a scientific insight, nurses can design and implement their activities in a way that proper conditions are provided for this type of nursing practice to be accurately realized with a high quality. Nevertheless, the concept of the symphonic four-season nursing practice is evolving, and further studies are recommended to be conducted to shed light on its different covert but valuable dimensions.

#### DATA AVAILABILITY STATEMENT

The data that support the findings of this study are available from the corresponding author upon reasonable request.

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