

Guidelines on mental health nursing

2024



ICN
International
Council of Nurses

The global voice of nursing

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ABSTRACT

These guidelines on mental health nursing have been developed in collaboration with nursing experts from around the world. The recommendations outlined herein provide guidance on the development of mental health nursing for professional organizations, health care providers, regulators, policymakers and the public, for maintaining and improving the quality and safe delivery of mental health care. These guidelines address all nurses, from nurses in general health care settings, to those working in specialist mental health services.

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GLOSSARY OF TERMS

ADVANCED PRACTICE NURSE (APN)

An Advanced Practice Nurse (APN) is a generalist or specialized nurse who has acquired, through additional graduate education (minimum of a master's degree), the expert knowledge base, complex decision-making skills and clinical competencies for Advanced Nursing Practice, the characteristics of which are determined by the context in which they are accredited or licensed to practice [International Council of Nurses, 2020a].

BIOMEDICAL MODEL

The biomedical model of mental health is based on the concept of mental health conditions being caused by neurobiological factors. As a result, care often focuses on diagnosis, medication and symptom reduction, rather than on consideration of the full range of social and environmental factors that can impact mental health. This can lead to a narrow approach to care and support that may not address the root causes of distress and trauma [World Health Organization & Officer of the High Commissioner for Human Rights, 2023].

HUMAN RIGHTS-BASED APPROACH

A human rights-based approach is a conceptual framework of processes and actions that is based on international human rights law and aims to promote and protect human rights. Such an approach to mental health entails adopting legal and policy frameworks as well as implementing practices that are compatible with State obligations under international human rights law. It is designed to equip all State and non-State actors to identify, analyze and address inequalities and discrimination to reach those who would otherwise be left behind by ensuring the participation of all actors, policy-makers, civil society organizations, community- and grassroots-based groups; and, when needed, ensuring avenues for redress and accountability [World Health Organization & Officer of the High Commissioner for Human Rights, 2023].

MENTAL HEALTH

Mental health is a state of well-being in which an individual can realize his or her own potential, cope with the normal stresses of life, work productively and make a contribution to the community [World Health Organization, n.d.].

MENTAL HEALTH CONDITION

A broad term covering mental disorders and psychosocial disabilities. It also covers other mental states associated with significant distress, impairment in functioning, or risk of self-harm. (WHO, 2022b)

MENTAL HEALTH NURSING¹

Mental health nursing is a specialty that provides holistic care to individuals at risk of or experiencing mental health conditions and substance use disorders or behavioural problems, to promote their physical and psychosocial well-being. It emphasizes the use of interpersonal relationships as therapeutic tools and considers environmental factors influencing mental health. Mental health nurses use socialization, activation and communication with their patients, as well as providing physical care to create safe, comfortable environments that promote positive behaviour change [Stewart et al, 2022].

MENTAL HEALTH PROMOTION

Mental health promotion includes interventions aimed to protect, support and sustain emotional and social well-being and create individual, social and environmental conditions that enable optimal psychological and psychophysiological development, and improve the coping capacity and resilience of individuals. Mental health promotion refers to positive mental health rather than mental ill health [World Health Organization, n.d.].

MENTAL HEALTH SERVICES

Mental health services are the means by which effective interventions for mental health are delivered. The way these services are organized within health systems has an important bearing on their effectiveness. Typically, mental health services are delivered in outpatient facilities, mental health day treatment facilities, psychiatric wards in a general hospital, community mental health teams, supported housing in the community and mental hospitals [World Health Organization, n.d.].

STIGMA

Stigma is defined as a distinguishing mark establishing a demarcation between the stigmatized person and others and attributing negative characteristics to this person. The stigma attached to mental illness often results in social, religious and legal exclusion and discrimination, which creates an additional burden for the affected individual [World Health Organization, n.d.].

¹ It is recognized that in many countries, the title Psychiatric Mental Health Nurses is used to describe mental health nurses. For brevity, Psychiatric-Mental Health Nurses will be referred to as mental health nurses.

FOREWORD

This publication comes at a time when the world is grappling with unprecedented challenges, many of which have profound implications for mental health and well-being. In the face of rapidly evolving health care paradigms, the roles of mental health nurses have never been more vital.

Mental health is not just the absence of mental disorders; it is a state of overall well-being where individuals realize their own abilities, manage stress, work productively and contribute to communities. Mental health nurses are at the forefront of this mission and their expertise and skills are essential for creating responsive and person-centred health care systems in which to deliver compassionate care to persons, which *“is respectful of and unrestricted by considerations of age, colour, culture, ethnicity, disability or illness, gender, sexual orientation, nationality, politics, language, race, religious or spiritual beliefs, legal, economic or social status”* [International Council of Nurses, 2021a].

Human rights considerations should be at the forefront of mental health care. People suffering from mental disorders have the same rights as anyone else to live free from discrimination, violence and stigma. Yet, sadly, around the globe many are marginalized, discriminated against, incarcerated and the mental conditions they are experiencing are trivialized or misinterpreted. As noted in the 2020 WHO Mental Health Atlas, only 39% of WHO member states report full alignment of their laws and human rights instruments. Nurses have the ethical obligation to work toward reducing stigma and advocating for the human rights of these individuals, ensuring they receive the respect, dignity and the high-quality care they deserve.

Stigma surrounding mental health is an important issue that must be addressed. Discrimination often manifests in subtle ways—through language, media portrayals and social exclusion. It perpetuates a harmful narrative that mental disorders are personal failures rather than health conditions. Mental health nurses are in unique positions to counteract these prejudices, not only by providing empathic, person-centred, evidence-based care, but also through public education and advocacy.

The global burden of mental health disorders is colossal and ever-growing. According to a recent Lancet study [McGrath et al., 2023], one out of every two people in the world will develop a mental health disorders at some point in their lives. This crisis does not affect all communities equally; vulnerable and minority groups bear a disproportionate share of the burden of poor mental health, often exacerbated by social determinants such as poverty, discrimination and limited access to good quality health care.

In the face of these challenges, investment in the mental health nursing workforce has never been more crucial. Nurses often serve as the first point of contact for individuals experiencing psychological distress. They work across various settings – hospitals, outpatient clinics, schools, correctional facilities and communities – providing invaluable services ranging from prevention and early intervention to acute and long-term care. Hence, investing in developing and sustaining the mental health nursing workforce, its scope of practice, competence and the well-being of mental health nurses is not just a benefit, but a necessity for a resilient health care system and healthy communities. Investment to address mental health nursing shortages is also crucial for integration of mental health care into primary services and achieving Universal Health Coverage (UHC).



Human rights considerations should be at the forefront of mental health care. People suffering from mental disorders have the same rights as anyone else to live free from discrimination, violence and stigma.

The guidelines within these pages serve as a roadmap for those committed to improving mental health services by supporting the professional practice of mental health nursing. Through these guidelines, the International Council of Nurses (ICN) seeks to empower nursing professionals, policymakers, educators and health care organizations to take informed actions. By embracing these guidelines, we can collectively contribute to better mental health outcomes and create systems capable of responding to the diverse mental health needs of populations around the globe.

This publication is a testament to our ongoing commitment to high-quality, ethical and compassionate care for individuals suffering from mental health issues. It is our aspiration that these guidelines will serve as a cornerstone in the building of a more effective, equitable and humane mental health care system worldwide.

Dr Pamela F. Cipriano

President

International Council of Nurses



Investing in developing and sustaining the mental health nursing workforce, its scope of practice, competence and the well-being of mental health nurses is not just a benefit, but a necessity for a resilient health care system and healthy communities.



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Dr Haleh Jafari, an Iranian nurse, delivers mental and physical health care to children working on the streets of Tehran. These child labourers have difficulty accessing healthcare services, and are often exposed to physical and sexual abuse, and drugs.

EXECUTIVE SUMMARY

The International Council of Nurses (ICN) underscores the critical importance of mental health nursing in the global health care landscape through its comprehensive guidelines. These guidelines serve as a unifying framework, informing and supporting stakeholders including the public, governments, health care professionals, policy makers and educators, in understanding and implementing best practices in mental health nursing. They advocate for the development of robust policies, strategic plans and educational frameworks that facilitate consistent, high-quality care and innovative research in mental health nursing around the world.

The guidelines' primary purpose is to harmonize mental health nursing practices across countries, ensuring consistency and clarity in the way mental health nurses are educated, recognized and practice. They offer a strategic foundation for the development of policies, plans, frameworks and strategies that support mental health nurses, and address the comprehensive needs of individuals, groups and communities affected by mental health conditions.

The World Health Organization (WHO) estimates that roughly one in every eight individuals globally suffers from a mental disorder, contributing significantly to the global disease burden. This situation is compounded by societal stigma, leading to discrimination and restricted access to necessary health care. Mental health nurses, equipped with specialized knowledge, skills and competencies, are uniquely positioned to provide holistic care and address the complex health and psychosocial needs of these individuals.

THE VITAL ROLE OF ALL NURSES IN MENTAL HEALTH CARE

ICN recognizes that all nurses, regardless of specialization, have a vital role in mental health care. From improving access to care and addressing stigma, to upholding human rights and delivering quality care, nurses are at the forefront of community engagement and patient advocacy. The guidelines strongly recommend the integration of mental health education into undergraduate nursing curricula to ensure that all nurses are equipped with fundamental mental health knowledge and skills. This foundational competence is crucial for early identification, effective referral and management of mental health issues and for the provision of holistic and compassionate care.

SPECIALIZATION AND ADVANCED PRACTICE IN MENTAL HEALTH NURSING

While all nurses contribute to mental health care, there is a significant need for specialization and advanced practice roles within this domain. Mental health nurses are generally required to undertake postgraduate education², gaining in-depth expertise to navigate the complex health, psychological, social and biological aspects of mental health disorders. The guidelines emphasize the all-encompassing role of mental health nurses, who not only offer therapeutic care but also engage in advocacy, education, research, management and interdisciplinary collaboration to improve health care access and quality.

² In some countries, there are direct entry undergraduate degrees in mental health nursing that lead to specialization in mental health care. However, according to ICN guidelines, Advanced Practice Nursing requires a minimum of Master's level degree in the specialty area.

Advanced Practice Mental Health Nurses (APMHNs), positioned for a larger scope of practice, must attain a minimum of a master's degree. Their advanced clinical skills, leadership and knowledge make them pivotal in managing co-morbid conditions, conducting comprehensive assessments and implementing nuanced, person-centred interventions. APMHNs have increased levels of autonomous practice while working as part of a multidisciplinary team and are recognized for their competence in providing advanced, individualized care, particularly for those with complex co-morbid conditions.

CALL FOR INCREASED INVESTMENT IN MENTAL HEALTH

ICN asserts a pressing need for enhanced investment in mental health and mental health nursing. This involves a commitment to building a robust mental health nursing workforce, including the expansion of APMHN roles. Investment to address nursing shortages and the integration of mental health care into primary services is essential for achieving Universal Health Coverage (UHC).

Investment must also be channeled into the educational sphere, from undergraduate to specialist and advanced practice levels, ensuring the cultivation of a highly skilled and competent nursing workforce. Continuous professional development is highlighted as essential, enabling nurses to stay abreast of scientific, clinical and ethical advancements in care.

