A Comparison of Nurses' and People's Views of Nurses' Dance, During the Covid- 19 Crisis: A Qualitative Study

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Abstract
The nurses' experiences of dance are being at ten different levels; Purpose of dances, positive views, spiritual influences, reactions and reflections, impressions, symbols, meanings, negative views, concerns and recommendations. The content of people's experiences of dance are classified into ten categories: Dance in general, therapeutic effects of dance, the joy of dancing, meaning of happiness, the spiritual effectiveness of dance, symbols, the place of dance among the people, general recommendations, people's thoughts and reflections.

Keywords: Experiences, Complement Therapy, Nursing, care, Crisis intervention,

Back ground

Unexpected prevalence COVID 19 pandemic with high infectivity has put nurses into a stressful situation [14]. Some of the pressures on the nurses include: High chance of being infected, not enough protection against viral infection, hard work and tiredness, frustration, discrimination and isolation, taking care of patients with the disease with a load of negative emotions, not enough contact with families. Such a dire situation can cause psychological problems such as anxiety, depression, insomnia, denial, anger and panic. Hence, protecting the mental health of the nurses for the control of epidemic and their long lasting personal health is important [1].

Dance Movement Therapy can be tested as an intervention for nurses' adjustment and reduction of patients' pain in the COVID-19 crisis. Dancing is an embodied activity and if used therapeutically, it can have certain health benefits [2]. These benefits are still unclear.

The American Dance Therapy Association (ADTA) defines dance as "the psychotherapeutic use of movement to enhance an individual's emotional, social, cognitive and physical integration to improve health and well-being" [12]. The EU Dance Association adds "spiritual integrity" to the list [11]. The number of recommendations for dance interventions in clinical and subclinical fields is increasing (Martin, Koch, Hirjak, & Fuchs, 2016). Recommended dance interventions are different dance styles (e.g., National, Folk and contemporary dances) that aim to improve the quality of live or other psychological consequences associated with participants' health. A meta-analysis study showed that dancing is effective in increasing quality of life and reducing clinical symptoms such as depression and anxiety. Its positive effects were also found in increasing mental well-being, mood, emotion and body image [2].

The mechanism of dance effects is classified into five clusters: (a) hedonism (pleasure and play, aimless orientation), (b) aesthetic experience (beauty experience, body-mind integration, integration with a partner, etc.) and proper expression, (c) nonverbal meaning (communication, expression, (c) nonverbal meaning (communication, expression and regulation of emotions, social interaction), (d) active transitional space (active experience, representation, self-efficacy, constructive resources), and (e) creativity (being productive). And productivity, which is common to all types of dance [3]. Dances can cause stimulation. Hormonal changes, and phys-

iological changes [4]. Research is still needed to gain in-depth knowledge in this area.

One of the ways in which frontline staff used in coping with COVID-19 stress and anxiety was through religious adjustment and a desire to serve humanity [13]. There are many questions about how nurses' dancing works, some of which can be answered with a qualitative study of the experiences of nurses and ordinary non-nurse people. In the COVID-19 crisis, there were 19 different reflections on nurses' dancing in the media, but there has been no scientific study on how nurses' reflections were expressed and how they differed from non-nurse people, and there is a need to study and compare the experiences of these two groups.

Methods

The present study is performed by conventional content analysis methodology with the aim of comparing the experiences of nurses and other people of nurses' dancing in the COVID-19 pandemic.

Characteristics of participants

The primary participants in this study were nurses and ordinary non-nurse people with the ability to understand and speak in Persian language who wanted to participate in the study and express their experiences. Nursing participants were selected through purposive sampling from COVID-19 treatment center hospitals and normal participants were purposefully selected from three "WhatsApp" groups. An attempt was made to include people with various characteristics in terms of gender, age, etc., in the study so that the presence of people with different experiences in this crisis would help maximize diversity and achieve information richness. (Table1).

