



# Analytical comparison of the holistic perspectives of Islamic intellectuals and common philosophical approaches in nursing respecting human being

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## Abstract

**Background and aims:** The nursing philosophy has moved from reductionism to holism in its manner of treating human being (HB). There are two main philosophical worldviews about holism, namely reciprocal interaction and simultaneous action worldviews, based on which most holistic nursing theorists formulated their works. Islam, as a perfect religion, also addresses all dimensions of HB and provides different instructions for their development. However, it is still poorly known whether there is a difference between western and Islamic holism. This study was conducted to analytically compare these two main philosophical worldviews with the Islamic worldview in nursing.

**Methods:** This analytical study was conducted in 2020 through the library search method. The SID, Medlib, IranMedex, Magiran, Irandoc, ISI, Scopus, PubMed, and Islamic World Science Citation Center databases were searched using the “holism”, “Islamic thought”, “reciprocal interaction”, and “simultaneous action” keywords. Moreover, the works of famous Islamic intellectuals, particularly Mohammad Hossein Tabatabaei and Morteza Motahhari, were assessed.

**Results:** In the reciprocal interaction worldview, HB is considered as an organized and coherent whole with different biological, psychological, social, and spiritual dimensions and inter-relationships among these dimensions. Moreover, it considers HB as a metaphor, implying that HB is a unified, self-organizing, and regularly changing being that is in interaction with internal and external environments. In the Islamic worldview, HB is a unified truth with material and immaterial realms consisted of physical body connected with emotions, cognition, society, spirituality, and the universe.

**Conclusion:** Although the simultaneous action worldview has a holistic view towards HB, it does not specifically address all HB dimensions. However, the reciprocal interaction worldview addresses some HB dimensions. Islamic intellectuals not only have a holistic view towards all HB dimensions, but also consider HB relationship with the universe. Such divine view to HB integrates the simultaneous action and the reciprocal interaction worldviews, provides nurses with a holistic view towards HB, and facilitates the application of the existing holistic nursing theories for nursing practice, research, and theorization.

**Keywords:** Holism, Islamic worldview, Reciprocal interaction worldview, simultaneous action worldview, Nursing

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## Introduction

Nursing is a science and an art, denoting that the pure scientific traditional view towards human beings (HBs), which holds that HBs consist of separate biological, psychological, social, and spiritual dimensions, cannot serve as the basis of nursing. Currently, nursing introduces itself as a holistic profession and considers its services as science and art and thereby, can achieve the goal of holism that is ensuring human integrity (1). Unlike other fields of medical sciences which may deal only with some dimensions of HBs, nursing aims at providing all types of care to all dimensions of HBs. Therefore, it needs a comprehensive responsive philosophy. The history of

nursing shows that nursing philosophers and theorists attempted to pay attention to the different dimensions of HBs through providing different and diverse theories such as theories on holism.

The concept of holism derives from the Greek term “*holos*”, which means whole and entire (2). It was first coined by Jan Christian Smuts (1870–1950) after the World War I to refer to “the principles of development and integrity of the universe”. Smuts believes that the universe is a unified whole, in which each part has interrelations with other parts (3). This pattern of thought was then followed by Gestalt psychologists in the 1920s and the 1930s and was entered in nursing in the late 1970s

by nursing theorists such as Rogers. Levine, a nursing theorist, also noted that nurses consider each client as a unique HB (4).

The holistic approach is the exact opposite of the philosophy of reductionism. Reductionism holds that complex phenomena, like HBs, consist of individual primary principles which can be reduced and studied as smaller parts. Explanations derived from reductionism can lead to ambiguities in understanding causality. The shortcomings of biological reductionism led to the development of holism in medical sciences first by Christopher Lawrence and George Weisz (5). Holism states that "the whole is larger than the sum of its parts" and hence, it holds that body, mind, and soul are inevitably integrated and should be considered and assessed as a dynamic unit which is in balance with its inseparable parts (6). The three principles of holism are as follows:

1. holism is contrary to reductionism which holds that a whole can be judged through the independent assessment of its separate parts;
2. the whole is larger than the sum of its parts; and
3. the parts of the whole cannot be understood when they are considered separate from the whole (7).