UPHOLDING HUMAN RIGHTS AND ETHICAL STANDARDS IN MENTAL HEALTH NURSING

Advocating for mental health care as a fundamental human right remains a vital responsibility for nurses worldwide [World Health Organization, 2022]. Nurses are uniquely positioned to champion human rights in mental health settings by actively combating stigma and discrimination, ensuring equitable access to care and respecting the dignity and autonomy of individuals with mental health conditions. Furthermore, they must be steadfast in their ethical obligations, balancing the intricate dynamics of confidentiality, informed consent and the right to treatment or refusal of treatment. Comprehensive education on mental health ethics and relevant legal frameworks is essential, empowering nurses to navigate complex situations and advocate effectively for their patients. By integrating these principles into practice, nurses not only contribute to more humane care but also foster a health care culture that upholds the highest standards of ethics and respect for human rights.

ICN advocates for the essential inclusion of sessions on the needs and rights of those with mental health conditions in undergraduate nursing education, requiring co-delivery by people with lived experiences of mental health conditions. ICN also calls for education programmes to have evidence-based stigma reduction competencies embedded in them to enable future nurses to address and counter stigma and discrimination faced by patients and clients effectively. These educational strategies are essential to cultivate a workforce with appropriate knowledge, skills and attributes in providing high quality and effective mental health care [International Council of Nurses, 2020b].

THE IMPERATIVE FOR FORMAL RECOGNITION OF SPECIALTY MENTAL HEALTH NURSING PRACTICE

ICN recommends the formal recognition of specialty mental health nursing practice, identifying it as a cornerstone in the advancement of the role. Formal recognition, typically facilitated through rigorous accreditation processes, serves multiple essential purposes. It validates the specialized expertise and professional standing of mental health nurses, setting a benchmark for the requisite knowledge and skills in this

nuanced area of practice. It also structures career pathways within the health care system, enabling specialized nurses to progress, gain autonomy and contribute at an advanced level. Additionally, this recognition fosters a culture of excellence and continuous improvement, as credentialing often requires ongoing education and professional development. Through recommending formal recognition systems, these guidelines seek to elevate the position of mental health nursing, ensuring it receives the acknowledgment and support commensurate with its value in delivering comprehensive, high-quality mental health care.

CONCLUSION

ICN's guidelines are an important step towards elevating the standard and consistency of mental health nursing worldwide. They serve as the standard for countries to develop supportive frameworks and strategies, prioritizing mental health and maximizing the contributions of mental health nurses in the journey towards comprehensive, accessible and high-quality global health care.



A 'flying' mental health nurse arrives in the remote Ingomar Station in South Australia to deliver specialist mental health nursing services for a hard to reach, under-served population.

PURPOSE OF THE GUIDELINES

The purpose of these guidelines is to facilitate a common understanding of mental health nursing practice for the public, governments, health care professionals, policy makers, educators in nursing and other fields and the nursing profession. It is envisioned that the guidelines will support these stakeholders to develop policies, plans, frameworks and strategies that support mental health nurses. The guidelines will enable consistency and clarity of mental health nursing nationally and internationally and support further development of nursing roles to meet the health care needs of individuals, groups and communities. The development of these guidelines is also important to further mental health nursing research within and across countries.

In these guidelines, the term 'mental health nursing' is used to represent a variety of titles that are used in different countries around the world. This includes psychiatric nurses and psychiatric mental health nurses – terms often used to describe this specialist role.

It is understood that, around the world, traditions, laws and population needs result in variations in nursing practice for mental health. Cultural and country contexts, as well as regulatory practices contribute to a range of issues that shape nursing practice. It is important that the guidelines are considered and interpreted accordingly.

INTRODUCTION

The global burden of mental health disorders is increasingly recognized as a pressing and pervasive issue, affecting individuals across life stages, communities and countries. According to the World Health Organization (WHO) [World Health Organization, 2022], approximately one in every eight people in the world live with a mental disorder. Furthermore, mental health disorders account for a significant portion of the global burden of disease, impacting not just the well-being of individuals but also posing economic challenges for societies.

Compounding the issue is the widespread stigma associated with mental health conditions, which often prevents individuals from seeking appropriate care and treatment. Stigma, deeply ingrained in societal norms and perceptions, frequently leads to discrimination and human rights violations. Those living with mental health conditions often find themselves marginalized, with limited access to essential health care services and social opportunities, thereby creating a cyclical pattern of deteriorating mental well-being.

In this critical landscape, the role of nursing – particularly mental health nursing – is paramount. The International Council of Nurses (ICN) is pleased to present these Guidelines on mental health nursing which aim to establish a professional standard for mental health nursing, articulate the scope of practice to support a common understanding, provide the recommendations on education to improve mental health care and articulate the vital contributions that mental health nurses make to health care services.

These guidelines underscore that every nurse, irrespective of their speciality, should be equipped to identify and contribute to the management of conditions ranging from emotional distress to chronic mental health disorders. In particular, the focus is on mental health nurses who have the privilege of caring for people of all ages during some of the most challenging periods of their lives and guiding them towards recovery in a highly individualised manner. They provide care using a variety of evidence-based interventions that are tailored to each individual's requirements, preferences and objectives. This requires exceptional skill combined with insight, empathy, compassion and sound discretion, as well as exceptional personal fortitude [NHS England, 2022].

The escalating burden of mental health disorders necessitates a rapid expansion of the mental health nursing workforce and enhancement of the quality of nursing education. Additionally, it is vital to address the human rights abuses and stigma associated with mental health, as these can be significant barriers to individuals seeking and receiving appropriate care. Nurses, as integral members of the health care team, should be educated not only in clinical care but also in approaches that promote mental health awareness and work to reduce societal and self-stigma associated with mental health conditions [Thornicroft, et al., 2022].

These guidelines serve as an invaluable resource for those engaged in mental health nursing. Their implementation promises to elevate the standard of mental health care globally, breaking down barriers of stigma and discrimination while upholding the human rights and dignity of individuals affected by mental health conditions.

1



CHAPTER

THE URGENT NEED TO INVEST IN MENTAL HEALTH NURSING

Mental health is an integral aspect of well-being, so much so that no conversation about overall health can be complete without addressing it. Unfortunately, the sphere of mental health is often relegated to the margins of health care

policy and investment, both nationally and globally. This disparity in focus and funding creates an ecosystem where vulnerable populations are disproportionately subjected to human rights abuses and inadequate care.

THE ENORMOUS BURDEN OF DISEASE

Mental health is a fundamental aspect of overall health, affecting individuals globally regardless of culture, community, or economic status. WHO reports that mental and neurological disorders, along with substance use issues, contribute to 10% of the global disease burden. Despite this, between 76% and 85% of people with severe mental health conditions receive no treatment in low-income and middle-income countries; the corresponding range for high-income countries is also high: between 35% and 50% [World Health Organization, 2022a; World Health Organization, 2021a].

Individuals with mental health conditions face significantly elevated rates of disability and premature death. For instance, people with severe mental disorders die 10 to 20 years earlier than the general population [Liu et al., 2017]. This is often due to neglected physical health issues, such as cancer, cardiovascular diseases, diabetes and HIV, as well as a heightened risk of suicide, which is the second leading cause of death among young people globally.

Mental health conditions often interact with other health conditions such as cancer, cardiovascular diseases and HIV/AIDS, necessitating integrated health

care services and coordinated resource allocation. Research [World Health Organization, 2021a; Corell et al., 2022] indicates that depression, for example, can predispose individuals to heart attacks and diabetes, which in turn can elevate the risk of developing depression. Numerous shared risk factors, such as low socioeconomic status, alcohol use and stress, make the relationship between mental and other noncommunicable diseases even more complex.

Mental and neurological disorders, together with substance use issues, accounted for 13% of the global disease burden as of 2004, according to the WHO Mental Health Action Plan 2013–2030 [v, 2021a]. Depression alone represents 4.3% of the global disease burden and is one of the leading causes of disability, particularly among women. Economically, these conditions have far-reaching implications: a study by Knapp and Wong [2020] projected that the global economic output lost to mental disorders will amount to US\$ 16.3 trillion between 2011 and 2030.

The social consequences are equally severe. Mental disorders frequently push individuals and their families into poverty and make them more susceptible to

...it is evident that the pivotal agents of the desired transformative change are mental health nurses. Their role is instrumental in steering the necessary overhaul in mental health care...

homelessness and wrongful imprisonment. These conditions exacerbate people's vulnerability and marginalization. Stigmatization and discrimination often lead to human rights violations, including

the denial of economic, social and cultural rights. Affected individuals may face restrictions in education, employment and health care, and suffer from abuse and neglect in health care facilities.

They are often also denied basic civil and political rights, such as the right to personal freedom, to marry, to vote and to participate actively in public life. Consequently, individuals with mental health conditions often live in precarious situations, which also hampers the attainment of national and international development goals. The Convention on the Rights of Persons with Disabilities [Office of the High Commissioner for Human Rights, 2006] serves as an important legal framework that is intended to protect and uphold the rights of individuals with mental and intellectual impairments, advocating for their full inclusion in international development programmes.

THE GLOBAL DISCONNECT BETWEEN PHYSICAL AND MENTAL HEALTH

Globally, less than 7% of health care budgets are directed toward mental health, a figure that is disproportionately low when compared to the needs of populations. In lower-income countries, the annual per-person spending on mental health is less than US\$2. This meager investment predominantly goes

to psychiatric hospitals and long-term institutional care, sidelining a holistic approach to mental health that integrates services into primary health care systems. The division between physical and mental health in policy and practice perpetuates a system of neglect and systemic human rights violations.

THE FALLACIES OF THE EXISTING MENTAL HEALTH PARADIGM

Decades of mental health services operating under a reductionist biomedical model have only perpetuated the issues mentioned above, despite the best efforts of well-meaning professionals working within the constraints of the available evidence of the time. This model has resulted in the exclusion, coercion, and abuse of individuals with intellectual, cognitive, and psychosocial disabilities, as well as those with autism. It has engendered a climate of neglect and stigmatization, where human rights are often trampled upon. Consequently, investing in mental health cannot merely be a scaling-up of the existing system; it must be a qualitative transformation. This

transformation should be informed by the lessons of the past and a reassessment of previous approaches that have inadvertently caused harm, ensuring a future where mental health services uphold the dignity and rights of every individual [United Nations Human Rights Council, 2017].

The former United Nations Special Rapporteur on the right to health, Dainius Pūras [Luiggi-Hernández, 2020] has called for countries and the world to transform mental health care through a rights-based approach. There exists a spectrum of rights-based alternative approaches to mental health care that have been fruitful.

These methods, founded on principles like dignity, autonomy and community participation, delve deep into the core social and psychological determinants of mental health. Furthermore, looming challenges such as climate change, intrusive digital surveillance and the aftermath of the COVID-19 pandemic pose considerable threats to global mental health and well-being.

modern practices and understanding. Therefore, ICN calls for a substantial investment in mental health nurses and the corresponding pre-registration educational programmes. Such investments will ensure that mental health care is grounded in respect for human rights and is informed by contemporary practices and perspectives.

