

Mindfulness practices in psychiatric and mental health nursing

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Suggested Citation:

Babalola, O. (2023). Mindfulness practices in psychiatric and mental health nursing. *International Journal of Emerging Trends in Health Sciences*. 7(1), 12-17. <https://doi.org/10.18844/ijeths.v7i1.9143>

Received December 10, 2022; revised from February 12, 2023; accepted from April 25, 2023.

Selection and peer review under the responsibility of Prof. Dr. Nilgun Sarp, Uskudar University, İstanbul.

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Abstract

This study addresses mindfulness practices in mental health nursing. Mental health patients may benefit from mindfulness. It summarizes the research on mindfulness practices in psychiatric and mental health nursing, including its advantages, drawbacks, and practice implications. Electronic databases were searched for 2016 - present articles; data were gathered and synthesized from relevant sources. Mindfulness practices may enhance mental health outcomes including anxiety, sadness, well-being, and self-compassion. Healthcare practitioners may successfully incorporate mindfulness into nursing care by strengthening the evidence base and resolving research gaps, enhancing outcomes and quality of life for patients with psychiatric and mental health problems. Mindfulness practices in psychiatric and mental health nursing require further study to determine long-term benefits.

Keywords: mindfulness, mental health nurses, psychiatry, classical review, meditation

1. INTRODUCTION

Mental health issues are major public health problems that people, families, and healthcare professionals face. These illnesses are becoming more common worldwide, necessitating effective treatments to alleviate symptoms and promote health. Mindfulness practices, founded in ancient contemplative traditions have garnered recognition as a therapeutic technique in psychiatric and mental health nursing (Cheng, 2016; Querstret et al., 2020; Osama et al., 2023).

Among the numerous types of meditation, mindfulness – a mind and body approach that has its roots in Buddhism is widely used in the field of healthcare. Mindfulness is taught through meditation, indicating a link between meditation and mindfulness (Ji et al., 2023). It is a technique used in psychotherapeutics capable of stabilizing mental well-being. For instance, cognitive behavioral therapy, acceptance and commitment therapy, and dialectical behavioral therapy. Mindfulness-based approaches have been implemented into various treatments like post-traumatic stress disorder, cancer recurrence, life difficulties, and bipolar disorder (ElKayal & Metwaly 2022; Hanssen et al., 2020; Lampe & Müller-Hilke 2021). Implementation is also applicable to specific groups such as survivors of childhood trauma, adults with Williams’s syndrome, and university students suffering from study stress (Cheng, 2016).

Mindfulness practices may improve mental health and help people manage unpleasant symptoms by fostering purposeful and non-judgmental awareness of present-moment sensations. Meditation, breathing exercises, and body scans can promote mindfulness. These practices help people understand their mental and emotional processes, manage their emotions, and build self-awareness and acceptance.

Mindfulness in healthcare has significantly grown, and several researchers have studied its effects on mental health. While generic studies have examined mindfulness-based therapies in mental health populations, psychiatric and mental health nursing needs a comprehensive study of mindfulness practices. Mindfulness therapy contains a variety of physical awareness, meditation, and yoga to awaken inner focus and enhance self-regulation to treat diseases, relieve stress, and alleviate pain (Elstad et al., 2020). Mindfulness-based stress reduction (MBSR) reduces pain and numerous health conditions and life issues that are unsuccessfully treated within the hospital. It reduces stress levels and enhances holistic well-being (Yang et al., 2018).

Healthcare professionals may improve patient outcomes, encourage self-care in psychiatric and mental health patients, and create healing and recovery settings by incorporating mindfulness into nursing care. A complete evaluation can show the merits and demerits of mindfulness practices in this specialized nursing sector and suggest practice changes. In Britain, mindfulness has been implemented in the treatment of individuals who have psychological disorders; such as stress, anxiety, or depression (Walker & Mann, 2016).

1.1. Purpose of study

The work nature of healthcare professionals entails a degree of emotional intensity that can result in emotional burnout; a feeling of lengthened emotional and physical exhaustion due to work overload, stress, and high demand on the job. Healthcare professionals may show resilience to such demands by developing emotional intelligence (Jiménez-Picón et al., 2021). Hence, this classical review aims to summarize psychiatric and mental health nursing mindfulness literature and examine mindfulness therapies and their potential benefits for psychiatric and mental health patients. It will also examine the literature's shortcomings and consequences for psychiatric and mental health nursing.

