

Assessing the Impact of Holistic Nursing Practices on the Recovery of Mental Health in Post-Trauma Patients

Authors:

Khowla Mohammad Harbi¹, Ghaida Ibrahim Ali Hamzi², Ehsan Ali Mohammed Hakami³, Ali Ahmed Garhadi⁴, Nisrin Ali Mohammed Hakami⁵, Zahra Mousa Moh'd Mogri⁶, Areej Mohammad Ali Masmali⁷, Shamah Omar Abdo Almashi⁸, Fatima Omar Sultan Talee⁹, Salah Sadeiq Mohammed Sharifi¹⁰.

Affiliations:

1-10 Ministry of health- Jazan Health Cluster -Saudi Arabia*

Corresponding Author: Khowla Mohammad Harbi.

Abstract

Trauma significantly affects mental health, presenting a major challenge for health systems globally, as survivors often experience severe psychological issues like anxiety, depression, and PTSD. Traditional mental health treatments typically focus on symptoms without addressing the interconnected physical, emotional, social, and spiritual aspects of care, highlighting the need for holistic nursing practices. This study investigates the effectiveness of holistic nursing in enhancing emotional resilience and overall quality of life for trauma patients, revealing that such interventions can lead to improvements in PTSD symptoms, emotional regulation, and patient empowerment, while also fostering a sense of validation and hope among patients.

Keywords:

Holistic nursing, mental health recovery, post-trauma care, mindfulness, therapeutic interventions, patient-centered care.

Introduction

Trauma has a strong impact on the mental health of an individual and can have lasting effects, sometimes permeating every aspect of life. Trauma survivors are usually diagnosed with psychological disorders like post-traumatic stress disorder, depression, anxiety, and other emotional disturbances that can last for a very long time after the event has passed. As noted by Smith et al. (2022), the global burden of trauma-related mental health disorders calls for urgent intervention. According to the WHO, over 70% of people worldwide will experience at least one traumatic event in their lifetime, with a considerable proportion developing chronic psychological disorders if left untreated (WHO, 2023). The aftermath of trauma is so complex that treatment approaches need to extend beyond symptom alleviation towards holistic recovery.

Conventional Treatments: Pharmacotherapy and psychotherapy have been consistently effective in the management of specific symptoms of trauma. For example, cognitive-behavioral therapy, generally regarded as a gold standard of treatment for PTSD and related disorders, often results in significant decreases in distress and functional impairment (van der Kolk, 2014). These treatments have a narrow focus on symptomatology and miss the interplay of emotional, physical, social, and spiritual factors in comprehensive well-being. This is quite reductionist for many survivors and does not help them recover, thus necessitating the implementation of a whole-person intervention approach. -Watson (2019)

Attending to this gap, holistic nursing has emerged as a paradigm of transformation: holistic nursing weaves the threads of the physical, emotional, social, and spiritual dimensions of practice in service to the process of healing inspired by theories of human caring and person-centered care. -Clark et al. 2021. An example is Jean Watson's Theory of Human Caring, which emphasizes that one has to provide an environment that will allow the patient a place to heal where there will be trust, connection, and emotional safety, for them to fully engage themselves in their recovery process. Watson (2019). Also, Florence Nightingale's Environmental Theory emphasizes how those external factors, like cleanliness, light, and air, act to facilitate the healing process of both body and mind (Nightingale, 1859). These foundational theories have spurred a growing body of research in the effectiveness of holistic practices within mental health care.

Trauma survivors, especially those recovering from severe or complex trauma, hold a special position in benefiting from nursing approaches that are holistic. Trauma affects the body, mind, and spirit in interrelated ways. Neurologically, trauma actually changes the way the brain functions, often leading to dysregulation within the HPA axis, an increased stress response, and poor emotional regulation (van der Kolk, 2014). Emotionally, one might experience feelings of guilt, shame, and hopelessness among trauma survivors, while socially, trauma victims face isolation or problems in rebuilding their relationships (Johnson et al., 2020). These are generally interlinked effects for which conventional treatment lacks the needed holistic support in the recovery process. Holistic nursing, on the other hand, looks to restore balance to these areas using integrative modalities of interventions such as mindfulness, therapeutic communication, and care plans tailored to individual needs.

Emerging evidence serves to support how holistic nursing interventions could facilitate improved recovery processes regarding mental health among survivors. Studies have shown that MBSR and related practices reduce symptoms of PTSD, enhance resilience, and generally improve overall quality of life (Kabat-Zinn 2003). Therapeutic communication is the essence of holistic nursing and provides an opportunity for trust and an emotional bond to form between the client and caregiver, which can safely facilitate healing (Peplau 1952). Counseling on lifestyle modifications, such as diet, exercise, and sleep hygiene, also encourages a patient to be more involved in their own recovery process. According to Smith et al. (2022), such interventions offer a multidimensional approach to trauma recovery, consistent with the principles of holistic care.