In light of these profound insights, it is evident that the pivotal agents of the desired transformative change are mental health nurses. Their role is instrumental in steering the necessary overhaul in mental health care, ensuring it remains rights-based, comprehensive and aligned with

➤ **Thanks to the gentle intervention and compassion of the mental health nurses at Juba Military Hospital, South Sudan, this former soldier, G.K. who rarely interacted with other patients or staff, and who had started to refuse to eat, began his road to recovery. The nurses gave the patients pieces of coloured chalk, and they began to draw pictures on the ground outside, but at first G.K. just sat on a distant chair and observed. Eventually, he took a piece of chalk. He drew a fish, then a cow, then wrote his name. Soon afterwards, he went inside and brushed his teeth, and then smiled and started eating. It wasn't long before, his physical and mental distress levels showed significant signs of improvement and he began to gain weight.**



MENTAL HEALTH: A SUSTAINABLE DEVELOPMENT GOAL AND HUMAN RIGHT

The 2030 Agenda for Sustainable Development [United Nations Department of Social and Economic Affairs, 2015] explicitly includes mental health as part of its mandate. Various international conventions like the International Covenant on Economic, Social and Cultural Rights [Office of the High Commissioner for Human Rights, 1966] and the Convention on the Rights of Persons with Disabilities

[Office of the High Commissioner for Human Rights, 2006] offer a legally binding framework for ensuring the right to mental health. Yet, nations globally fall far short of integrating these international standards into their health care systems. There is an urgent need to harmonize national mental health policies with these international commitments [United Nations, 2015].

THE CRISIS OF WORKFORCE SHORTAGES IN GLOBAL MENTAL HEALTH CARE

The state of the global mental health workforce represents a public health crisis of alarming proportions. With a mere 300,000 mental health nurses globally, the disparity between the need for comprehensive mental health services and the availability of qualified professionals is staggering. This imbalance becomes even more acute when considering the inequitable distribution of these skilled workers. The divide is not only observed between urban and rural settings but also manifests itself starkly across regions, countries and varying income levels. For instance, the rate of mental health nurses per 100,000 population is 0.9 in Africa, while it is 25.2 in Europe. When examined through the lens of economic disparities, low-income countries exhibit a rate of only 0.4 per 100,000, in sharp contrast to the 29 per 100,000 rate observed in high-income countries [Stewart, et al., 2022].

The workforce shortage is not limited to nursing; it is a pervasive issue affecting all aspects of the mental health sector. This includes a notable absence of mental health counsellors, psychiatrists, psychologists, social workers and other specialized professionals. These shortages have a direct and devastating impact on the accessibility and affordability of quality mental health care globally.

During this crisis, the role of mental health nurses becomes even more critical. Increasing the capacity and capabilities of this workforce segment could dramatically improve access to safe, effective and affordable mental health care. Mental health nurses often serve as the cornerstone of comprehensive care, offering a range of services that extend beyond mere medical treatment. By bolstering this specific sector of the health care workforce, we can make substantial strides in addressing the current mental health crisis.

Addressing the global mental health workforce shortage is not merely an option—it is an urgent necessity. As individual countries and the whole world grapples with this crisis, targeted investment in mental health nursing emerges as a critical pathway to enhancing the quality, accessibility and affordability of mental health services worldwide.

Addressing the global mental health workforce shortage is not merely an option - it is an urgent necessity.

TOWARD A RIGHTS-BASED, EFFECTIVE MENTAL HEALTH SERVICE DELIVERY

Countries must reevaluate their mental health policies to prioritize community-based, psychosocial services and interventions that respect the dignity and rights of individuals. Reorienting from a biomedical to a more holistic, patient-centred model necessitates a

well-trained nursing workforce that can administer evidence-based psychosocial interventions, engage communities and work within a range of different health care settings [Office of the High Commissioner for Human Rights, 2017].

THE INVESTMENT IMPERATIVE

Investment in mental health nursing is not a luxury; it is a necessity. As countries work towards meeting the Sustainable Development Goals, they must dedicate a greater portion of their health care budgets to mental health, particularly in the education and development of a

skilled mental health nursing workforce. The issue is not just about “scaling up” the workforce but about “scaling across” — integrating mental health services across the continuum of health care [Office of the High Commissioner for Human Rights, 2017].

VULNERABLE POPULATION GROUPS

Depending on the local context, certain individuals and groups in society may be placed at a significantly higher risk of experiencing mental health problems. These vulnerable groups may (but do not necessarily) include members of households living in poverty, people with chronic health conditions, infants and children exposed to maltreatment and neglect, adolescents exposed to substance use, minority groups, indigenous populations, older people, people experiencing discrimination and human rights

violations, LGBTQ+ persons, prisoners and people exposed to conflict, natural disasters or other humanitarian emergencies [World Health Organization, 2021a]. Mental health nurses can provide tailored, culturally sensitive and person-centred care to these communities, thus addressing gaps in current health care provision. Expanding specialized mental health nursing roles is crucial for equitable and comprehensive mental health care globally.

THE INDISPENSABLE CONTRIBUTIONS OF MENTAL HEALTH NURSING TO GLOBAL HEALTH

In addressing the enormous burden of disease, the roles of mental health nurses cannot be overstated.

ICN has consistently championed the need to invest in mental health nursing as an immediate priority to bridge the massive treatment and access to care gap [International Council of Nurses, 2020b].

When grappling with the immense burden of mental health conditions worldwide, the significance of mental health nursing as a discipline cannot be exaggerated. ICN has persistently and unequivocally advocated for prioritizing investments in this critical area of health care. Its calls for action aim to close the widening chasm between the existing mental health treatment options and the ever-increasing demand for accessible, high-quality care.

Mental health nurses serve as more than mere health care providers; they embody a range of roles – advocates, leaders, care coordinators, educators, researchers and counsellors – to name just a few. Their provision of care is holistic, addressing a full spectrum of both physical and psychosocial needs. Equipped with the skills to build therapeutic interpersonal relationships, coupled with an insightful understanding of the myriad environmental factors that can influence mental well-being, mental health nurses are pivotal figures in enhancing the reach and effectiveness of mental health interventions. In this context, the need to cultivate a highly skilled, empathetic, resilient and well-funded mental health nursing workforce becomes not just important, but essential.

The unique and multifaceted roles played by mental health nurses make them irreplaceable assets in the achievement of ‘health for all’.

The field of mental health nursing is specialized in its focus on delivering integrated care to individuals – and their families – who are grappling with mental health disorders, substance abuse issues, or other challenges. The approach employed is comprehensive, emphasizing

the critical importance of interpersonal relationships and environmental factors that contribute to mental well-being. These nurses utilize an array of strategies, such as socialization, activation and effective communication, in addition to offering essential physical care. The ultimate aim is to create secure, comforting environments that are conducive to positive behavioural changes.

As mental health nurses comprise a substantial 44% of the entire mental health care workforce, their roles in widening access to professional mental health services is transformative [World Health Organization, 2021b]. The ripple effect of such an investment promises to not only elevate the quality of life for millions of individuals, but also to generate a substantial positive impact on global mental health outcomes.

The unique and multifaceted roles played by mental health nurses make them irreplaceable assets in the achievement of ‘health for all’. By building the capacity and capability of mental health nurses, there can be significant improvement in mental health care access and outcomes, leaving an indelible imprint on global health and well-being. Through comprehensive guidelines such as these, ICN seeks to inform and shape policies to invest in the expansion and further professional development of mental health nursing globally. With an empowered and better-equipped mental health nursing workforce, the goal of universal mental health care becomes an achievable reality.

UNDERAPPRECIATED AND UNDERVALUED

In many parts of the world and historically, the roles and identity of mental health nurses have often been nebulous and inconsistently described. This in part is evidenced through the lack of a standardized definition of mental health nursing and the ascribing of roles to mental health nurses that are custodial and primary, often overshadowed by the more dominant medical profession [Higgins, Kikku & Kristofersson, 2022].

Despite the paradigm shift towards community-centric mental health services in the last few decades, many mental health nurses still predominantly work within in-patient settings. This concentration maintains dated perceptions and a narrow understanding of mental health nurses’ roles and identities. Additionally, the lack of public visibility and occasional negative media portrayals further complicate the public’s

▶ Pakistan, like many countries, is struggling to cope with an increasing population with growing mental health issues. Nurse-led patient case management provided by the Aga Khan University School of Nursing and Midwifery in Pakistan builds the capacity of care providers to strengthen mental health services available to the community. The service has improved one-to-one patient management and included family members in the care process. In an environment where government mental health services are sadly lacking, and where qualified mental health nurses are a rarity, this mental health care service provides much-needed quality mental health care to the population.



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perception. It is undeniable that mental health nurses play a multitude of roles that span from primary and community care through to advanced tertiary care: simplifying their multifaceted roles into a singular essence does not do justice to their importance.

A significant concern is the inadequacy of undergraduate education for mental health nurses internationally, as shown in ICN's analysis of the global mental health nursing workforce [WHO, n.d.]. This inadequacy, coupled with a diminished focus on mental health in comprehensive nursing programmes, jeopardizes the distinct identity of mental health nursing. The issue is further intensified when graduates, who may not be fully prepared, assume mental health nurses' titles in mental health settings [Higgins, Kikku & Kristofersson, 2022].

Recognizing the need for clarity, a thorough exploration of the roles of mental health nurses is essential. Such a deep dive can offer valuable insights into the comprehensive spectrum of mental health nurses' roles and how they can be optimized. It can also unveil the potential and worth of mental health nurses, showcasing them as pivotal players in addressing the systemic challenges that plague mental health services around the world. In essence, these guidelines confirm that mental health nurses are a dynamic, adaptable and indispensable component, ready to be integrated fully in future health workforce reforms to cater to individual and community needs optimally [Higgins, Kikku & Kristofersson, 2022].

2

CHAPTER

DESCRIPTION OF MENTAL HEALTH NURSING

Mental health nursing is a specialty that provides holistic care to promote the physical and psychosocial well-being of individuals at risk for or experiencing mental health conditions and/or substance use disorders or behaviour problems. Mental health nursing emphasizes the use of interpersonal relationships as therapeutic tools and considers environmental factors that influence mental health. Mental health nurses provide socialization, activation, psychotherapy and patient counselling for behaviour change, and address physical health needs to create a safe, comfortable environment that promotes positive change

[American Psychological Association, n.d.]. Hildegard Peplau [Peplau, 1997] considered nursing to be a “significant, therapeutic, interpersonal process.” She defined it as a “human relationship between an individual who is sick, or in need of health services and a nurse specially educated to recognize and to respond to the need for help”. She spoke about nursing in general, noting that skills and competencies of generalist nurses promote mental health while specialist competencies target unhealthy behaviour problems, including substance use and persistent mental health disorders.

THE DISTINCTIVE ROLES OF NURSES IN MENTAL HEALTH

The following headlines describe the contribution of registered nurses, mental health nurses and APMHNS to the care and treatment of mental health conditions.

Registered nurses

Within the broad spectrum of their roles, registered nurses' involvement in mental health care stands out prominently, including in relation to:

- **Holistic care approach:** Nurses, being integral to the health care ecosystem, are educated and authorized to address the diverse health needs of individuals. This includes promoting mental well-being, preventing mental disorders and providing care to those who are experiencing mental health problems or disabilities, regardless of age or setting.
- **Health education:** Beyond just direct care, nurses play a pivotal role in health education. This means they impart crucial knowledge about mental health, preventive measures, coping strategies and available treatments to patients, their families and the community at large.
- **Interdisciplinary collaboration:** Mental health care is often multifaceted and requires a cohesive effort from various health care professionals and from people with lived experiences of such conditions. As per the ICN definition, nurses are equipped to participate fully as members of the health care team, ensuring that the mental health care provided is integrated, comprehensive, person-centred and rights based.