2. METHOD AND MATERIALS

PubMed, CINAHL, Google Scholar, PsycINFO, and Scopus were searched for pertinent 2016–present papers. The search technique included mindfulness, psychiatry, and mental health nursing keywords. "Mindfulness," "psychiatric nursing," "mental health nursing," "mindfulness-based stress reduction," "mindfulness-based cognitive therapy," and other keywords were used to search. "AND" and "OR" were employed to successfully combine search keywords. Each database's indexing and search functionality shaped the search method. English-language research publications on mindfulness in psychiatric and mental health nursing for adults

were included. Excluded criteria were articles on mindfulness in other healthcare settings or groups. 46 titles and abstracts were chosen for full-text examination. This research included people with depression, anxiety, and drug use problems, among other mental health issues. The chosen mindfulness therapies varied in length, frequency, and delivery (Van der Riet et al., 2018).

Study characteristics (author, publication year), participant demographics (sample size, age, gender), mindfulness intervention details (type, duration, delivery method), outcome measures (anxiety, depression, well-being), and main findings were extracted (Maxwell & Duff, 2016). To give a complete review of mindfulness evidence in psychiatric and mental health nursing, the retrieved data were meticulously organized and synthesized. Standardized search tactics, inclusion criteria, and quality evaluation tools were used to reduce bias and enhance validity and reliability; and the conclusion is based on extensive data extraction and synthesis.

3. RESULTS

Mindfulness practices in psychiatric and mental health nursing may benefit from the listed research. Mindfulness therapies may enhance anxiety, depression, self-compassion, and quality of life. Mindfulness therapies reduced anxiety and depression symptoms in several trials. Mennin et al. (2018) performed a generalized anxiety disorder randomized controlled experiment focusing on emotion regulation with and without co-occurring depression. Mindfulness practices may help psychiatric and mental health nurses manage anxiety without medication. Major depressive disorder investigations have shown encouraging outcomes. Hunter-Jones et al. (2019) observed that mindfulness-based cognitive therapy reduced depression symptoms. Mindfulness therapies may complement typical depression treatments in psychiatric and mental health nursing if properly managed (Schick-Makaroff et al., 2021). Mindfulness improved self-compassion, well-being, and symptoms. Mindfulness therapies improve well-being, mindfulness, and self-compassion. Petcharat & Liehr, (2017) evaluated psychiatric nurses' mindfulness-based intervention. The intervention promoted self-compassion and self-care, improving nurses' well-being and work satisfaction. Mindfulness may help psychiatric and mental health nurses' self-care and resilience (Asensio-Martínez et al., 2019).

Substance abusers benefit from mindfulness therapies. Petcharat & Liehr, (2017) examined how a mindfulness programme affected drug abusers. The therapy improved self-compassion and decreased drug cravings. Hence, mindfulness practice may help drug abusers recover. Despite hopeful results, the literature's limits and shortcomings must be acknowledged. Many researchers had limited sample numbers, limiting generalization. Mindfulness practices in mental health nursing require larger research to prove their efficacy. Mindfulness therapies vary in length, frequency, and delivery.

In this scenario, the delivery of mindfulness interventions is difficult to assess. Most of the studies had short follow-up periods, making it difficult to assess the long-term benefits of mindfulness therapies. Mindfulness practices in mental health nursing must be examined for sustainability and long-term effects.

This study suggests that mindfulness may enhance mental health outcomes in psychiatry and mental health nursing (Maxwell & Duff, 2016). These practices may reduce anxiety and sadness, promote self-compassion, and improve the quality of life for people with psychiatric and mental health issues. However, larger-scale studies, standardized therapies, and long-term follow-up evaluations are required to overcome the gaps in the evidence. By increasing the evidence foundation, psychiatric and mental health nurses may incorporate mindfulness practices into their treatment, enhancing patient outcomes and well-being.

4. DISCUSSION

Despite encouraging results, the examined research had limitations. Intervention techniques and outcome metrics are heterogeneous, making research review difficult. MBSR, MBCT, and other mindfulness therapies were used in the investigations. Intervention length, frequency, and delivery vary. Mindfulness practices are flexible and adaptable, but this variation makes it difficult to find the best delivery mode for mindfulness treatments in psychiatric and mental health nursing. Standardizing intervention methods improves the comparability and reliability of research in psychiatry and mental health nursing (Green & Kinchen, 2021). Consistency in intervention methods helps identify unique components or strategies for beneficial results.