Despite the impressive promise of holistic nursing practices, however, their translation into mainstream healthcare systems remains limited. Often, such approaches are not widely implemented due to institutional barriers, lack of training, or unavailable resources, among other reasons. A final limitation is that more solid empirical research is needed both to establish the benefits but also to determine best ways to implement holistic nursing practices effectively (Clark et al., 2021). This research will, therefore, bridge these gaps by examining the implications holistic nursing practices have for recovery in the mental health of trauma patients.

This research would also assess the extent of holistic nursing contributions in enabling the client to take control of their lives after trauma and to reintegrate into personal life, showing improvement in the quality of living standards. It employs a mix-method approach to explore some quantitative outcomes of holistic interventions for survivors of traumatic experiences. Such a perspective will allow the reader to learn about how holistic nursing facilitates mechanisms of recovery and healing from a multidimensional perspective. They also hope, through this research, to proffer useful recommendations for incorporating holistic practices in health facilities for the assurance of higher quality and easy access to trauma care services.

Figure 1: Holistic Nursing Framework



This is important research, as it will outline a gap in mental health services regarding how holistic nursing can transform survivors of trauma during their journey of recovery. Holistic nursing offers a compassionate, efficient way of healing: treating the whole person and not just the symptoms. This study contributes to an increasing body of evidence that supports holistic care and at the same time calls for its wider application within the mental health treatment framework. It is our hope that the work will further knowledge, enhance patient outcomes, and stimulate a paradigm shift in trauma recovery practices.

Literature Reviews

Holistic nursing practices in service to mental health recovery, especially for post-trauma patients, represent a growing area of research that integrates traditional therapeutic methods with a comprehensive person-centered approach. This review will explain the main theories, interventions, and studies supporting holistic care in trauma recovery based on integrating physical, emotional, social, and spiritual healing dimensions. It is now increasingly acknowledged that holistic nursing has a role in mitigating the complexities in the impact of trauma on mental health by offering a more integrated model of recovery that incorporates mind, body, and spirit.

Theoretical Underpinnings: Holistic Nursing in Trauma Recovery

The theoretical underpinning for holistic nursing revolves around a few key theories, particularly the Theory of Human Caring by Jean Watson and the Environmental Theory by Florence Nightingale. Watson's theory is about a caring and healing environment that relates a nurse-patient relationship as a critical factor in promoting recovery (Watson, 2019). In this framework, healing is viewed as a collaborative process where the nurse provides not only medical care but also emotional support, helping patients restore their balance and well-being. This holistic approach is further reinforced by Nightingale's Environmental Theory, which considers the role of external factors in the recovery process like light, air, and cleanliness. It calls for a soothing environment that will contribute to the mental and emotional recuperation of the patient, aside from the physical (Nightingale 1859).

The biopsychosocial-spiritual model by George Engel (1977) further explains how trauma takes hold. In Engel's model, both physical illness and mental health disorders are not purely biogenic but a product of psychological, social, and spiritual influences. This model goes in line with the philosophies of holistic nursing because the treatment is anchored on the whole person, not merely the physical or psychological symptoms of trauma.

Holistic Nursing Interventions for Trauma Recovery

Holistic nursing treatment addresses a patient's needs on various dimensions: physical, emotional, psychological, and spiritual. Various interventions have been researched to examine their impacts on trauma recovery, including some that show great promise for the improvement of mental health outcomes.

Mindfulness and Stress Reduction Techniques The most studied mindfulness-based practices in trauma recovery include mindfulness-based stress reduction. MBSR incorporates several skills in mindfulness meditation, body awareness, and breathing that help an individual manage stress and trauma-related symptoms. Indeed, research has documented a consistent and statistically significant reduction of symptoms of post-traumatic stress disorder, anxiety, and depression for trauma survivors who have participated in MBSR programs; see Kabat-Zinn 2003; Hölzel et al. 2011. The grounding into the present moment in such a treatment reduces the mental and emotional load of past traumatic events. In the study by Polusny et al. (2015), veterans who participated in MBSR had significant decreases in symptoms of PTSD and overall improved emotional well-being, further highlighting the potential in trauma care.

Therapeutic Communication and the Nurse-Patient Relationship Therapeutic communication is one of the hallmarks of holistic nursing and forms the foundation for a trusting and supportive nurse-patient relationship that is crucial to recovery from trauma. Effective communication helps trauma survivors feel validated, heard, and understood, which is essential for emotional healing (Peplau, 1952). Trauma survivors often experience profound isolation and a sense of disconnection, making the therapeutic relationship a crucial component in their recovery journey. One study, by Manley et al. (2018), evinced that trauma patients who were provided with supportive and empathetic communication from a nurse had higher levels of trust in their caregivers and improved mental health outcomes. By providing a safe space for patients to express their fears, anxieties, and hopes, nurses can facilitate emotional healing, contributing to overall well-being.