- **Supervision and education:** Nurses are leaders. They supervise and educate other nursing staff and health care auxiliaries, ensuring that the quality of care, including that concerned with mental health, is maintained across the board.
 - **Research in mental health:** Given the dynamic nature of the field of mental health, ongoing research is vital. Nurses are actively involved in research processes. This means they contribute to and lead studies that are intended to improve mental health care practices, discover novel interventions and refine existing methodologies.
 - **Addressing stigma:** Nurses are in a unique position to challenge and combat the stigma associated with mental health issues. Through their regular interactions with patients, families and communities, nurses can foster a culture of empathy, respect and understanding. Nurses advocate for patients, families and colleagues and are in a strong position to decrease the marginalization of people with mental health disorders.
- In essence, registered nurses, as described by ICN, are at the forefront of mental health care. They blend their comprehensive education with hands-on practices, ensuring that mental health care is not just reactive but also proactive, educative and continually evolving.

Mental health nurses

Mental health nurses:

- have in-depth knowledge, skills and general competence in the field of mental health;
- have knowledge of people's psychological and social dimensions linked to social affiliation, marginalization and stigmatization;
- have expertise in identifying and changing conditions that create mental health problems for individuals, families and patient groups;
- are qualified for prevention and promotion, treatment and rehabilitation work in the areas of mental health;
- observe, investigate and treat people who are at risk of developing health impairment or worsening health conditions relating to mental illness and substance abuse that is harmful to health;
- have expertise in promoting health by preventing and reducing the consequences of stigmatization and social exclusion [Stewart, et al., 2022; Australian College of Mental Health Nurses, 2013; American Nurses Association, 2022];
- are adept at orchestrating health care services and spearheading interdisciplinary collaboration, serving in vital capacities such as care coordinators or case managers;
- have expertise which equips them to advocate vigorously for enhanced care accessibility and to disseminate critical educational resources to a diverse audience that includes patients, families, fellow nursing professionals and other health care groups;
- by fostering open and effective communication channels, amplify initiatives aimed at health promotion, ongoing wellness maintenance and the seamless integration of various services. This not only enriches the patient experience but also contributes to a more holistic, patient-centred approach to health care [American Nurses Association, 2022].

Advanced practice mental health nurses

APMHNs:

- have the competence to practice advanced nursing care to improve living conditions, increase quality of life and life expectancy, as well as to promote health for people who have developed or are at risk of developing health impairment as a result of mental illness, harmful drug use and/or addiction [Delaney, 2017];
- provide advanced health care to people in a life-course perspective with both acute and long-term ailments, individualizing care with consideration of gender, ethnicity, cultural and religious affiliations;

- have advanced knowledge of basic needs and maintenance of life processes;
- have advanced knowledge of the practice of nursing care for people with complex co-occurring conditions where somatic illness, mental illness and addiction exist and often exacerbate health issues;
- carry out extensive clinical observation, mapping and assessment, and plans, implement and adjust interventions as well as using therapeutic interaction [Delaney, 2017; Beck et al., 2020];
- have competence in applying knowledge and skills in leadership roles. In this role, the nurse coordinates services in multidisciplinary teams and interaction across groups, sectors, services and agencies;
- must have good awareness of the limitations of their own competence, informed insight into the competence of other professions and the ability to understand when these should be involved;
- have knowledge and experience in management, planning, organization, implementation of professional development and research projects, and be able to disseminate nursing and health-related research and professional development [International Council of Nurses, 2020a];
- have advanced expertise in the prevention and harm reduction related to threats to mental health, the preparation of evidence-based treatment protocols, the appropriate management of mental disorders and drug and severe substance use disorders. Key examples are the development of protocols for the prevention of suicide and treatment of drug overdoses;
- have in-depth knowledge of the effects and side effects of drugs and medication in people with mental and somatic health challenges, substance and behavioural addiction disorders and interactions between these;
- follow up treatment or independently assess the efficacy of treatment and, in collaboration with the attending physician or independently, prescribe and adjust pharmacotherapy;
- have in-depth knowledge of the advantages and disadvantages of various forms of treatment, including drug-free treatment [American Nurses Association, 2022; American Psychiatric Nurses Association, 2022; Scheydt & Hegedüs, 2021];
- have in-depth knowledge of the effects and health consequences of harmful substance use, as well as a social understanding of substance use disorders from individual and societal perspectives;
- have advanced knowledge of and competence in working with patients and families to prevent health deterioration and loss of quality of life related to social determinants of health, including trauma, discrimination, racism, violence, marginalization, abuse and neglect [American Nurses Association, 2022; American Psychiatric Nurses Association, 2022; Scheydt & Hegedüs, 2021];
- must provide person-centred and coherent health and care services and possess advanced knowledge of user participation at both individual, group and system level. In this way, they can map and activate health resources in patients, service users, networks and families, including children;
- have in-depth knowledge of effective coping support measures that promote quality of life and improve the capacity for growth [Scheydt & Hegedüs, 2021].

3



CHAPTER

PRACTICE SETTINGS AND CARE MODELS

The principles of mental health nursing relate to a mental health continuum extending from well-being to distress, mental health problems to mental illness. Mental health nurses, often in collaboration with other health professionals, deliver interventions along the continuum from prevention and mental health promotion to risk reduction, early intervention to treatment and support for recovery. Nurses are prepared in varying degrees to deliver these interventions and do so in a variety of settings, providing comprehensive care to individuals, families, groups and communities [Beck et al., 2020]. Mental well-being is the optimal human state and interventions to support maintenance of well-being and promote growth can be delivered by nurses in all specialties, as well as mental health. All nurses, not just mental health nurses and APMHNs, should have an understanding of mental health and be able to deliver interventions according to their scope of practice.

Mental health nurses provide care in a variety of settings that reflect the diverse needs of individuals experiencing mental health challenges. They are essential members of health care teams in acute care hospitals, psychiatric facilities, correctional facilities, step programmes and halfway houses, outpatient clinics, community health centers, residential treatment facilities, ambulatory mental health care settings (day hospitals, harm reduction clinics) and schools. In addition to these traditional settings, mental health nurses are increasingly delivering care in non-traditional environments, such as homes, workplaces and through digital

platforms, thus reflecting the evolving landscape of health care delivery [World Health Organization, 2022a; American Psychiatric Nurses Association, 2022].

The care models outlining the competencies necessary for job performance are tied to nursing standards specific to the model. For instance, standards for addictions nursing establish a guideline for treating individuals with substance use disorders, particularly those receiving care in substance use and other addiction disorder treatment facilities.

The practice settings and care models of mental health nursing are varied. As the landscape of health care delivery continues to evolve, mental health nurses remain at the forefront, adapting their practice settings and care models to better serve the mental health needs of communities worldwide [Carlyle, Crowe & Deering, 2012].

Registered nurses, mental health nurses and APMHNs work with children and adolescents, adults and the elderly within the specialist health care service, the municipal health care service and the private health care service and with people with mental health conditions, substance use disorders or addiction issues, problems and illness. Registered nurses, mental health nurses and APMHNs have a long history of working in multidisciplinary teams in mental health services globally, together with social workers, psychiatrists, psychologists, peer-supporters and other health care workers [Carlyle, Crowe & Deering, 2012].

Promoting the intentional development of mental health nurses and the APMHN role should be a primary objective for mental health educationalists and health care leaders.

Mental health nurses and APMHNs contribute to global health care in multiple ways. They work closely with individuals, families and communities to assess and treat mental health and substance use problems and are a vital part in

preventing serious somatic and mental health conditions. Acknowledging the interconnectedness of physical and mental health, they recognize that people with mental illnesses often experience worse health outcomes in both realms. While many work in direct patient-oriented work, mental health nurses are an important part of the management and coordination of health services and education of new health workers. Mental health nurses and APMHNs understand the needs of the person and the capability of the health system as their professional scope encompasses clinical work, management, coordination and assessment of health services. Therefore, they have vital roles in raising awareness of mental health problems in society, advocating for treatment accessibility and for further development of the profession and services for people who live with mental health distress and illness [Stewart et al., 2022].

CHARACTERISTICS OF NURSES WORKING IN MENTAL HEALTH

This section describes the characteristics of levels of mental health nursing. These characteristics provide guidance in developing the role to its full potential based on educational preparation, practice and regulation. For some countries, the attainment of specific characteristics is aspirational due to limited financial and educational resources, so these characteristics serve to identify goals to be achieved over time.

The roles of mental health nurses can be categorized into multiple levels of practice, which carry unique characteristics. This includes registered nurses, mental health nurses and APMHNs. The characteristics of these roles vary greatly across different countries and regions. Several factors contribute to this variance including differences in health care systems, education systems, cultural values, levels of government investment and legislation [Higgins, Kikku & Kristofersson, 2022].

Promoting the intentional development of mental health nurses and the APMHN role should be a primary objective for mental health educationalists and health care leaders. This endeavour should be carried out in collaboration with stakeholders, including service users, family member groups and organizations. By recognizing multiple perspectives, the development of the APMHN role can be more effectively centred on service user needs, their recovery and human rights [Higgins, Kikku & Kristofersson, 2022].

Table 1 outlines the characteristics of nurses working in mental health as a guide to the progression and development of the role. Regardless of the current state of mental health nursing in each region, these characteristics serve as milestones for continuous improvement, ultimately aiming for enhanced patient care and improved mental health outcomes.

Table 1: Characteristics of the various levels of mental health nurses

[Australian College of Mental Health Nurses, 2013; American Psychiatric Nurses Association, 2022; American Nurses Association, 2015]

EDUCATION
<p>Registered nurse:</p> <ul style="list-style-type: none"> • education preparation is generally a Bachelor of science/Baccalaureate degree with a duration of study of three years • The education programme should include content on therapeutic communication, management of emotional distress, psychological crisis and mental health disorders <p>Mental health nurse:</p> <ul style="list-style-type: none"> • a direct entry to undergraduate specialized mental health baccalaureate degree or a registered nurse who has postgraduate qualifications in mental health • a nurse with extended hours in clinical practice of mental health nursing <p>Advanced practice mental health nurse:</p> <ul style="list-style-type: none"> • a nurse with extended hours in clinical practice of mental health nursing • postgraduate qualifications (minimum of a Master's degree); advanced courses on comprehensive physical and mental health assessment, didactic and clinical courses based on theory, management of health and illness, research, leadership and clinical experiences • completion of a designated number of faculty/preceptor supervised clinical hours
REGULATION
<p>Registered nurse:</p> <ul style="list-style-type: none"> • registration as a registered nurse <p>Mental health nurse:</p> <ul style="list-style-type: none"> • recommended to have a form of accreditation recognizing the qualifications, skills, expertise and experience of mental health nurses <p>Advanced practice mental health nurse:</p> <ul style="list-style-type: none"> • recommended to have a specific licensure, certification or authorization by a national governmental or nongovernmental agency to practice as an APMHN • submission of evidence of completion of an APMHN programme from an accredited school of nursing
NATURE OF PRACTICE
<p>Registered nurse:</p> <ul style="list-style-type: none"> • uses the nursing process, including assessment skills, formulation of nursing diagnoses for health and mental health signs and symptoms • uses interpersonal engagement to operationalize support for patients to develop mental health and well-being [Delaney, 2017] • plans, implements and coordinates nursing care and identifies outcomes • uses evidenced-based strategies for health teaching, health promotion and prevention with patients and family • evaluates progress toward health outcomes • intervenes to reduce mental health distress, deliver acute care and promote and sustain recovery. • early identification of people at risk of mental disorders [Shrivastava & Desousa, 2016]

Mental health nurse:

- incorporates knowledge, skills and competencies of baccalaureate degree and post graduate education
- develops advanced expertise in mental health care, including specialized assessment, diagnosis, intervention and evaluation of mental health disorders
- implements evidence-based mental health interventions, including psychotherapeutic techniques and psychopharmacological therapies
- participates in interdisciplinary collaboration and consultation to optimize patient care and promote mental health recovery
- consults and refers appropriately to other health professionals
- contributes to the development and dissemination of mental health nursing knowledge through research, education and professional leadership

Advanced practice mental health nurse:

- incorporates knowledge, skills and competencies of baccalaureate degree and a minimum of a master's degree in advanced practice nursing
- expands interpersonal engagement to include psychotherapeutic techniques and psychopharmacological therapies
- uses assessment, communication, critical thinking and decision-making skills to formulate diagnoses related to mental health therapeutic interventions and management
- delivers mental health care with a high degree of autonomy in both independent and collaborative practices
- demonstrates the capacity for interprofessional team leadership
- provides consultation services to other health professionals as in line with local regulations and practices
- develops practice pathways based on critical reviews of research and synthesis of research findings
- consults and refers appropriately to other health professionals
- scope of practice may or may not include prescriptive authority (nurse prescribing)
- has developed competencies to provide management of therapeutic skills to high and complex patients
- may provide independent clinics with patients, families and other support networks [Jacobs & Mkhize, 2021]

TITLE PROTECTION

Registered Nurse (RN) and Advanced Practice Nurse (APN) titles are legally protected in many countries, ensuring that only those who meet the specific requirements of education and training can use them. However, terms like "nurse" and "graduate nurse" may be inconsistently applied to roles with different responsibilities and requirements depending on the country or region.