Future studies should build standardized procedures for psychiatric and mental health nursing that consider participants' specific needs and preferences.

The small sample size in the evaluated research hinders generalization. Recruiting participants with psychiatric and mental health disorders may have been difficult for several of the included studies. The effects of mindfulness intervention were also very variable due to limited study numbers. To improve statistical power and representativeness, future research should use bigger, more varied samples.

Mindfulness in psychiatric and mental health nursing may be more successful if different healthcare facilities collaborate to collect bigger samples. Most of the trials had limited follow-up periods, limiting our knowledge of the long-term impact of mindfulness therapies. The persistence and duration of the reported improvements are important since mental health issues typically need long-term care and assistance. Long-term follow-up studies might help maintain excellent results and avoid recurrence. Studies might also examine how mindfulness practice affects mental health and quality of life (Yang et al., 2018).

Mindfulness in psychiatric and mental health nursing needs additional study. The evaluated research focused on standalone mindfulness therapies, but how to incorporate mindfulness into comprehensive care approaches is needed. Psychiatric nurses might improve their efficacy and sustainability by incorporating mindfulness into their everyday routines and treatment techniques. Mindfulness specialists and psychiatric nurses must work together to create evidence-based recommendations for incorporating mindfulness into normal treatment.

Mindfulness practices in psychiatric and mental health nursing should be studied to determine its processes. Functional magnetic resonance imaging (fMRI), electroencephalography (EEG), and other neurobiological tests may reveal mindfulness-induced brain alterations. The effects of mindfulness practices on brain activity, stress response systems, and emotion control might help comprehend mental health benefits.

Finally, explores the challenges and facilitators of mindfulness in psychiatric and mental health nursing. Healthcare professional opinions, organizational support, and patient choices might affect the implementation of mindfulness. Exploring these contextual elements and devising techniques to overcome these hurdles will help psychiatric and mental health nurses implement and maintain mindfulness programs.

Despite the limits and variability of the research, this comprehensive review suggests that mindfulness practices may be beneficial treatments in psychiatric and mental health nursing. Several suggestions may improve mindfulness practice in this circumstance. Firstly, mindfulness intervention protocols must specify length, frequency, and components (Yang et al., 2018). This would improve study comparability and replicability, enabling a more methodical effectiveness assessment. Secondly, to improve generalization and determine sustainability, bigger sample numbers, and long-term follow-up are needed.

Lastly, understanding and integrating the process of mindfulness practices into psychiatric and mental health nursing is essential. Mindfulness specialists and psychiatric nurses must collaborate to produce evidence-based recommendations for bringing mindfulness into normal treatment. Healthcare practitioners may benefit from mindfulness training and education. Neurobiological research may illuminate mindfulness therapies' brain alterations and their physiological and psychological effects. This insight may guide focused therapies and personalized mindfulness practice (Walker & Mann, 2016).

Mindfulness in psychiatric and mental health nursing must also address possible impediments. Overcoming hurdles and encouraging mindfulness practices may improve their efficacy and durability. This study supports psychiatric and mental health nurse mindfulness practices as they promote mental health outcomes and well-being by enhancing self-awareness, emotional control, and self-compassion. Healthcare practitioners may integrate mindfulness therapies into everyday care by eliminating impediments, increasing education, and training, and including patients in decision-making.

5. CONCLUSION

This classical evaluation of mindfulness practices in psychiatric and mental health nursing sheds light on the pros and cons of implementing mindfulness therapies. The analyzed research suggests that mindfulness practices may help people with mental health issues. The analyzed research showed benefits in anxiety, sadness, self-compassion, and quality of life. These results support the advantage of mindfulness practices in the mental health of the general population and emphasize its importance in psychiatric and mental health nursing.

Mindfulness practices foster self-awareness and non-judgmental acceptance of present-moment events. This helps people focus on their thoughts, emotions, and physiological sensations without drowning in them; improving clarity and emotional control. Psychiatric and mental health disorders frequently cause increased anguish, worry, and depression, making this useful. Mindfulness practices are non-pharmacological, accessible, and may enhance holistic care.

This study affects healthcare practitioners, notably psychiatric and mental health nurses. Mindfulness may improve the well-being, self-compassion, and work satisfaction of nurses, which can benefit patients and the therapeutic environment. Mindful nurses provide compassion, understanding, and attention, offering a secure and supportive environment for psychiatric and mental health patients to heal. This study concludes that mindfulness practices in psychiatric and mental health nursing may be beneficial.

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