

## The Holistic Approach

The term “holism” comes from a Greek word meaning *all, entire, total*. A holistic approach to care planning takes a “big picture” viewpoint; it considers all the client’s problems, strengths, and desires for change and creates interventions that address them in a coordinated way. A holistic approach helps the client to organize and prioritize his or her needs and to understand the inter-relationship among these needs. It helps the client to access specialized services, to be able to expect coordination between services, and to create realistic objectives that match his or her needs. A holistic approach identifies the service/treatment goal as “wellness” and offers torture survivors the opportunity to be creators of their own reality of wellness.

In this module, we’ll discuss the principles underlying this holistic approach, and you’ll have an opportunity to apply those principles in creating a model care plan for Mary, one of the survivors you’ve met in the course vignettes. A well-managed holistic care plan requires logistical skill.

1. Providers should consciously think of themselves as team members working together
2. Providers should know who the team members are, what each is responsible for, and how to contact them by phone and email. A typical team might include a case manager, one or more healthcare providers, a social worker, a mental health therapist and/or a psychiatrist, an immigration attorney, as well as individuals and organizations in the community as adjunct resources.
3. A survivor’s care plan should be grounded in assessments made by individual team members which are integrated in a multidisciplinary care planning meeting, held on a regular schedule. Specific team members should be responsible for consulting with team members who are unable to attend meetings in person.
4. Survivors’ expressed needs and priorities should guide the care plan
5. Information developed in individual assessments, care planning meetings and provider consultations should be documented in the survivor’s chart.
6. Care plans should include specific problems, goals, resources, interventions and outcomes
7. Care plans should be reviewed and updated at scheduled intervals.
8. Providers should specifically agree to share information regarding urgent or emergency situations, e.g. homelessness, illness or injury, developments in immigration cases, problems with family in the US or the home country.
9. Providers should build relationships with specialty services and programs in the community, and provide orientation and training about torture survivors to staff there, as appropriate

To set the stage for this work, we recall that torture and healing from torture occur in a broad context. Holistic care also includes consideration of the history and politics of the survivor’s home country and region, the survivor’s personal life history, culture, spiritual practices and values, community (both past and present), personal affiliations of family, clan, ethnicity, and the organizations and services available to meet the survivor’s needs. When we are working with a survivor to develop a service plan, we keep all these elements of this broad context in our awareness, as they shape the meaning and purpose of the individual healing process.