Establishing titles by legislation helps protect professional standards by limiting the practice of imposters who may not have the necessary qualifications. The scope of practice for each title can vary across regions and states and the specific legislation regarding advanced practice and mental health nursing titles is often defined by regulatory or government bodies.

MENTAL HEALTH NURSING SCOPE OF PRACTICE

ICN believes that regulation is essential for safe and competent nursing practice to protect the public. The scope of nursing practice is the “full spectrum of roles, functions, responsibilities, activities and decision-making capacity that individuals within that profession are educated, competent and authorized to perform” [International Council of Nurses, 2010; Nurses & Midwives Board of Ireland, 2015]. It defines the parameters and boundaries within which nurses practice and is important for the profession to clearly articulate these parameters to ensure nursing practice can respond to society’s needs. Failure to support nurses in making scope of practice decisions can negatively impact patient care and the nursing profession.

Clarifying the scope of practice for mental health nurses is crucial, as it fosters a shared understanding among the public, regulators, health professionals, policy-makers and other key stakeholders of the wide range of practices, therapeutic skills, activities and innovations undertaken by contemporary mental health nurses. Moreover, it will ultimately:

- support the development of the mental health nursing workforce.
- positively influence national and international mental health policy and procedural frameworks, health systems and structures;
- improve interprofessional care and collaboration;
- enhance the distribution of human resources to meet the needs and preferences of consumers, carers and the broader public;
- lead to better health outcomes and recovery for consumers and caregivers [Australian College of Mental Health Nurses, 2013].

The scope of practice for mental health nurses should be described in broad terms to allow for the evolution of health systems, developments in research and evidenced based practice, public need and demand and the diversity of contexts, cultures, countries and environments in which mental health nurses work. In addition, as outlined in

the description above, scope of practice will be different depending on the educational preparation, health systems and regulatory environments in which nurses work around the world. However, it is recommended that countries review their scope of practice for mental health nurses on a frequent basis to align with the best available evidence to improve health outcomes for their communities [Gabrielsson et al., 2020].

Failure to support nurses in making scope of practice decisions can negatively impact patient care and the nursing profession.

Mental health nurses play a critical role in caring for and treating individuals experiencing physical, psychological, mental and spiritual distress. They provide comprehensive, trauma-responsive, person-centred mental health care across various settings along the care continuum. Essential components of mental health nurses’ practice include health and wellness promotion, prevention and identification of mental health disorders, care of persons experiencing mental health distress and treatment of individuals with mental health disorders, including of substance use disorder [Gabrielsson et al., 2020].

Mental health nursing professionals deliver a range of functional interventions, care, guidance, support and evaluations that help patients and their families during their most difficult and vulnerable periods, guiding them through to recovery and towards self-reliance and life satisfaction. They operate in multiple environments and settings, aiding and delivering care to individuals suffering from emotional distress, regardless of whether they have received a diagnosis of a mental health condition. These professionals engage with patients of all ages and often have responsibilities in different areas, such

The care model adopted should be recovery-based and person-centred, seamlessly addressing the spectrum of patient needs, from “at-risk” behaviours and acute illness to long-term recovery and rehabilitation.

[Hurley et al., 2022]

as residential facilities and community spaces. This encompasses primary, secondary and tertiary health care, providing specialized treatment that necessitates a wide array of professional roles to aid and support individuals, their families and caregivers who use mental health services. The extensive range of opportunities and possibilities presented in this specialty enables mental health nurses to build a multifaceted career that focuses on the holistic well-being of the patient, enhancing their life quality and fostering a mutually designed recovery plan that aligns with the individual's unique needs [American Nurses Association, 2015].

The scope of practice for mental health nurses is nuanced, varying significantly across different countries and professional settings. It commonly includes a wide array of responsibilities such as the

assessment, diagnosis, comprehensive treatment, care and help of patients with mental health disorders. Mental health nurses are often highly educated, credentialled and supported within their organizations to offer multifaceted interventions. These can range from psychotherapy and medication management to behaviour-focused therapies. Building on their foundational undergraduate nursing education, mental health nurses are equipped to perform in-depth assessments, make precise diagnoses, identify targeted outcomes and administer a variety of interpersonal therapies. These therapies may encompass counselling, medication oversight and psychotherapy. When caring for individuals with mental health disorders, mental health nurses should exemplify expertise in both nursing care and care management. Their approach should be tailored to meet the unique needs of patients and their families, particularly those dealing with complex mental health conditions. The care model adopted should be recovery-based and person-centred, seamlessly addressing the spectrum of patient needs, from “at-risk” behaviours and acute illness to long-term recovery and rehabilitation [Hurley et al., 2022].

Mental health nursing, guided by various theories and frameworks, plays a key role in the assessment, care and treatment of individuals with mental health conditions and substance use disorders. As the role continues to evolve, it is important that it is led by the country's professional mental health nursing organization, advancements in research and international best practice.

Table 2: Core elements within the mental health nurses' scope of practice

[Australian College of Mental Health Nurses, 2013; American Psychiatric Nurses Association, 2022]



Holistic and person centred care

Mental health nurses provide holistic, person-centred mental health care, recognizing the complexity of human experience and prioritizing the relationship between the patient and nurse.



Clinical practice

Mental health nurses should be skilled in the assessment, diagnosis, treatment and care of people with mental health disorders, substance use disorders and behavioural addictions.



Specialized knowledge and skills

Mental health nurses should possess specialized knowledge in mental health disorders, psychopharmacology, psychotherapeutic techniques and crisis intervention.



Education and certification

Mental health nurses should be registered with the country's regulatory authority. In addition, they should have achieved relevant educational qualifications in the specialty area.



Research and evidence-informed practice

Mental health nurses are expected to use the best available evidence in their practice and contribute to the science of nursing through research.



Ethical practice & human rights

Mental health nurses are required to respect the dignity and human rights of each patient, maintain confidentiality, advocate for patient needs and practice with cultural competence. As with all nurses, mental health nurses must protect and promote the human rights of all people and advocate to address and reduce the stigma attached to mental health conditions and substance use disorders. Nurses' self-care and continuing education are central to delivery of high-quality care.



Leadership and advocacy

Mental health nurses are recognized as leaders and are encouraged to advocate for mental health issues at all levels, from individual patient care to organizational change, to public and system-level policy change.



Interprofessional collaboration

Mental health nurses work as part of an inter-disciplinary team, collaborating with other health care professionals, including people with lived experiences and those outside of the health care system to provide comprehensive mental health care.



Therapeutic use of self

Mental health nursing is therapeutic and emphasizes a holistic care approach through meaningful nurse-patient relationships and specific therapeutic interventions [Gabriellson et al., 2020].

Table 3: Mental health nurses' scope of practice

[Australian College of Mental Health Nurses, 2013; American Nurses Association 2015 & 2022]

Mental health nurses employ a collaborative, holistic and evidence-based approach to deliver person-centred care within interprofessional teams. As specialists in mental health, they:

- begin their career pathways by successful completion of an undergraduate specialized mental health baccalaureate degree or as a Registered Nurse who has postgraduate qualifications in mental health;
- employ strategies for prevention and early intervention, including risk reduction and promoting mental health resilience;
- undertake comprehensive mental health assessments by gathering and analyzing data about patients' conditions, taking into account their physical, psychological, social and cultural contexts;
- formulate patient diagnoses collaboratively with interprofessional teams, using internationally accepted mental health classification systems;
- develop comprehensive, personalized nursing care plans based on patient/family needs, the patient's lived experiences and identifying achievable and measurable outcomes;
- implement a person-centred recovery model, incorporating principles of shared decision-making and promoting patients' autonomy;
- provide patient counselling and psychoeducation related to patients' experiences and mental health disorders, adapting an approach based on patients' individual learning styles and abilities;
- implement a person/family-centred care plan using a combination of lifestyle, psychological and pharmacological interventions, where appropriate;
- coordinate care in partnership with patients and families, facilitating patient engagement, hearing their views and experiences and promoting their active participation in their own care;
- maintain comprehensive and accurate nursing and health care records, adhering to data protection and confidentiality principles;
- collaborate and leading within interdisciplinary teams to advocate for the physical and mental health and well-being needs of patients;
- uphold a robust nursing code of ethics, recognizing and respecting human rights, values, customs and diverse experiences of patients, families and colleagues;
- engage in continuous professional development and reflective practice, staying up to date with current mental health research and guidelines and contributing to the advancement of mental health nursing practice;
- advocate for mental health within broader societal contexts, challenging stigma and discrimination and promoting mental health literacy and well-being aligned with patients' beliefs and the patients' identified group membership;
- incorporate digital health technology, telehealth and other innovative approaches into practice, where appropriate, to enhance access to and delivery of mental health care.

ADVANCED PRACTICE MENTAL HEALTH NURSES' SCOPE OF PRACTICE

For more information related to Advanced Practice Nursing, please see ICN's Guidelines on Advanced Practice Nursing [International Council of Nurses, 2020a].

Advanced Practice Nursing in mental health demands a sophisticated skill set and profound knowledge, allowing these nurses to provide care for patients with complex mental health issues, manage care through educating and guiding patients and families, and serve as role models for other nurses as well as consultants for various health professionals. Their responsibilities include case

management, with the caseload varying based on their intervention duties. Furthermore, the role entails supporting the professional growth and supervision of staff, necessitating clinical proficiency in mental health and robust leadership abilities.

The role of APMHNs builds on the responsibilities of mental health nurses but includes further critical analysis and evaluation skills to critique knowledge related to complex, contemporary mental health nursing practice. Nurses at this level must use current knowledge in innovative and supportive ways, taking responsibility for developing and changing practice in complex and often unpredictable environments.

Collaboration and education are central to this work. APMHN scope of practice

includes assessment leading to a diagnosis and monitoring psychopharmacological and integrative therapies for all mental health disorders [American Nurses Association, 2022; American Psychiatric Nurses Association, 2022]. Advanced practice is characterized by varying levels of autonomy in decision making that are often specifically codified by the appropriate regulatory authority. In some cases, the scope of practice includes prescriptive authority [International Council of Nurses, 2021b].