The introduction of holism in medicine by George Engel was associated with holism-based changes in nursing. Holism in nursing holds that nursing client is an individual whose physical body is in harmony with his mental, psychological, and spiritual dimensions and each dimension affects the others. Thus, nurses consider all dimensions of HBs instead of focusing on one single dimension (1). In this view, holistic care is the science and art of providing care to an individual along with taking into account all of his parts, including body, mind, spirituality, and emotions in relation to other individuals, environment, and populations (8).

A review of the nursing literature shows that most nursing theorists in the holism approach based their works on two main philosophical worldviews, namely reciprocal interaction and simultaneous action worldviews (5,9). Muslim nurses also need to have a comprehensive understanding of their Muslim clients in order to provide them with quality holistic care. Therefore, the present study was conducted to analytically compare these two main holistic approaches to HBs in nursing from the perspective of Islamic intellectuals.

## Methods

This analytical study was conducted in 2020 through the library search method in order to compare the holistic perspectives of Islamic intellectuals, particularly Mohammad Hossein Tabatabaei and Morteza Motahhari, on HBs. Data were collected using Tabatabaei's Tafsir Al-Mizan as well as through searching the "holism", "Islamic thought", "reciprocal interaction", and "simultaneous action" keywords in the SID, Medlib, IranMedex, Magiran, Irandoc, ISI, Scopus, PubMed, and Islamic World Science Citation Center databases. Tafsir Al-Mizan is a great and

famous comprehensive Tafsir of Quran in the world of Shia Islam which interprets the verses of Quran using its other verses.

## Results

In Islamic literature, many words and definitions have been used to refer to HB. Conceptually, Tabatabaei states that HB is a unified truth and each HB feels that he is himself and there is neither other one nor two ones in him (10). He holds that Almighty God created HB from a material essence named body as well as an immaterial essence named soul or "*nafs*". In other words, HB is a creature with intertwined physical and spiritual dimensions (11,12). In his view, the body-soul relationship is so intertwined that they can be considered as a single identity. Accordingly, any problem in each dimension can affect the other dimension. For example, mental problems can affect physical conditions. Meanwhile, despite the unity of body and soul, they are independent from each other (12).

The reciprocal interaction worldview considers HB as an organized and coherent whole with different biological, psychological, social, and spiritual dimensions in a holistic context (9,13). The followers of this worldview equate holism with the multidimensionality of HB and consider interrelationships among the different dimensions of HB (8). Based on this worldview, the American physician George Engel introduced the biopsychosocial model as a substitute for the biomedical model (14) in the reductionism model and noted that biopsychosocial factors can affect diseases (15). In his model, the biological system focuses on the anatomical, structural, and molecular bases and their effects on cognitive function. The psychological system in this model highlights the effects of psychodynamic factors, motivation, and personality on experiences and reactions and the social system deals with the effects of familial, environmental, and cultural factors on experiences (16). Moreover, this worldview holds that HB is an active being with reciprocal interactions with environment so that each change is the result of many different factors and probabilities (17). After entering nursing, this worldview became the basis for clinical care and currently helps understand pain, suffering, diseases, and ailments at molecular to social levels. It also helps understand patients' experiences, establish accurate diagnosis, provide humanistic care, and achieve health-related outcomes (18). Roy is one of the followers of this worldview in nursing.