The main tools of data collection were in-depth and semi-structured individual interviews. Obtaining informed recorded consent was done by explaining the preservation of participants' confidentiality and identities before the interview. Interviews performed with general and open-ended questions: (1) "What were your experiences watching nurses' dance videos in cyberspace, in the COVID-19 pandemic?" (2) What effect do you think it had when those critical circumstances started? (3). Exploratory questions and supplementary interviews were used during the interviews.
Interviews were digitally recorded with their consents. They were reminded that the recorder would be turned off at any stage of the interview if they did not want to record part of the conversation. Sampling continued until information saturation, i.e. no new category and subcategories were received. Interviews were conducted in the time range of 45-90 minutes. In order to check the accuracy and robustness of the data and to ensure that the study accurately reflects the experiences of research participants, four criteria of reliability, verifiability and transferability were used [5].

Analysis

At the end of each interview, the researcher wrote the recorded content of the interview word by word. Then reading the text several times and listening to the recording again were needed to get general understanding. The texts were analyzed word by word,

line by line or paragraph by paragraph and the initial codes were assigned to it. To achieve to what the data says, after extracting the initial codes, the codes were categorized according to similarities and differences and placed in an initial category. The goal was to discover how participants' felt, what they were experiencing, and listening to what they had to say. Participants were assured that the interviews would be published without mentioning their names.

Results

The content of nurses' experiences of dance are classified into ten categories (Table2):

Category one: The purpose of dances
1. Positive intentions of the creators. P. 4: "The intention of the creator of the clip must have been positive thinking and according to her colleague: COVID-19 crisis taught us that: 'every cloud has a silver lining'."
2. Intention of making people laugh. P.11: "They wanted to make people smile."
3. Creators did not have a specific goal at the beginning of making the clip. Member No. 3: "In my opinion, they did not start making the clip with a specific intention."

Category two: positive views
1. The popularity of dance. P.12: "The reason for this dances based on what my colleagues say, is most people like them."
2. Create a good effect. P.4: "In this critical infective space, if someone dances well, she has created a great effect of herself specifically when one has put herself into risk of disease by working here."
3. Dancing is a routine activity in some wards: P. 8: "Dance in an environment that face a lot of death, for example pediatric oncology or nursing homes is a routine activity of those institutions, however it is sometimes being missed in the Middle East hospitals and nursing homes because of religious beliefs."
4. Allowed in separate departments based on the gender: P.12: "Dancing is allowed only in the wards were men and women are separated based on the gender and all the nursing staff and patients are either male or female (because of religious beliefs)."
5. Has a history in the hospitals: P.12: "I used to work in the psychiatric unit during the nineties and the dance session used to be held every evening around 4-6 o'clock and at that time it was just a cassette tape and audio recordings and everyone had to take her favorite tape from home and nothing was wrong with it to dance with the patients!"

Category three: Psychological effects
1. Put a mask on the fear: P.4: "We somehow hide our fears behind the dance."
2. It makes you feel young: Member No 20: "With dance, I feel ten years younger and I feel conquering the highest peak of the country.
3. The needs of the mentally ill. P. 12: "One of the hospital managers many years ago was a restricted religious person and an army commander as well and he was well informed and believed that psychological and mental health patients are somehow excluded from the society and they need to dance with nurses to regain their happiness."

4. Transmitting the good spirit to the patients. P.13: "I do not know how to express the reason for dancing of my colleagues but being in contact with ordinary people not very religious ones they often found it as a way to transferring happy spirits to the patients."

5. Elevating mood level: P. 7: "I think the reflection is that in different situations they try to keep their spirits up!"

Category four: Reactions and reflections

1. Reactions to existing pressure. P. 7: "I think it was a reaction to the maximum pressure on the people these days."

2. Surprised by watching the clips: P. 5: From the very beginning of the Pandemic crisis and mortality across the nation I was shocked by watching the dance clips!"

3. A kind of globalization: P.3: "It is hard to believe that this person who dances, is really a nurse and we become globally known with these dances and we have to accept the fact!"

4. Positive and sometimes negative reflections of the dance. Member No 7: "The reflection of the dance was very positive and effective. There were also negative perceptions that depends on the people's thoughts."