Table 4: Advanced Practice Mental Health Nurses' scope of practice

[Australian College of Mental Health Nurses, 2013; American Nurses Association, 2022; American Psychiatric Nurses Association, 2022; American Nurses Association, 2015]

- APMHNs begin their career pathway with a bachelor's degree in nursing and registration as a nurse. They continue their educational journey with a Master's or Doctoral degree in nursing. The postgraduate education focuses on mental health, often offering additional specialized responsibilities such as family mental health, child and adolescent mental health and older adult mental health.
- Patient assessment: APMHNs are skilled in performing comprehensive evaluations to assess patients' mental health status. This involves determining the nature and extent of mental health issues, identifying risk factors and assessing physical health as it impacts mental health conditions.
- Diagnosis: Using their specialized training, APMHNs are able to (or contribute to) diagnose mental health disorders.
- Treatment planning: APMHNs develop and coordinate treatment plans that are individualized to the needs of each patient. They consider all relevant factors, including mental and physical health status, social environment and personal preferences.
- Psychotherapy: APMHNs can provide both individual and group psychotherapies, to assist patients in managing their mental health conditions.
- Medication management: APMHNs may have prescriptive authority, which varies by state and country, to prescribe and manage medications as a part of comprehensive mental health treatment plans.
- Health promotion and prevention: APMHNs educate patients and their families about mental health issues and strategies to maintain mental wellness (includes self-care).
- Advocacy: They advocate for mental health at individual, community and policy levels, working to reduce stigma and improve access to mental health resources.
- Research: APMHNs often engage in research, contributing to the development and improvement of evidence-based mental health practices.
- Practice settings: APMHNs practice in a wide variety of settings including hospitals, community mental health centres, private practices, schools, correctional facilities and substance abuse treatment centres.
- Interprofessional collaboration: APMHNs collaborate with a team of health care professionals, including psychiatrists, psychologists, social workers, people with lived experience and other nurses, to provide comprehensive care. With others, they coordinate care, communicate patient progress and collaborate on treatment strategies.

SUMMARY

This information should serve to support a common understanding of mental health nurses' scope of practice. By doing so, it enables the nursing profession to establish its responsibilities and boundaries and provides societies with an understanding of the responsibilities and competencies required in nursing. This information about the scope of practice and standards serves as guides for supporting policies and regulations that govern nursing practice. However, it is important to note that the specific limits, functions and titles for nurses, especially at the advanced practice level, may differ within and between countries due to variable regulatory and educational environments.

Nurses have a responsibility to ensure that their practice adheres to the boundaries set by their relevant regulatory

authority. They are personally accountable for practicing within their own competence, adhering to professional codes of ethics and following professional practice standards.

Different levels of nursing practice exist, based on the nurse's educational preparation. The nurse's role, position, job description and work setting further define their practice. For mental health nurses, their roles can include direct care clinical practice, consultation, administration, education, policy/advocacy or research. It is important that professional bodies representing mental health nurses lead the profession and further the development and evolution of mental health nurses' scope of practice.



▲
Dr Irene Bean (left), a Psychiatric Mental Health Nurse Practitioner and the owner and CEO of Serenity Health Care in Tennessee, USA, noted that people of colour and low-income individuals were more likely to be uninsured, face barriers to accessing care, and have higher rates of chronic diseases compared to Whites and those at higher incomes. She now provides an integrated service covering chronic diseases, paediatric, adolescent, adult wellness exams, lifespan mental health services for depression, anxiety, attention deficit disorders, personality disorders, and mood disorders. The integrated services are designed to eliminate stigma which prevents clients from seeking mental health treatments, and provide easy accessibility to care by having everything in one facility.

4



CHAPTER

EDUCATION TO IMPROVE MENTAL HEALTH CARE

Quality education is the best way to strengthen mental health care and create a well prepared and competent mental health workforce. Nurses are scientific professionals who base their practice on empirical evidence. As we continue to address current challenges and the growing health needs of global populations, adapting to new treatments and technologies and collaborating across sectors, it is essential that nurses have strong didactic and clinical education. This includes undergraduate and graduate degrees, as well as continuing professional development programmes and activities.

ICN [Stewart, 2022] strongly encourages health systems and countries around the world to place a high value on the education of their nursing staff. Investment in nursing education will further equip health systems to provide the care that individuals and communities require by:

- improving knowledge and competence;
- increasing confidence in clinical and leadership skills, critical thinking and decision making; and
- increasing job satisfaction and workforce retention.

In some situations, mental health nursing has adopted a psychiatric or medical discourse as the foundation for practice and it is possible that nursing care has been reduced to dispensing medication, managing symptoms of mental distress until the medication takes effect and assisting patients in adjusting to a life of disability as a result of a biochemical imbalance [Evans & Kevern, 2015].

To care for the mental health needs of communities, nurses need to move away from the biomedical model of care and embrace the psychodynamic and interpersonal foundations of mental health nursing. As Jones [2012] states: “Now more than ever, we need the structure of an interpersonal paradigm, such as that proposed by Peplau, to guide curricula of professional nursing practice. We need to remember and reclaim what is rightfully a significant if not a key element to the nursing profession.”

A paradigm shift in mental health care to one that is based on a rights-based approach to care begins with the education and preparation of mental health nurses.

[Puras, 2019]

Mental health nurse education programmes should include a combination of classroom instruction and clinical practice. These programmes typically cover topics such as:

- critical thinking that encompasses the social sciences and humanities;
- the biological, psychological and social aspects of mental illness;
- assessment and diagnosis of mental health conditions;
- psychopharmacology and medication management;
- recovery and rights-based approaches to person-centred care;
- tackling stigma, discrimination, abuse and coercion;
- harm reduction;
- promotion and protection of human rights;
- therapeutic communication and interventions;
- legal and ethical issues in mental health nursing;
- leadership and organization of health care services;
- health care policies and procedures;
- cultural competency in mental health care;
- crisis intervention and trauma-informed care. [Evans & Kevern, 2015; Clinton & Hazelton, 2008; Moyo et al., 2020; Adam & Juergensen 2019]

ICN supports the WHO Strategic Directions for Nursing and Midwifery [World Health Organization, 2021c], which call for education programmes to be competency based. Ideally these programmes should result in a bachelor's degree on successful completion of the course of study.

ICN supports the recommendations of 'The Lancet Commission on ending stigma and discrimination in mental health' [Thornicroft et al., 2022], which emphasize the critical importance of incorporating comprehensive mental health education within all undergraduate nursing curricula. To this end, ICN recommends the mandatory integration of sessions that focus on the needs and rights of individuals with mental health conditions. These sessions should be informed by evidence-based practice and should always be co-delivered by individuals with lived mental health experiences. Such an approach ensures an authentic and empathetic understanding of the patient's perspective. Furthermore, undergraduate education for nurses must include evidence-based practices aimed at reducing stigma within the health care environment. This should equip nurses with the skills to recognize, confront and effectively respond to instances of stigma and discrimination encountered by patients, clients and other beneficiaries. By fostering an educational framework that champions dignity and respect, future nurses will be better prepared to provide holistic and compassionate care across the spectrum of mental health services.

In 2022, ICN officially endorsed WHO's QualityRights training programme on improving mental health. The programme includes practical, evidence-based, in-person and online training programmes, freely available to nurses and other stakeholders in order to build capacity to combat stigma and discrimination and promote rights based, recovery and person-centred approaches in mental health services and practice. ICN has provided for all nurses and nursing students who complete the entire course to receive 24 International Continuing Nursing Education Credits, acknowledging their completion of 24 hours of continuing professional development study. (The WHO QualityRights -training is accessible at: <https://www.who.int/teams/mental-health-and-substance-use/policy-law-rights/qr-e-training>).

MENTAL HEALTH, ETHICS AND THE LAW

While there are many crucial aspects to the education of nurses in mental health, there are two specific and inter-related areas of need that warrant further emphasis: ethics and the law. While ethical concerns and legal matters are

distinct, they often intersect in the realm of health care practice. This interplay becomes especially evident when actions are subject to interpretation under existing laws, including those related to mental health [Pachkowski, 2018].

A recurring challenge for mental health nurses pertains to determining a patient's capacity to consent to treatment. Although these terms have clear legal ramifications, their ethical implications extend to respecting the patient's autonomy and dignity. A study by Lamont, Stewart and Chiarella [2016] revealed that health care practitioners frequently overlook the assessment of a patient's capacity to make decisions about their own treatment, especially in cases of delirium, which affects cognitive function and awareness. This oversight could be seen as neglecting both the legal and ethical obligations to ensure that patients are capable of making informed decisions.

This situation underscores the necessity for all health care professionals to grasp the intricate relationship between legal frameworks and ethical considerations. Practitioners must recognize that a lawful action may not always align with ethical principles and vice versa. The capability to differentiate between the two is crucial for informed decision-making in diverse medical scenarios [Pachkowski, 2018].

Legal considerations often come into play when making treatment choices in the mental health field, particularly when public or individual safety is a concern. Where mental health laws are in place, they typically encompass regulations around involuntary admission to hospital and treatments. In such cases, patients might be confined or treated against their will. In areas with a shortage of doctors, mental health nurses are often granted the authority to make or contribute to these significant health care decisions. While these actions are governed by legal standards, they also necessitate a strong grounding in ethics. When health care providers are tasked with treating patients against their preferences, there's a significant likelihood that their own beliefs and values may come into play [Pachkowski, 2018].

There are numerous ethical dimensions and complexities involved in mental health care. This is a significant concern given that both legal intricacies and ethical dilemmas profoundly influence patient and nurse experiences. The care of individuals with mental health conditions is particularly complicated due to social stigma and systemic disadvantages such as lower income, increased likelihood of homelessness and higher rates of physical illnesses. This social context adds another layer of complexity to ethical decision-making in mental health care.

Mental health nurses must navigate a maze of social and ethical issues, ranging from safeguarding individual and public safety to honoring their professional responsibilities. The nursing profession inherently involves ethical decision-making; this is particularly complicated in the field of mental health due to the vulnerabilities and complex social, religious, family and cultural dynamics associated with mental illness. This necessitates constant moral deliberation, especially because mental health nurses consider the therapeutic relationship central to effective care [Willard, 2015].

[Pachkowski, 2018]

Issues like the interplay between mental health and law and the phenomenon of moral distress underscore the need for robust legal and ethics education. To be ethically competent, nurses should understand the multifaceted environment of health care and be well-versed in ethical theories. They should also be capable of recognizing and managing their own values and biases and be proficient in making morally sound decisions within their scope of practice. This level of ethical competency is vital for resolving the complex challenges faced by mental health nurses today [Pachkowski, 2018].



Ethical decision-making, especially in mental health, contains a delicate balance of ethical principles, legal issues, social issues, personal values, patient and family values, an understanding of multi- and interdisciplinary teams and more. If nurses wish to be effective moral decision-makers, they must distinguish and weigh these different issues, which can be an extraordinarily complex task.

PREPARING THE NURSING WORKFORCE – UNDERGRADUATE EDUCATION

The pronounced disparity in mental health care between and within countries, particularly for prevalent conditions such as depression and anxiety and for underserved populations, emphasizes the pressing need for countries to diversify and augment their care solutions in pursuit of Universal Health Coverage (UHC). Achieving this requires integrating mental health into primary health services and ensuring that all nurses are equipped to identify mental health conditions, provide essential care and refer patients to specialized services where necessary [World Health Organization, 2021a].