The simultaneous action worldview defines HB as a pattern and a metaphor which implies that HB is a unified being, a whole being, and a being that is more than and different from its parts rather than a being composed of the sum of its parts (13). In this worldview, each HB has a specific pattern, interacts with environment, constantly experiences unpredictable changes, and moves towards further complexity (17). This pattern constantly appears as a self-organizing and regularly changing being that is in interaction with environment, denoting that HB

is inseparable from environment. Changes constantly happen and move HB towards a more complex structure. Holism in this worldview means that HB is an integrated whole which interacts with and affects both internal and external environments (8). In this worldview, Merleau-Ponty (1962–1968) describes HB as a being that is inseparable from mind and body (15). In other words, HB should not be considered either as a pure body or a pure mind; rather, he is an intertwined mind and body (19). The philosophy of Merleau-Ponty was an effort to respond to one of the concerns of the modern western philosophy, i.e., Descartes' dualism, to negate it, and to integrate mind and body. He considered mind-body distinction as a non-scientific belief. In this view, healthcare needs are neither totally physical, nor totally mental. In other words, all disorders have physical and mental dimensions and hence, all treatments focus on both physical and mental dimensions (20). The theory of Merleau-Ponty was the basis for some holistic nursing theories such as the theories of Benner (1970–1980), Rogers (1950–19970), and Parse (1992) (19).

### Discussion

In the Islamic view, HB has different material and immaterial dimensions and is a unified truth in which the physical body is in harmony with immaterial dimensions such as emotion, cognition, society, spirituality, and the universe (12). From the perspectives of Islamic intellectuals, HB is not unidimensional, single-essence, and mortal; rather, he is considered as a being with different physical, cognitive, emotional, spiritual, and social dimensions and characteristics and a unified being whose parts are inseparable and indivisible. Tabatabaei believes that HB has different parts, organs, and powers, each with different material and immaterial benefits that when combined, become larger and more powerful and form a unified composite named human (12). Based on this view, nursing can assess not only all conditions of HB, but also their effects on each other.

In the Islamic view, HB cannot independently attain all accomplishments; rather, he needs social interactions in social life because God has created HB as a social being. Accordingly, person and society complement each other and there is an interaction among HBs so that HBs need each other in the path to perfection and are responsible toward each other. Tabatabaei states that the development of acquired characteristics depends on appropriate interpersonal interactions, implying that the evolution of HB happens in social context (21).

The divine approach of Islamic intellectuals towards HB not only provides nurses with a holistic view, but also clarifies the existing holistic approaches in nursing (i.e., reciprocal interaction and simultaneous action) and facilitates their application in nursing practice, research, and theorization (22). Moreover, this approach provides a good guideline to assess and fulfill the different needs of HB and supports the nursing notion which holds that

holistic care provision depends on considering each HB as a whole, attention to all his dimensions, and treating HB in relation to environmental and social conditions (23). Accordingly, the Islamic philosophical view not only can be used as a philosophical basis for nursing, but also can be used as an applied philosophy in health and illness to address all needs and problems of HBs and a basis for holistic nursing.

The Descartes' dualism and the biomedical model hold that HB consists of two separate parts, namely mind and body (19). Descartes' belief in the location of mind-body relationship in the pineal gland has caused ambiguities for the followers of dualism (24). Moreover, George Engel believes that HB is not consisted of the three inseparable physical, mental, and social dimensions (11). His biopsychosocial model is about the etiology and treatment of diseases (14) and is an approach to pure clinical interventions (25). Therefore, it cannot be considered as a philosophy. On the other hand, the basis of the Islamic view is the divine philosophy which can use philosophical techniques such as ontology and epistemology to clarify all characteristics of HB. In the Islamic view, philosophers do not deal with completely distinct essences and parts with unknown effects on each other; rather, they deal with two essences (i.e., body and soul) which are in fact a single truth. Islamic intellectuals' belief in the unity of mind and body can help resolve the challenges of the reciprocal interaction worldview in explaining the effects of physical symptoms and interventions on the immaterial dimensions of HB (namely soul and mind) as well as the effects of symptoms and complications of the immaterial dimensions of HB on the body. Thus, as most human activities are performed through the close collaboration of mind and body, nurses with Islamic philosophy can more effectively understand the symptoms of diseases and the effects of their interventions.