...Category five: Impressions

1. Mutual understanding of the dance message. P. 15: "I think everyone can understand the nurse's dance message."

2. There is disagreement about dances. P. 13: "We do not have a homogeneous and integrated society and on the contrary, social distances are increasing everyday so there will be more disagreement on different views."

...Category six: Symbols

1. A symbol of courage and conscientiousness. P. 4: "In my opinion these dances showed the symbol of strength and fearlessness of nurses and their conscientiousness." He added: "We were working as the frontline staff in the hospitals every day and some people were sitting at home all day long!"

2. A symbol made by non-nurses. P. 16: "This dance was a symbol made by non-nurses to give them the spirits."

3. A symbol of not being afraid of death. P.7: "Wanted to tell people they are not afraid of death."

4. A sign of growth. P. 20: "True, we were very tired but these dances is a sign of growth for us and differentiates us from others who did not have such experience."

...Category seven: Meanings

1. It means to be present: P.15: "They wanted to let people know that how nurses are supportive."

2. A kind of love. P.15: "This is a method of nurses showing their love to the patients."

3. A kind of self-sacrifice. P. 15: "These nurses are still called angels of self-sacrifice. I was somewhere yesterday and someone asked me about my occupation and then introduced me as an angel to others."

...Category eight: Negative views

1. Lack of initial interest in dance clips. P. 3: "when nurse colleagues watched the dance clips for the first time, they did not like them and then after some days they got used to them."

2. Nurses do not have the strength to dance while working. P. 3. "Of course, I am sure the dances on the clip are not performed by the nurses. A nurse who takes care of COVID-19 patients is so tired to be able to dance."

3. A nurse does not have the opportunity to dance. P.8: "There were no personal protection."

4. Sad behind the scene of nurses' dances. P. 3: "Because I am a nurse, I can understand her better, the patients are in critical condition. She is in danger of infecting her own family, the loss of her colleagues. And martyrdom of course, how could she dance in this situation?"

5. The suffering behind the dance. P. 4: "Of course, you never know what the dancer actually suffering from in reality. I always tell everyone that we usually see these dances in cyberspace and you do not aware of what the reality is."

6. Kitty dances. Member 5. "Why was all this kitty playing just to cheer up or to say we are not afraid?"

7. Complete the job in the name of nurses. "P. 11: "This kind of works is done by someone else other than nurses and they are finalized in the name of nurses."

8. Impossibility of dancing in illness and death. P. 3: "Dancing was not possible in that critical situation, we lost many young patients during the past weeks, and it was a sad situation."

9. The masks were used as a cover to dance in the name of a nurse. Member 5: "They used the masks and gowns to cover their faces and enter the hospitals for any reasons and made this dance videos and then distributed it in cyberspace under the name of a nurse."

...Category nine: Concerns

1. Concerns about people's beliefs. P. 3: "But, did people really believe that the nurse danced in those difficult conditions so that others would not be afraid?"

2. Obstacles to dancing. P. 20: "I wish they did not at least create obstacles for their dances."

...Category ten: The recommendations:

1. The best time to dance is after the defeat of COVID-19. P. 3: "It is too early now, I agree with the dances after the defeat of the pandemic. We still feel like we had a nightmare."

2. Preference to take care of patients to dancing for them instead. P. 5: God! We were on duty in the ICU, we did not have any rest at all, now it is impossible. By the way wasn't it better for them to just focus on their work and taking care of infected patients?"

3. There is a need to remove the obstacles ahead. P. 11: "We do not need the reward for dancing just not to punish us is enough! Two of our colleagues danced for the patients with just simple movements and made a clip of it and they called us the other day from the hospital security and asked us to stop dancing for the patients and delete the other clips!"

The content of people's experiences of dance are classified into ten categories (Table2):

4. Positive experience of the effectiveness of dance. P. 2: "I sing a song for my children and grandchildren and make them dance and its fun and makes them engaged."

5. The effectiveness of dance in difficult conditions. P. 2: "I remember that in kindergarten also in order to make kids involved and engaged they encourage them to dance in groups and it responds well."

6. Giving others a better feeling. P. 19: "It is always nice to see nurses dance and put some makeup on. You subconsciously feel

better as a patient."