To foster a robust foundation in mental health, baccalaureate/first degree nursing programmes should consider integrating the following core competencies:

- **Mental health awareness:** Understanding of key concepts, disorders and the continuum of mental health, from wellness to severe mental illnesses.
- **Screening and assessment:** Ability to recognize signs and symptoms of mental health conditions and conduct initial screenings or assessments.
- **Interventions:** Possessing the skills to provide supportive interventions, including active listening, validation and supportive communication.
- **Person centred:** Providing person centred or individualized care which considers patient attributes such as gender identity, ethnic and racial background, religious practices, health beliefs and population vulnerabilities.
- **Referral skills:** Knowing when and how to refer patients to specialized mental health services or professionals.
- **Therapeutic communication:** Ability to communicate effectively and therapeutically with individuals experiencing mental distress.
- **Cultural competence:** Understanding and respecting cultural and individual variations in mental health beliefs, symptoms and treatment preferences.
- **Stigma reduction:** Actively working to reduce stigma associated with mental illness, both within the health care system and in broader society.
- **Safety and crisis intervention:** Ability to assess and respond to urgent situations such as suicidal ideation and intent, violence directed at self and/or others, or acute behavioural disturbances, ensuring the safety of the patient and others.
- **Interprofessional collaboration:** Collaborating effectively with other professionals, including psychiatrists, psychologists, social workers, people with lived experience and therapists, to provide comprehensive care.
- **Legal and ethical understanding:** Understanding legal and ethical considerations in mental health, such as confidentiality, informed consent and the rights of individuals with mental health conditions and personal obligations of well-being and lifelong learning.
- **Self-care and resilience:** Recognizing the importance of maintaining one's own mental well-being, employing self-care strategies and seeking support when needed.
- **Mental health promotion:** Promoting mental health and well-being in various settings, from community outreach to in-patient settings.
- **Patient and family education:** Providing education to patients and their families about mental health conditions, treatments and coping strategies.
- **Medication knowledge:** Understanding of common psychotropic medications, their uses, potential side effects and interactions, especially if they are administering these medications.
- **Integrated care:** Having the ability to integrate mental health care into broader health care services, recognizing the interconnectedness of physical and mental health.
- **Advocacy:** Championing the rights and needs of individuals with mental health conditions, both within the health care system and in the wider community. [World Health Organization, 2019; Canadian Association of Schools of Nursing & Canadian Federation of Mental Health Nurses, 2015; Moyo, Jones & Gray, 2022]

MENTAL HEALTH NURSING EDUCATION

Generalist graduates of any nursing programme can specialize in mental health nursing by working for extended periods of time in mental health care settings and by completing a postgraduate degree. To achieve the status of a nurse specializing in mental health often requires certification, which is a mechanism for validation or formal recognition of the knowledge, skills and abilities specific to mental health. Generally, this is achieved either through a direct entry to undergraduate specialized mental health baccalaureate degree programmes or by a Registered Nurse completing postgraduate qualifications in mental health.

Education programmes should be underpinned by the following core values:

- The need to collaborate and provide person-centred care to individuals experiencing and impacted by mental health conditions.
- The upholding of the human rights of individuals affected by mental health issues, as outlined in the United Nations Principle on the Protection of People with a Mental Illness [United Nations, 1991].
- Using existing evidence-based practices and quality improvement processes to deliver the highest standard of care possible.
- Providing culturally competent care that considers factors such as age, gender, spirituality, ethnicity and the unique health values of individuals impacted by mental health issues.

Educationalists and faculty members programmes should consider developing mental health competencies for their programmes and curricula in line with their country's community mental health needs and the following key areas:

1. **Clinical knowledge:** Comprehensive understanding of mental health conditions, their symptoms, causes and potential treatments. This includes neurobiology, psychopathology, psychopharmacology and evidence-based practices in mental health nursing.
2. **Therapeutic communication:** Ability to communicate effectively and empathetically with patients, families and team members. This includes active listening, expressing empathy and being able to provide emotional support to those in distress.
3. **Assessment skills:** Competence in performing comprehensive mental health assessments, which involves gathering information about a person's mental, emotional and physical status, in order to determine an appropriate plan of care.
4. **Patient education:** Ability to educate patients and families about mental illnesses, treatments, coping strategies, lifestyle changes and access to services that can improve mental health.
5. **Psychotherapy skills:** Delivery of selected therapeutic modalities and interventions, such as cognitive-behavioural therapy, dialectical behaviour therapy, motivational interviewing, family therapy and group therapy.
6. **Crisis intervention:** Skills to de-escalate situations and provide therapy, counselling and support to individuals experiencing a mental health crisis.
7. **Phases of recovery in mental health nursing:** Ability to understand, recognize and address the distinct phases of recovery in individuals with mental health conditions, with a focus on instilling hope, promoting positive self-definition, facilitating community integration and supporting the journey towards empowered citizenship.
8. **Empowerment and personal control:** Capability to foster empowerment and bolster personal control in individuals with mental health conditions, emphasizing their agency and autonomy in directing their recovery journey.
9. **Strengthening systems of support:** Ability to recognize, develop and integrate family and relational interventions within treatment plans, focusing on fortifying the individual's social relationships and networks.

10. Ethics and confidentiality:

Understanding of ethical issues in mental health nursing, including maintaining patient confidentiality, understanding informed consent and making ethically sound decisions.

11. Mental health and the law: Education about the laws governing mental health can ensure that nurses are aware of both their rights and obligations. This legal literacy is essential for decision-making in complex cases involving patient autonomy and safety.

12. Cultural competency: Ability to assess patients' expressed values, traditions and beliefs and provide culturally sensitive care, understanding the impact of cultural factors and traditions on mental health and developing person-centred care.

13. Patient advocacy: Ability to advocate for the rights and needs of patients, including respect for autonomy, access to care and non-discrimination.

14. Collaboration and interdisciplinary teamwork: Ability to work effectively within an interdisciplinary team, understanding the roles of various team members and collaborating to develop and implement a comprehensive, interprofessional plan of care.

15. Mental health promotion and prevention: Use of strategies for promoting mental health and

preventing mental illness, including community-level interventions and individual lifestyle changes.

16. Research and evidence-based practice: Ability to integrate research findings into practice, understand the importance of evidence-based care and stay current with the latest research in mental health nursing.

17. Risk management and patient safety: Ability to identify and manage potential risks, maintain a safe environment and prevent harm to patients.

18. Professional development and lifelong learning: Commitment to ongoing professional development and learning, including seeking out opportunities for further education, remaining current with changes in the field and continuously striving to improve one's skills and knowledge.

19. Self-care and resilience: Enacting self-care in maintaining personal well-being and resilience, recognizing the emotional demands of mental health nursing. Ability to recognize and manage signs of stress, burnout and secondary traumatic stress in self and others. [Higgins, Kikku & Kristofersson, 2022; Hurley et al., 2022; World Health Organization, 2019; Canadian Association of Schools of Nursing & Canadian Federation of Mental Health Nurses, 2015; Moyo, Jones & Gray, 2022; Davidson et al., 2008; Leamy et al., 2011]

ADVANCED PRACTICE MENTAL HEALTH NURSES

The ICN Guidelines on Advanced Practice Nursing (APN) describe APN in the following way: "An Advanced Practice Nurse (APN) is a generalist or specialized nurse who has acquired, through additional graduate education (minimum of a master's degree), the expert knowledge base, complex decision-making skills and clinical competencies for Advanced Nursing Practice, the characteristics of which are shaped by the context in which they are credentialed to practice" [International Council of Nurses, 2020a].

There is a strong correlation between the general Advanced Practice Nursing Competencies and specific APMHN

competencies. However, as Higgins, Kikku and Kristofersson [2022] point out, there are also some subtle differences between the two including:

- APMHNS' emphasis on the therapeutic relationship.
- APMHNS focus not only on the patient but also consider the needs of the patient's family and significant others.
- Increased emphasis by APMHNS on human rights, mental health promotion, recovery, complex ethical decisions and fostering therapeutic relationships.



An Advanced Practice Nurse (APN) is a generalist or specialized nurse who has acquired, through additional graduate education (minimum of a master's degree), the expert knowledge base, complex decision-making skills and clinical competencies for Advanced Nursing Practice.

[International Council of Nurses, 2020a]

- APMHNs have a greater focus on care models, intervention strategies, risk management, ethical decision-making and collaborative practice.

An APMHN is a highly skilled nurse with advanced education in mental health care. The roles and responsibilities of this role may include the diagnosis and treatment of mental health conditions, prescriptive authority and provision of therapy and counselling to individuals, families and groups. APMHNs' may work across the lifespan in a variety of settings. They collaborate with psychiatrists and other health care professionals to provide comprehensive and integrated mental health care.

The education of APMHNs builds on those from the mental health nurse. APMHNs differ from mental health nurses generally by the complexity of patient care needs they address and treatment modalities, as well as by their increased autonomy in decision making. Education programmes should consider developing mental health competencies for their postgraduate degrees based on the prevailing scope of nursing practice, community health needs and the regulatory system. Consideration should be given to the following areas:

- 1. Advanced clinical knowledge:** Master a deep understanding of mental health conditions, their symptoms, causes and potential treatments, including current and emerging therapeutic approaches and medications. The nurse should demonstrate effective management of complex cases and comorbid conditions.
- 2. Prescriptive authority and medication management:** Demonstrate knowledge and understanding of psychotropic medications, their indications for use, dosages, side effects and interactions. In jurisdictions where advanced practice nurses can prescribe, they should be able to effectively manage and adjust medications based on patient responses.
- 3. Advanced therapeutic modalities:** Utilize complex therapeutic modalities, including advanced individual, family and group psychotherapy techniques and specialized therapies such as electroconvulsive therapy or neurofeedback, where appropriate.
- 4. Leadership and policy:** Have the ability to take on leadership roles within a team, the ability to affect policy change at various levels (organizational, local, regional, national) and engage in activities that advance the field of mental health nursing.
- 5. Programme development and evaluation:** Have the skills to develop, implement and evaluate mental health programmes and interventions at the individual, group and community levels. This includes an understanding of quality improvement and patient safety initiatives.
- 6. Research and scholarship:** Conduct research and interpret and apply research findings. This includes understanding research methodology, critical appraisal of research findings and integration of current evidence into practice. Participation in the generation of new clinical knowledge through research is optimal.
- 7. Teaching and mentoring:** Have the skills to educate and mentor other health care providers, students, patients, families and the community about mental health conditions and treatments. This also includes providing clinical supervision to less experienced nursing staff or students.
- 8. Consultation and collaboration:** Demonstrate expertise in consulting with multi-disciplinary and inter-disciplinary professionals and in facilitating a collaborative approach to patient care. This includes a deep understanding of systems-based practice and coordination of care across different providers and settings.

- 9. Advanced health assessment:**
Perform comprehensive biopsychosocial assessments, including complex differential diagnosis and risk assessments. Advanced practice nurses should also be proficient in the use of relevant assessment tools and instruments.
- 10. Ethical decision making:** Have the capacity to navigate complex ethical dilemmas and make decisions in situations where the right course of action may be unclear. This includes understanding advanced bioethical principles and legal implications.
- 11. Health information technology:**
Be proficient in the use of electronic health record systems, telehealth platforms and other digital health for clinical decision making, care coordination, data management and quality improvement.
- 12. Self-care and peer support:**
Foster self-care and resilience within members of the nursing team, recognizing signs of stress or burnout in peers and providing or facilitating support and access to resources when needed.
[International Council of Nurses, 2020a; Australian College of Mental Health Nurses, 2013; American Nurses Association, 2022; American Psychiatric Nurse Association, 2020; Scheydt & Hegedüs, 2021]

Challenges associated with setting a minimum standard of education for Advanced Practice Mental Health Nursing

The minimum standard for the educational preparation of an APMHN is a Master's degree. For some countries, this is an aspirational goal, as country specific issues currently impede the realization of this minimum standard. The numbers of courses offered, and their content will be limited based on availability and preparation of faculty, clinical sites and institutions at which clinical practice can take place and the dominant health care needs of the populations served. ICN therefore suggests that countries, "Make available a level of advanced education that is realistic considering the country's needs and availability of human and financial resources".