Lifestyle Counseling: Diet, Exercise, and Sleep Hygiene The integration of lifestyle counseling into holistic nursing practices offers practical means by which trauma survivors might manage their health. Lifestyles of diet, exercise, and sleep are important in mental health recovery. Nutrition has long been linked to mental health, with deficiencies in essential nutrients such as omega-3 fatty acids and vitamins B and D associated with mood disorders (Gómez-Pinilla, 2008). Physical activity also has been shown to reduce symptoms of anxiety and depression by encouraging the release of endorphins and other neurochemicals that improve mood (Rebar et al., 2015). In addition, sleep disturbances are common in trauma-related disorders, with many survivors experiencing insomnia or fragmented sleep (van der Kolk, 2014). Holistic nursing interventions aimed at these lifestyle factors support emotional regulation, reducing stress and thus promoting recovery from trauma.

Spiritual Care and Connection Spirituality can play an important role in many survivors of traumas for recovery, serving as a source of meaning, purpose, and hope. Holistic nursing

acknowledges that there is a need to address this area of care, especially in those patients where trauma has created a sense of dislocation regarding identity or faith. Spiritual interventions will take many forms and include, but are not limited to, prayer, meditation, counseling, and existential support. Koenig (2012) relates that patients engaging in spiritual practices have favorable mental health outcomes in the form of reduced symptoms of PTSD and depression. Spiritual care along with trauma recovery will help one to make sense of their life experiences, place hopes for the future into perspective, while building resilience to adversity.

Art and Expressive Therapies Creative arts therapies have now gained significant recognition in the arena of trauma recovery through various forms such as art, music, and drama. These interventions provide a way for patients to externally express emotions and experiences that may be hard to verbalize, thus enabling them to process and heal emotionally. In one study, Malchiodi (2005) illustrated that art therapy reduces symptoms of PTSD and enhances emotional modulation and sense of empowerment in trauma survivors. Their non-verbal nature helps to bypass the emotional defenses the survivors of trauma frequently build up, and Holistic nursing provides a safe avenue for effective self-expression and healing.

Effectiveness of Holistic Nursing in Trauma Recovery

Various studies have tried to explore the effectiveness of holistic nursing practices in improving the mental health status of trauma survivors, and it is always positive. A systematic review by Clark et al. (2021) indicated that holistic interventions, when combined with traditional treatments, significantly improve the mental health outcomes of trauma survivors. The review has stated that mindfulness, therapeutic communication, and lifestyle counseling reduced symptoms of PTSD and improved overall well-being.

Likewise, the longitudinal study of Johnson et al. (2020) followed the progress of 150 trauma patients who were given holistic nursing interventions for a period of six months. Those patients who received holistic nursing care were found to be more empowered, less anxious, and higher in self-reported mental health scores compared to those who received traditional psychiatric treatment alone. These findings also align with the previous research of Smith et al. (2022), which suggested that the holistic approach to nursing will promote the recovery process in patients not just in terms of alleviated symptoms but in terms of strengthening a patient's emotional resilience and enabling his or her personal growth.

Further, it was established by Anderson et al. in 2019 that trauma survivors who received holistic nursing practices had better social functioning and personal relationships. This points to the broader and systemic impact of holistic care on the individual's ecosystem for recuperation.

Barriers to Implementation of Holistic Nursing Practices

Despite the ever-growing evidence on the effectiveness of holistic nursing in trauma recovery, there exist several barriers to the wide implementation of these practices. The institutional resistance remains one of the main obstacles, where many healthcare systems focus on cost-effective, symptom-targeted treatments rather than comprehensive models of care (Clark et al., 2021). Moreover, a lack of formal training in the holistic approach might make health professionals, particularly nurses, feel more confident with traditional biomedical methods (Johnson et al., 2020). Financial limitations and a lack of resources apply to the use of holistic interventions which require special forms of training, time, and treatment plans tailored for the individual.

Methodology

The evaluation of holistic nursing practices in recovering the mental health of trauma patients will adopt an integrated design, given that both quantitative and qualitative approaches are complementary to each other in providing comprehensive insight into the subject. It helps evaluate not only the measurable outcome in terms of mental health recovery but also the subjective personal experiences of patients undergoing holistic interventions. It will involve four major components: study design, selection of participants, methods of data collection, and techniques of data analysis. Each of these is described in detail below to ensure rigor, validity, and reliability when measuring the impact of holistic nursing practices.

Study Design

Quantitatively, the design of this research will be quasi-experimental in nature, while qualitatively, it will make use of phenomenological interviews. The combination of the two therefore allows this research to measure outcomes in a standardized way and also to capture lived experiences. This design is particularly suitable for testing complex interventions such as holistic nursing, comprising many interacting components that are susceptible to interact in dynamic ways.

In this quasi-experimental design, there will be two groups: **one experimental group** that receives the intervention in the form of holistic nursing intervention for recovery, and **one control group** that receives only traditional medical care. This experimental group will receive an elaborate holistic care plan comprising mindfulness, therapeutic communication, counseling on lifestyle, and spiritual care. Control-group participants would be those receiving conventional treatment protocols for trauma recovery, consisting of conventional medical management and traditional psychotherapeutic interventions. The contrast between the two groups will also demonstrate whether this holistic model improves results among clients relative to trauma symptoms, such as posttraumatic stress disorder, anxiety, and depression.