Mulla Sadra, another Islamic philosopher, in his Substantial Motion theory states that substance can get ready to accept soul through substantial motion and evolution toward embryo and human. At the beginning of its appearance in the body, soul is very close to substance, while its gradual development moves it towards abstraction so that it reaches a point at which it does not need body any more. In other words, soul becomes spiritual and immaterial during its evolution and hence, its survival does not depend on body (22).

Both Islamic and western approaches to holism pay attention to the biological, mental, emotional, spiritual, and social dimensions of HB (23). However, these approaches differ from each other not only in their views about each existential dimension of HB, but also in the content of each dimension. For example, the biopsychosocial model introduces biological, psychological, and social dimensions for HB and provides a framework for data collection in each dimension, while it neglects the spiritual dimension of HB and hence, cannot provide a comprehensive framework for effective

disease management. Accordingly, this model is not appropriate for holistic nursing that considers spirituality as an important dimension of HB (26).

The Islamic view holds that besides material and natural desires that draw HB towards matter and nature, there is a series of desires that draw HB towards immaterial focal points (21). These desires are called spirituality and include values related to the spiritual development and perfection of HB. Religious practices in Islam are also for the spiritual development of HB (23). Therefore, irrespective of the differences between the Islamic and the western approaches to holism and also among nursing theorists, nurses with holistic approach to care need to provide their clients with spiritual care.

In the social dimension, the most important problem of the biopsychosocial model is that it does not explain the details of HB's relationships with social environment and the universe and the events that happen during HBs' relationships with each other and with the society (12). However, Tabatabaei explains that HBs are social, live in groups, and collaborate with each other to fulfill their needs. In the views of Islamic intellectuals, the social environment is an influential factor in the development of HBs' spiritual and moral characteristics. Language, social norms, and religion are mostly imposed on HBs by the society (22). Moreover, this view considers society as a live body consisted of different parts and states that despite their abundance, all HBs are a single HB (12).

As mentioned earlier, Merleau-Ponty holds that the mind-body distinction is a non-scientific belief (20). One reason for such standpoint is that he considers healthcare neither pure physical, nor pure mental; rather, he notes that all disorders have physical and mental components and hence, all treatments should focus on both physical and mental dimensions. On the other hand, Islam, like the simultaneous action worldview, defines HB as a regularly changing, holistic, integrated, and interactive being who interacts with environment, particularly with the universe, and hence, considers all dimensions of HB in coordination with the universe (20). Moreover, it defends the health, existence, and integrity of HBs despite their multidimensionality and can support the theory of holism in nursing, which is in agreement with the view of Sarkis et al. (3).

### Conclusion

The Islamic worldview not only believes, like the reciprocal interaction worldview, that HB has different material and immaterial realms (i.e., body, emotions, cognition, spirituality, and society), but also clearly explains their interrelationships. Based on this view, HB has innate characteristics as well as acquired characteristics developed through interaction with environment and society. The holistic approach of Islamic intellectuals to HB is a divine approach which can integrate the assumptions of reciprocal interaction and simultaneous action worldviews to provide nurses with a comprehensive

### What does this paper contribute to the wider global clinical community?

- The Islamic worldview can be used as a philosophical foundation to define the metaparadigms of nursing and develop a conceptual framework for nursing practice.
- Nursing based on the Islamic worldview has the potential to justify the effects of all human conditions on each other.

holistic approach and facilitate the application of the existing nursing theories in nursing practice, research, and theorization. Therefore, this view can be used to develop a comprehensive model as a guideline to assess and understand all dimensions and needs of HB and develop the best plans to treat nursing clients. Moreover, this view can be used to re-define other metaparadigms of nursing as well as HB-related assumptions such as healthy and sick HBs. Nursing practice based on this view can explain the effects of the different conditions of HB on each other.

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### Conflict of Interests

There is no conflict of interests to be declared.

### Ethical Approval

Not applicable.

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