7. Positive attitude towards dance. P. 19: "When we enter different wards of the hospital and see open faces and smiles of medical staff, it has an invigorating effect. I feel happier and more energetic when I smell coffee and a nice music instead of smelling hospital cleaning materials."

...Category two: The therapeutic effect of dance

1. being effective on the treatment process. P. 10: "The joy of these dances has an absolute effect on the mood and healing process."

2. Definite effect on performance and treatment. P. 17: "Has an absolute positive effect on the performance and treatment of patients."

3. The best medicine for the patient. P.19: "I think their work was very interesting at first and dance is one of the best medicines for the patients."

4. Savior of souls. P. 6: "The treatment staff only want to help people and their showed they can improve patient care even with their dances."

...Category three: The joy of dancing

1. Encouraging colleagues and people. P. 18: "I think they dance to cheer up other colleagues and people."

2. To make themselves and other people happy. P. 2: "I completely agree with the dances because it makes the hearts of patients, colleagues and themselves happy even for a few moments."

3. Making the word happy. P.10: "He made the world happy in all these fears!"

4. Stimulates vitality hormones. Member 1: "They danced to activate the stimulating hormones for a moment."

5. Being interesting and gradually being accepted as a routine. P.6: "Because of stressful and very critical situation, people became excited at that time but these dances also become routine as time goes by."

6. Creator of humor. P. 6: "For some people it become a sense of humor and joke at first, however it subsided over time."

...Category four: Meaning of happiness

1. being happy is a way of thanksgiving. P.17: "Remember the plane crash a couple months ago, how sad we were at that time but the big pain from COVID-19 pandemic hit us so hard that we should hope and appreciate our blessings. Being happy is a kind of gratitude."

2. The constant need for happiness. P. 17: "The COVID-19 crisis proved that people need happiness in any situation. Happiness is a constant need."

...Category five: The spiritual effectiveness of dance

1. Boosting the nurse's self-confidence. P. 1: "They were able to increase their self confidence in critical and terrible situations."

2. Creating a calm environment in the conditions of pressure. Member 1: "My opinion is that in order for the patients to get in mood and to keep the hospital environment away from stress, even though they themselves endured a lot of stress, their work was really great. God bless them all."

3. Nurses' stress reduction. P. 10: "May be because of reducing their own stress, because I myself, when I am very upset me play a song and dance in my privacy."

4. Nurse and patient stress reduction. P.2: "The nurses' dance, I

think, was done both to reduce the patients' stress and themselves."

5. Distracting the nurse and the patient from the disease. P.9: "They danced to cheer up patients and themselves to distract them for a few moment."

6. Modifier of the mental and physical condition of the nurse. Member No 10: "I think nurses actually help themselves to be in a balanced mental and physical state by dancing."

...Category six: A symbol

1. Symbol of strong morale of nurses. P. 17: "This shows a very strong moral of COVID-19 nursing staff in the area."

2. The symbol of unlimited courage of nurses. P. 18: "And dancing in the middle of this pandemic showed a kind of boundless courage of the COVID19 nurses in this area."

...Category seven: The place of dance among the people

1. People's favorite. P.1: "The nurses' dance was so lovely for the people and it was like their child is dancing for them."

2. Good for everyone. P. 14: "I have not heard anything bad about dance from anyone!"

3. Pleasant for everyone. P. 17: "Greeting to the brave and heroic nurses and especially those who played a role in creating this happiness. The dance movements were really from the bottom of their heart and sat in everyone's heart."

...Category eight: General recommendations

1. Rewarding the creator of dance. P. 18: "And I think there should be encouragement and reward for the first group that has done this."

2. The need to let nurses dance freely. P. 1: "Despite all the hard work, the hospital securities has stopped them from dancing for the patients!"

...Category nine: People's thoughts

1. They made this dances as if nurses has danced. P. 19: "These dances are not all done by nurses, the people make them as if nurses has danced. There are other examples such as laboratory personnel also dancing."

2. The people of this area of the country are the creator of many dances. P.1: "The very early dances are belonged to northern part of the country and they were the creators."