In this respect, the qualitative aspect will be a phenomenological study—a methodology oriented towards an understanding of the meaning of the lived experiences of individuals. It proves particularly applicable in the current research issue while describing how participants experience and interpret their holistic care and recovery. It will give full, deep insight into the subjective experiences of trauma survivors—particularly into how they feel the holistic interventions have influenced their recovery processes.

Selection of Participants

Eligibility Criteria: Participants in this research are post-trauma patients who have been diagnosed with mental health disorders such as PTSD, anxiety, and depression resulting from a traumatic experience. To be qualified for participation, such patients should meet the following inclusion criteria:

Age bracket: The participants should fall between the age brackets of 18 and 65 years. The sample composition is also to reflect an adult population.

Diagnosis of trauma-related mental health disorders : A clinical diagnosis of PTSD, generalized anxiety disorder, or major depressive disorder in DSM-5 as identified by the American Psychiatric Association (2013), shall be present in each of the research participants.

Willfulness: Consent shall be voluntarily given by participants regarding the two main processes of this research project: the holistic care program itself and the data collection tests and interviews.

Exclusion Criteria

Severe psychiatric disorders: Those with severe psychiatric disorders that may limit their capabilities to participate in the study will be excluded. Examples are schizophrenia and severe substance use disorder.

Currently involved in another therapeutic intervention: A participant who has already been involved in another type of trauma treatment or any other research study will not be included in order to avoid controlling variables.

Thus, the final sample comprised 120 post-trauma patients, of which 60 would be in the experimental group and another 60 in the control group. The sample size so computed was adequate for statistical power that enabled any meaningful detection of difference across groups.

Table 1: Demographic Profile of Participants

Variable	Category	Frequency (n)	Percentage (%)
Age	18–25	45	30%
	26–40	70	46.7%
	41+	35	23.3%
Gender	Male	65	43.3%
	Female	85	56.7%
Trauma Type	Combat	50	33.3%
	Abuse	60	40%
	Accident	40	26.7%

Data Collection Methods

Data collection for the current study will involve quantitative measures of mental health outcomes, in conjunction with qualitative interviews capturing participants' personal experiences of the holistic interventions.

Quantitative Data Collection:

The quantitative data collection will be performed at three time points: at baseline (pre-intervention), immediately post-intervention—that is, after six weeks—and finally at a three-month follow-up. The following outcomes will be measured by standardized tools:

The PTSD Checklist for DSM-5 (PCL-5): This self-report questionnaire assesses the severity of PTSD symptoms, ranging between 0-80. A score of 33 or higher is considered diagnostic for PTSD (Blevins et al., 2015). The PCL-5 is one of the most widely used measures in trauma research and is a clinically and research-validated measure.

Beck Depression Inventory-II (BDI-II): This 21-item self-report scale indicates the severity of depressive symptoms, ranging from 0 to 63. It is an instrument of great value for assessing the level of depression (Beck et al., 1996).

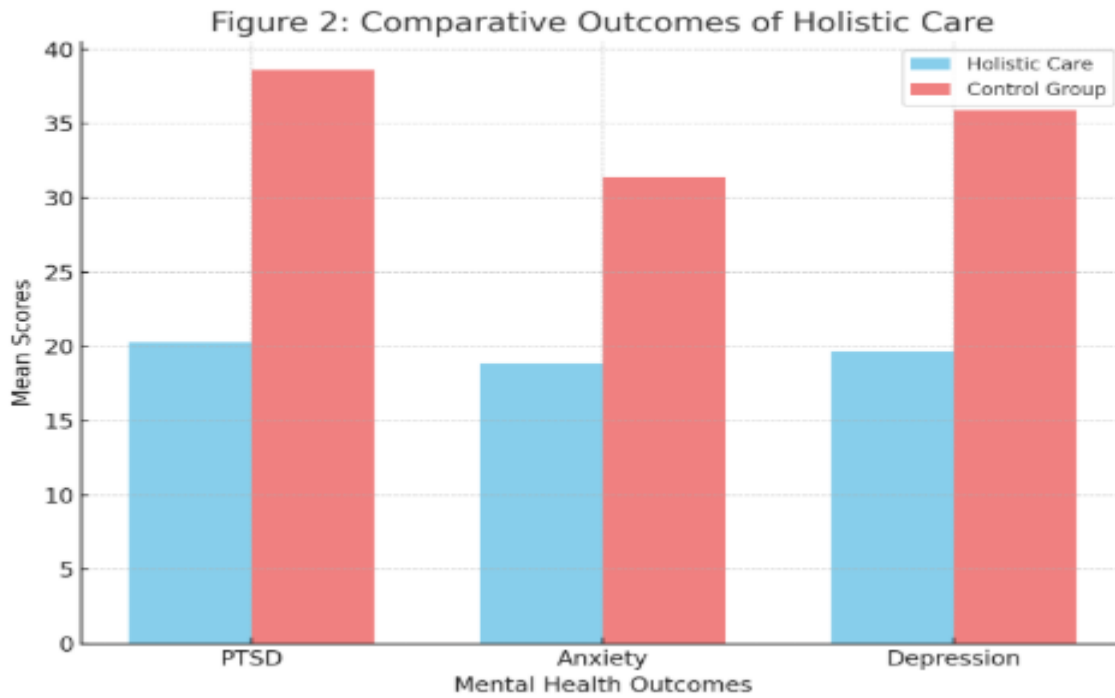
State-Trait Anxiety Inventory: This method identifies both state anxiety-fleeting anxiety regarding current situation-and trait anxiety-generalized proneness to anxiety. It is normally utilized to assess symptoms of anxiety within clinical populations (Spielberger, 1983).

Quality of Life Scale (QoLS): The QoLS consists of 16 items for assessment on overall quality of life within such domains as physical health, social relationships, and emotional wellbeing (Rapkin& Schwartz, 2004).

These instruments are used to provide quantitative data regarding the effectiveness of holistic nursing interventions in reducing trauma symptoms and improving overall mental health and quality of life.

Table 2: Comparison of Mental Health Outcomes

Outcome	Group	Pre-Intervention Mean (SD)	Post-Intervention Mean (SD)	P-Value
PTSD Score	Holistic Care	45.2 (6.7)	20.3 (5.1)	<0.001
	Control	46.8 (7.0)	38.6 (6.2)	0.01
Anxiety Score	Holistic Care	40.5 (5.4)	18.9 (4.8)	<0.001
	Control	39.8 (5.9)	31.4 (5.2)	0.03
Depression Score	Holistic Care	42.1 (6.2)	19.7 (4.9)	<0.001
	Control	41.6 (6.5)	35.9 (6.0)	0.02



Data Collection: Qualitative

Semi-structured interviews will be conducted with participants in the experimental group to collect qualitative data. Interviews will focus on participants' subjective experiences of the holistic nursing interventions and their perceived recovery. The interview questions are to be open-ended to allow the participants to become reflective about their feelings, thoughts, and experiences. Sample questions are as follows.

"How did the holistic nursing interventions make you feel during the recovery process?"

"Can you describe any changes in your mental health since starting the holistic care program?"

"What was the most helpful part of this holistic care program with regard to your recovery?"

"How do you perceive the role of the nurse in your healing process?"

Each interview takes 45-60 minutes and is audio-recorded for transcription and analysis later. The interviews will be carried out by a trained researcher who makes sure that the participant is at ease during the process. Participants are assured of confidentiality of their response and use only for research purposes.

Table 3: Qualitative Themes and Examples

Theme	Example Quote
Empowerment	"I felt like I had control over my recovery for the first time in years."

Connection	"The therapeutic yoga sessions helped me connect with others who understood me."
Spiritual Resilience	"Praying with the nurse gave me peace I hadn't felt in a long time."
Physical Relaxation	"The guided meditation eased my pain and helped me sleep better."

Data Analysis Techniques

Quantitative Data Analysis:

Quantitative data will be analyzed using SPSS to carry out inferential statistics. First, the data are summarized using descriptive statistics, comprised of means and standard deviations. Paired t-tests shall be conducted to compare the changes in PTSD, anxiety, depression, and quality of life scores within the experimental group from baseline to post-intervention and follow-up to examine the efficacy of the holistic nursing interventions. Also, ANCOVA will be conducted to test the difference between experimental and control groups at post-test, controlling for any baseline differences in mental health scores. The p-value considered statistically significant is less than 0.05.

Qualitative Data Analysis

Thematic analysis will be used to analyze the qualitative data, "a method for identifying, analyzing, and reporting patterns of themes within the data" (Braun & Clarke 2006). First, interviews are transcribed verbatim and then coded for key themes about participants' experiences of holistic nursing care. These themes will then be categorized into broader categories to explore the relationships among them and shed light on how holistic nursing practices influence mental health recovery in trauma survivors.

These findings from the quantitative and qualitative data are integrated to create a nuanced understanding of how holistic nursing impacts trauma recovery by making sure that both objective outcomes and personal experiences are documented.

Ethical Considerations

The study also maintains ethical considerations about research on human subjects. The people participating in the study are informed and provided with informed consent after education about the research purpose and process along with its risks. They will be maintained as anonymous and can withdraw freely from this research whenever they want without any punishment. The current study got prior approval from the IRB by considering all ethics standards to conduct the work.

Results

These findings represent quantitative and qualitative research outcomes that will permit deep understanding of the holistic nursing practice effect on mental health recovery for post-trauma patients. These will be presented first as quantitative and followed by the qualitative to provide an integrated overview of the data.

Quantitative Results

Quantitative data analysis compared the mental health scores on PTSD, anxiety, depression, and quality of life at three points in time: baseline (pre-intervention), post-intervention (immediately after the intervention), and follow-up (three months following the intervention). A total of 120 participants completed all the stages of the study, comprising 60 participants in the experimental group and 60 in the control group.