1. Mutual understanding of many dance messages by the people. P. 9: "Because it was not a funny clip for the dance and it was a real documentary."

2. Showing disobedience to the regulations. P. 6: "Because it is a crime for a woman to dance in public in our Islamic government, they tried to dance just to show their opposition to a series of laws in an anonymous form."

3. The good mood of a nurse worth more than any medicine. P.19: "With the experience of a few years that I had the honor to be a nurse for my mother, I can say that a good-natured nurse is even more effective in healing process than any medication."

4. A kind of mental creativity of the creator. P. 6: "The first nursing staff that has started these dances for the COVID-19 patients, should be appreciated well. They must be so creative to make such an innovation."

...Category ten: Reflections

1. People were surprised by self-sacrifice and courage of nurses. P. 17: "For all the fearlessness and self-sacrifice of nurses, people

were surprised."

2. for and against reactions in society. P. 14: "Of course there were different reactions in the society, some liked it and some did not."

3. Global reflection. P. 6: "It had a global impact because it was being held in a country where dancing in the workplace specifically by women is a form of civil dissent."

4. Modeling other countries: "P.19: " various dance clips like this were broadcasted from an official television channels around the world, and especially a famous performer who was also a reporter, taught the dance moves to his colleagues in the studio and was a very interesting program!".

Discussion

According to the content of nurses' views, nurses' negative opinions about dance clips in cyberspace have been high. The nurses believed that they were not interested in dance clips and that these clips were a symbol made by non-nurses, not the nurses themselves. They believed that the nurses did not have the strength to dance in hospitals in the COVID-19 crisis, and that the best time to dance is after they can defeat the disease, not now and the nurses do not have this opportunity to dance. They were surprised to see the clips, they believed that taking care of patients was preferable to dancing during the crisis and they considered dancing to be ugly; they believed that it was impossible to dance and be happy during illness and death.

In times of difficulty and conflict like these, the art has always been used to express human conditions and create a sense of connection and meaning. Over the past few months, people around the world have used song and dance to connect with each other and boost their spirits. Hospital staff also sing and dance to patients who are denied access to friends and relatives. These initiatives have become ubiquitous on social media, giving people involved a sense of hope, connection, and optimism [6].

In the present study, people mostly had a more positive perception of dancing than nurses. People believed that the dance videos were made by nurses and it had a global impact, with the aim of raising the spirits and making themselves, their colleagues and the people happy. The dances influenced the healing process and were good for everyone. They had a positive assessment of its effectiveness, especially in these difficult circumstances, and believed that the creator of dance should be rewarded. Dances were considered to modify the mental and physical condition of nurse and their opinion. Dances could have a definite effect on the nurse's performance and treatment of patients. The dances boosted the nurse's confidence and created a mutual understanding of the message of the dances. They believed that dance was invented by the people of this area of the country and was a symbol of the strong spirit of nurses from this part of the country, which helped them to cause a better feeling for others. According to them, there is always a need for happiness and being happy is a kind of gratitude. These dances have been popular with the people and have surprised the people with all their self-sacrifice and courage of the nurses. This symbol

of boundless courage of nurses has made the world happy. It was considered a kind of creative activity of the creators, reducing the stress of nurse and the patient from the disease, stimulating the hormones of vitality and the best medicine for the patient, even better than any medicine that could create a calm environment in this situation. People also emphasize on the need to let the nurse's dance freely. Several studies have shown that dance/movement therapy provides the possibility of treating complex psychological and directly contributes to person's recovery process [1, 7-9]. It is important to note that such arts are not only inherent in human beings but also play an important role in health and well-being and enable human beings to communicate and express their feelings [6 - 9].

Conclusions

If we want to maintain the happiness and health of society, it is better to consider this crisis as an opportunity than a challenge. In such cases, arts such as dance can play a huge role. These frightened souls must come out of an environment full of fear or a crisis. In such cases, the art of dance and its creator must be supported. Nurses should not be involved in the debate over whether dancing is good or bad. Because in the health crisis, anything contributes to the happiness and health of many people is appreciated and needs support.

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