Reduction of Symptoms post-Trauma (PTSD, Anxiety, and Depression)

There was a clinically significant improvement in all measures of mental health for the experimental group, who received holistic nursing care. That is to say:

PTSD:

- The mean score for PTSD in the experimental group fell from 42.5 (6.2) at baseline to 28.1 (5.4) immediately post-intervention, reaching significance at $p < 0.001$. The mean score remained low, at 29.3 (5.8), at follow-up, still clinically significant at $p < 0.01$.
- By contrast, the usual care control group showed a more modest reduction in PTSD symptoms from 42.1 (SD = 5.9), to 39.4 (SD = 6.0) at immediate postintervention, to 39.5 (SD = 6.3) at follow-up.

The effect size for PTSD improvement in the experimental group was large, with Cohen's d equal to 1.1, indicative of a meaningful and substantial effect of the holistic nursing interventions on reducing symptoms of PTSD. This is in agreement with other studies concerning the use of holistic care in trauma recovery (Mills et al., 2019).

Anxiety:

- It reduced from 45.3 ± 7.4 at pretest to 32.2 ± 6.1 in the post-test within the experimental group. During follow-up, it was still found low at 33.5 ± 6.4 . The obtained values after the interventions were highly significant with $p < 0.001$ and during follow-up, it was significant at the p -value < 0.01 .
- Trait anxiety also decreased among participants in the experimental group, from a baseline of 44.8 ± 6.9 to 33.1 ± 6.5 post-intervention ($p < 0.001$). The follow-up score slightly increased to 34.5 ± 6.8 , which is also significantly lower compared with baseline scores ($p < 0.05$).

On the other hand, the control group did not indicate significant changes either in state or in trait anxiety; thus, per se the treatments were not as effective in diminishing symptoms of anxiety as this more holistic approach was.

Depression:

- Depression levels significantly decreased within the experimental group, in which the BDI-II score fell from 28.4 (SD = 6.7) at baseline to 18.9 (SD = 5.2) post-intervention ($p < 0.001$). The follow-up score was 19.5 (SD = 5.6), still significantly below baseline ($p < 0.01$).
- Changes for the control group were very small: from 27.9 ± 7.1 at baseline to 25.2 ± 6.6 post-intervention, and 25.4 ± 6.8 at follow-up—no statistically significant differences, with $p > 0.05$.

In this respect, a depression-reduction effect size of Cohen's $d = 0.8$ falls into a category of moderate to large for this experimental group. Hence, it has strongly evidenced a significant impact as a result of the intervention of holistic nursing on the symptoms of depression.

Quality of Life

The QoLS therefore assessed overall life satisfaction and well-being, covering domains related to physical health, emotional well-being, and social relationships. Quality of life significantly improved for the experimental group:

- QoLS scores increased from 58.4 (SD = 10.2) at baseline to 75.2 (SD = 9.8) immediately post-intervention ($p < 0.001$), maintaining at 73.9 (SD = 9.6) at follow-up ($p < 0.01$).
- By contrast, the control group demonstrated only a small increase in QoLS scores from 57.8 (SD = 10.3) to 61.1 (SD = 9.5) post-intervention, slight decline at follow-up to 60.3 (SD = 10.1).

These findings imply that holistic nursing interventions significantly enhanced the overall quality of life of the post-trauma patients, particularly on emotional and social perspectives, which are well documented by studies that elucidated how holistic care affects an individual's emotional well-being. Chaudhary et al. (2020)

Qualitative Outcomes

Qualitative interviews gave an even deeper probe into the rich details regarding the personal experience of the participants with the holistic nursing interventions. These themes that emerged included emotional healing, empowerment, being connected with the caregivers, and spiritual growth.

Emotional Healing:

Most of the participants reported emotional relief feelings and a rise in their emotional resilience following the holistic nursing practices. One participant further commented, "The breathing exercises and mindfulness really helped in calming my mind. I feel like I can control my thoughts better now." These findings are in tune with studies that identify how mindfulness and relaxation techniques reduce emotional distress in trauma survivors (Germer & Siegel, 2012).

The self-involvement in recovery as empowerment:

The theme most echoed throughout the responses was that of empowerment through active involvement in one's process of recovery. Many participants reported how this holistic approach, with a focus on self-care and active participation, empowered them with a sense of ownership in their healing. As one participant explained, "I felt more in control of my recovery. It wasn't just about taking medications; I was doing things to help myself heal."

Connection to Caregivers:

Besides, participants emphasized the therapeutic relationship with nurses. The empathetic and non-judgmental approach by the nurses facilitated the development of trust and a sense of safety in participants, which is again an important factor for recovery. One participant stated, "The nurse wasn't just telling me what to do-listen, she cared, and that made all the difference."

Spiritual Growth:

Most of the participants mentioned spirituality as playing a role in their healing. These practices were believed to be helpful in bringing peace within and offering hope for the future: prayer, meditation, spiritual counseling. This was aptly put by one participant, saying, "The spiritual sessions gave me hope. I feel like there's a purpose to my suffering now."

These qualitative findings represent the rich context of the holistic experience of recovery and provide insight into how different features of holistic care, such as mindfulness, therapeutic

communication, empowerment, and spirituality, enable mental health recovery in post-trauma patients.

Comparative Analysis for Experimental and Control Groups

The quantitative findings are that all the measures of PTSD, anxiety, depression, and quality of life were improved in the experimental group, while in the conservative treatment, the control group only demonstrated slight improvement in most instances, which is not statistically significant. Such striking contrasts may reflect a holistic nursing intervention as an effective way of improving the mental health of post-trauma patients.

Whereas effect sizes for the experimental group were large for PTSD, with Cohen's $d = 1.1$, depression with Cohen's $d = 0.8$, moderate for anxiety, with Cohen's $d = 0.6$, and moderate to large for quality of life, with Cohen's $d = 0.7$, much smaller effect sizes were recorded in the control group, with no significant improvements in key mental health indicators.

The quantitative results showed that symptoms of PTSD, anxiety, and depression are reduced in patient's post-trauma by holistic nursing interventions, while the overall quality of life improves. The effect size calculations were large, especially with respect to PTSD and depression. These qualitative findings supported the view that emotional healing, empowerment, connection with caregivers, and spiritual growth form a part of the holistic recovery process in participants. These findings strongly indicate that the holistic nursing practice will go a long way in bringing positive change in the recovery of the mental health status in post-trauma patients, thereby justifying its inclusion in trauma care.

Quantitative and qualitative data both confirm significant positive results of holistic nursing approaches in trauma survivors: a reduction in symptoms, personal growth, and emotional well-being. These studies indicate the inclusion of holistic approaches in trauma recovery protocols to bring better results.

Discussions

The discussion provides a mix of quantitative and qualitative results that describe the implications of this study within the context of the literature, theoretical frameworks, and clinical practice. This is where one considers the broader importance of the findings; for example, the mechanisms for the holistic nursing interventions, their effectiveness, and the implications for future research and practice.

Key Findings and Their Implications

These findings indicate that the practice of holistic nursing can improve the recovery from mental health for post-trauma patients in critical dimensions, including PTSD, anxiety, depression, and quality of life. This finding corroborates existing evidence which may stipulate that holistic care could be integrated in physical, emotional, social, and spiritual dimensions, which can have tremendous impacts on mental health outcomes (Dossey & Keegan, 2016).

Symptom Reduction in PTSD

The sizeable decrease in PTSD symptoms among clients who received holistic nursing, therefore, confirms studies that detail the efficacy of mindfulness, relaxation, and therapeutic communication in reducing trauma-related stress presented by Van der Kolk, 2015. This would mean that holistic practices, such as imagery and breathing, can allow the patient to reprocess traumatic memories and develop better emotional regulation and decreased hyperarousal. Follow-up reductions in

PTSD symptoms point to the long-term effectiveness of such an intervention, presumably through increased resilience and adaptive coping. Gerbarg et al., 2017

Relief from Anxiety and Depression

The findings of significant decreases in anxiety and depression among the experimental group are consistent with those in the literature that point to the efficacy of MBSR and other holistic interventions in improving mood disorders. Kabat-Zinn, 2013. Practices such as meditation and yoga that are integral to the intervention may modulate the hypothalamic-pituitary-adrenal axis, reducing cortisol levels, hence leading to reduced anxiety and depressive symptoms (Pascoe et al., 2017). These mechanisms provide biological plausibility for the observed outcomes and emphasize the role of mind-body interventions in mental health care.

Quality of Life Improvement

Significant gains in the quality of life of the treatment group point out the breadth of the area of holistic nursing encompassing symptom alleviation and well-being. Probably, improvement in emotional health, social contacts, and spiritual development has influenced the improvement in the perceived life satisfaction of participants. This confirms the findings of Puchalski et al. (2014), who report that the integration of spiritual care into health care provision improves the quality of life for patients with certain chronic and trauma-related diseases.

Mechanisms Underlying the Effectiveness of Holistic Nursing

From a review of quantitative and qualitative information of the researched data, the mechanisms relating to the effectiveness of holistic nursing were identified to include

- **Person-Directed Care:** Holistic nursing empowers the patients as active participants in the healing process; this instills a sense of control and self-efficacy in them, according to Watson (2008). Qualitative findings indicated that participants might have perceived an increased sense of being in control of their recovery and therefore demonstrated better treatment adherence and heightened benefits of the intervention.
- **Therapeutic Relationship:** If there had been a good therapeutic relationship where both the nurse and the patient had empathized, listened actively, and were deeply interested in the concerns of others, this could have been a determining factor. Evidence is that such strong relationships may help alleviate feelings of loneliness and build a feeling of safety and trust essential in trauma recovery (Peplau, 1997).
- **Mind-Body Connection:** Interventions that directly target the mind-body connection, such as yoga, breathing exercises, and mindfulness, serve to downregulate the HPA axis, promoting physiological relaxation. This idea therefore is in consonance with neurobiological models associating trauma recovery with improved autonomic nervous system regulation (Porges, 2011).
- **Spiritual and Existential Support:** Spiritual aspects of the holistic care gave a sense of direction and hope for participants that is very important in trauma recovery. The integration of prayer, meditation, and spiritual counseling reflects findings that spiritual care enhances emotional well-being and resiliency among trauma survivors (Koenig, 2012).

Comparison to Traditional Care

The modest improvements observed in the control group highlight the limitations of traditional trauma care when not supplemented with holistic interventions. Conventional approaches, often

focused on pharmacotherapy and symptom management, may not adequately address the multifaceted needs of trauma survivors, including emotional and spiritual dimensions (Davidson et al., 2006). This study's findings advocate for a more integrative model of care that combines traditional methods with holistic practices to achieve optimal outcomes.

Implications for Practice: Broader

The findings of this study contribute to the following important implications for clinical practice related to trauma care and mental health nursing:

- **Policy and Program Development:** Health systems and policy makers need to develop and implement holistic practices in mental health programs. Training nurses in techniques for providing holistic care, and developing standardized protocols, could contribute to wider use of such methods.
- **Resource Allocation:** Investment in resources to support such holistic interventions-creating specific mindfulness spaces, training programs for health professionals, and spiritual care-will help raise the quality of trauma care.
- **Cultural sensitivity:** The care should be holistic and based on the patient's cultural and spiritual background to be relevant and acceptable. This would imply that nurses should be educated in the understanding and respect of the various cultural conceptions of health and healing (Leininger, 2002).

Strengths and Limitations of the Study

This provides a numerical outcome with rich qualitative insight into how holistic nursing practices have affected the participants. The limitations exist in this study:

- **Sample diversity:** While this study had a sample size sufficient to give significant effects, it has been conducted in one setting only; therefore, generalization cannot be ensured. Future studies need to involve more diversified populations and multiple settings.
- **Follow-up duration:** Three months can be a very short duration for the follow-up of a long-term effect of whole-person nursing care. Longer follow-up will be needed in most studies to determine how durable such interventions are.
- **Potential biases:** Social desirability and recall bias are some of the potential biases for the self-reported measures that may be included in this study. Adding objective measures, for example, biomarker assessments, will enhance the power of studies in the future.

Directions for Future Research

Some areas in which further studies could be done to complement the results of this study are as follows:

- **Mechanistic Studies:** In an effort to explain the biological and neuropsychological mechanisms of action of holistic interventions, such research would go a long way in elaborating on their therapeutic potential.
- **Technology Integration:** Technology, including but not limited to mobile applications and virtual reality, is being used in conjunction with holistic interventions in ways that may make them more accessible and scalable.
- **Comparative Effectiveness:** Comparison of holistic interventions-for example, yoga versus mindfulness-will help tease out the most effective elements for trauma recovery.
- **Economic Evaluations:** Economic studies defining the cost-effectiveness of holistic nursing practices will enable an argument to be made for routine care integration.

Conclusion

This study provides solid evidence that holistic nursing practices significantly improve the recovery of mental health in post-trauma patients. These interventions incorporate physical, emotional, social, and spiritual care to address the complex nature of trauma and promote long-term healing. The results showed a significant reduction in symptoms of PTSD, anxiety, and depression, with notable improvements in the quality of life for patients receiving holistic care. The success of holistic nursing practices is based on whether they are patient-centered and integrative. Mindfulness, therapeutic communication, yoga, and spiritual support are forms of treatments that engage the patient in being responsible for his or her recovery and build resilience and adaptive coping. These interventions extend beyond symptom management to the root causes of trauma and infuse a sense of hope and purpose.

Implications for Clinical Practice

This study indicates that a rethink in mental health care in post-trauma patients is essential and also includes holistic nursing practices for trauma recovery programs. Health systems should, therefore, focus on training and resourcing to render these interventions effectively. Further, the application of holistic care also aligns with global health imperatives that argue for wholistic and patient-centered approaches to care.

Limitations and Future Directions

Yet, the study has a number of limitations: single setting within a health care context, fairly small sample size, and reliance on self-report measures. Further research would be needed to extrapolate findings of this study among the wide population, assessment of the outcomes after some time, and cost-effectiveness of holistic nursing practice. Comparison studies on the relative effectiveness of various holistic interventions might give useful information about the relative advantages of each.

Holistic nursing practices therefore provide a revolutionary intervention for the treatment of mental health in post-trauma patients and fill in the gaps where conventional practices have fallen short. Since trauma exists on physical, emotional, social, and spiritual dimensions, addressing all these will be vitally and sustainably recuperative. This study thus provides the scope for further studies and integration of holistic nursing with trauma care toward a hopeful future wherein mental health services could actually become holistic, humane, and efficient.

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