While this is an aspirational goal, it is important that countries envision this 'gold standard' and progress toward it. It is recognized that this might cause challenges for those who do not hold Master's degrees or above levels of education. This situation can be overcome by the provision of regulations that exempt those who are already practicing at this level from requiring such qualifications.

POST GRADUATE STUDIES

Course length

It is essential that mental health nursing postgraduate education be of sufficient length to allow for a rigorous didactic and clinical curriculum that prepares students to master the mental health core competencies. Didactic courses are followed by clinical practice, laboratory hours (including simulation) and faculty supervised clinical hours of a designated number. Students must actually demonstrate competencies, not just observe or participate in the performance of competencies. A Master's degree programme or higher must extend to a minimum of 18-24 months to allow students' time to master the competencies [United Nations Educational, Scientific & Cultural Organization, 2011]. This is generally prescribed by the relevant education agencies. It is vitally important that the professional body representing mental

health nursing oversees the education programmes to ensure that the standards required by professional practice are achieved.

Accreditation of post graduate mental health nursing educational programmes

ICN supports the policy priorities of the WHO Global Strategic Directions for Nursing and Midwifery [World Health Organization, 2021c] that call for the accreditation of all nursing and midwifery education programmes. The purpose of accreditation of nursing education programmes is to ensure that they meet certain standards and provide students with a high-quality education. Accreditation is a process of quality control and ongoing improvement of educational programmes [Pullen, 2022; O'Sullivan et al., 2020].

Accreditation of nursing education programmes is important for mental health for several reasons:

- **Quality assurance:** Accreditation provides assurance to students, employers and the public that the programme meets established standards for quality mental health nursing education [Frank, 2020].
- **Improved programme outcomes:** Accreditation will assist in the continuing improvement of mental health nursing education programmes so that students will gain the knowledge, skills and attributes required to meet their community mental health needs [O’Sullivan et al., 2020].
- **Certification eligibility:** Accreditation supports the certification of mental health nurses as it can ensure that they have achieved a pre-established standardized criterion, determining which practitioners are qualified in a particular specialty [Hickey, 2014].
- **Transferability of credits:** Accreditation also makes it easier for students or mental health nurses to have their skills, knowledge and attributes recognized by different education and regulatory institutions [Pullen, 2020; Frank, 2020]. This has the potential to improve the mobility of mental health nurses.

Overall, the purpose of accreditation of nursing education programmes is to promote and maintain the quality of nursing education, ensure that students receive high-quality education aligned with best nursing practices and prepare them for successful careers as nurses.

➤
Matthew Ball, a mental health nurse who happens to have a lived experience of hearing voices and ‘psychotic disorder’ label in the past, leads the Humane Dialogical Project which offers an alternative to medication for people in distress with voices and other extreme experiences. Matthew leads a multidisciplinary team which provides individual therapies, hearing voice groups and open dialogue family network meetings and places agency and power back in the hands and hearts of the individual and their network.



5

CHAPTER

ESTABLISHING A PROFESSIONAL STANDARD FOR MENTAL HEALTH NURSES

Professional standards are critical as they define the education, roles, scope of practice, ethics and credentialing processes for the profession. They provide transparency and inform mental health nurses and other health care professionals, the public, policymakers and other parties of interest. Ideally standards for mental health nursing practice should

be global. Where possible, professional mental health nursing associations and mental health nurse leaders should influence and lead the development of mental health nursing guidelines since they possess expert knowledge and experience about what is needed to underpin high quality nursing services that meet national standards.

CERTIFICATION AND MENTAL HEALTH NURSING

A combination of factors such as globalization, deregulation, privatization, health care restructuring and nursing shortages have led to increased focus on systems and processes which serve to promote and validate the quality of nursing and health care globally. Credentialing is being increasingly recognized by individuals and organizations as offering an opportunity to apply formal processes to verify qualifications, experience, professional standing and other relevant professional attributes to assess competence, performance and professional suitability to provide a safe, high quality health care service within specific environments.

Certification is important to demonstrate that specific standards are met. Providing a process to validate knowledge and expertise is an important step in the delivery of safe, high-quality nursing care. In many countries, the absence of policies and lack of consensus on the “right touch” or best practice credentialing standards for specialty practice is a long-standing

obstacle to role implementation. The lack of certification for specialized practice contributes to unclear responsibilities and subpar education and has a detrimental impact on the recruitment and retention of nurses, as well as the viability of their employment. The lack of accreditation further jeopardizes public safety because there are no systems in place to ensure that nurses have the required abilities for highly specialized and frequently complex areas of practice [Bryant-Lukosius, et al, 2018].

Credentialing is a core component of clinical and professional governance or self-regulation, where members of a profession set standards for practice and competence within their specialist domain beyond entry to practice. While there is a worldwide shortage of nurses, “there is an increasing demand for nurses with enhanced skills who manage a more diverse, complex and acutely ill patient population than ever before” [Duffield et al, 2009].

There are four types of credentialing: licensure, registration, certification and accreditation of organizations. For the purpose of mental health nursing practice, the focus will be on 'certification'. Certification is the credentialing of nurses based on their fulfillment of pre-established standardized criteria, determining which practitioners are qualified in a particular specialty [Hickey et al., 2014]. As such it is the formal recognition of knowledge, skills and experience demonstrated by the achievement of the professional standard set for specialty or advanced practice.

Despite the benefits that can be achieved, there are challenges related to specialty certification that are not unique to mental health nurses. This includes:

- lack of consistent practices and standardization of specialty practice;
- lack of clarity regarding scope of practice;
- the often-voluntary nature of specialty certification;
- the misalignment between certification and education;
- poor clarity between specialty practice and advanced practice roles [Fortman, 2020; Haskins, Hnatiuk & Yoder, 2011].

Despite these challenges, ICN affirms that the quality of mental health care could improve with the certification of mental health nurses. This should be considered a priority in the planning of future mental health services. Supporting the development, understanding, implementation and sustainability of mental health certification programmes will require:

- clear articulation of the need for mental health nurse certification to address community mental health needs;

- standardized approach to mental health nursing workforce data sets;
- development of well-defined core competencies in mental health nursing that reflect local and international best practices and that can be used to determine certification requirements (e.g. practice experience, clinical supervision hours, continuing education hours etc.);
- consideration of recertification that considers ongoing professional growth and advancement in practice;
- research on the impact of certification on patients, mental health nurses, health care providers and health system.

It is a fundamental nursing standard that mental health nurses engage in lifelong continuous professional development (CPD) to maintain, improve and broaden their knowledge, expertise and competence and develop the personal and professional qualities required throughout their professional lives.

[Nursing & Midwifery Board of Australia, 2021]

CONTINUING PROFESSIONAL DEVELOPMENT

Advances in technology and science are rapidly evolving the competencies required for nursing practice. Mechanisms that support a culture of inquiry, encourage practice scholarship and allow for the rapid translation of new knowledge into practice are needed for optimizing health care delivery. It is a fundamental nursing standard that mental health nurses engage in lifelong continuous

professional development (CPD) to maintain, improve and broaden their knowledge, expertise and competence and develop the personal and professional qualities required throughout their professional lives [Nursing & Midwifery Board of Australia, 2021]. In many countries around the world, CPD is mandatory as part of the certification process.

CPD is essential for mental health nurses to maintain and improve knowledge, skills and competence and to provide safe and effective care to their patients. The benefits of CPD include:

- **Keeping abreast of new developments:** Mental health nursing is a rapidly evolving field, with new research, treatments and technologies constantly emerging. CPD helps mental health nurses stay current with these developments and incorporate them into their practice.
- **Improving patient outcomes:** CPD provides mental health nurses with the opportunity to learn about new and effective treatment approaches, which can lead to improved patient outcomes.
- **Enhancing clinical skills:** CPD programmes offer mental health nurses the opportunity to learn new techniques and expand skill sets, which can help to provide better care for patients.

- **Meeting professional standards:** CPD is often a requirement for mental health nurses to maintain their professional registration and meet the standards set by their professional organizations.
- **Personal and professional growth:** CPD provides mental health nurses with the opportunity to challenge themselves, learn new things and grow both personally and professionally [Cleary et al., 2011; Wary & Aleo, 2021].

CPD is crucial for mental health nurses to stay informed, competent and effective in their practice. It helps them provide better care for their patients and maintain high professional standards. It is therefore essential that there is ongoing and continual investment into mental health nurses' CPD [Cleary et al., 2011].



The Bega Teen Clinic is a nurse-led, early intervention model of access to primary health care for teenagers, providing a drop-in service for young people in rural towns in New South Wales, Australia. The aim of the Teen Clinic model is to break down barriers for young people accessing preventative health care, including mental health care.

© BegaTeen Clinic

6



CHAPTER

MENTAL HEALTH NURSES CONTRIBUTIONS TO HEALTH CARE SERVICES

Mental health nurses play an essential role in addressing the increasing mental health challenge across the world. Their responsibilities and the effectiveness of

their practice in different environments are emphasized by numerous studies and reviews.

PROMOTING HOLISTIC PERSON-CENTRED CARE

One of the main advantages of nurse-led mental health treatment is the ability to provide a holistic and person-centred approach to care. Nurses are educated to understand the unique needs and concerns of patients and families, and they provide care that is tailored to the individual's needs. This can be especially beneficial for patients who have complex mental health and substance use issues, as well as those who require ongoing care and support. Among the most common approaches is recovery-based treatment. Recovery-based models focus on empowering patients to take control of their own recovery process and achieve their goals [Bjørlykhaug et al., 2022]. This can include accessing and providing therapy and counselling, medication management and coordinating care with other health care

providers and persons with lived experience of chronic illness. Integrated care models are another approach in mental health nursing. These models focus on providing coordinated care across different settings and disciplines, including primary care, behavioural health and social services. Integrated care models are defined by Brown et al. [2021] in their overview of integrated care models as *"care that results from a practice team of primary care and mental health clinicians, working together with patients and families ... [that] may address mental health and substance use conditions, health behaviors (including their contribution to chronic medical illnesses), the life stressors and crises, stress-related physical symptoms and ineffective patterns of health care utilization"*.

IMPROVING THE COST-EFFECTIVENESS OF CARE

Care delivered by Mental health nurses has been shown to improve cost-effectiveness. Because nurses are able to provide care in a variety of settings, they can help reduce the overall cost of care. Additionally, because nurses can provide care that is tailored to the individual, that is, person centred, they are able to help patients avoid unnecessary

hospitalizations and other costly interventions. Examples of this have been documented in a study by Olsson and Dahl [2018] that shows that there was no significant difference between patients treated by mental health nurses and psychologists/psychiatrists. The fact that the profession of the therapist does not seem to impact the effects in the long

term for the patient has implication on cost-effectiveness and shows that mental health nurses should take part in patient treatment to a greater extent than they do currently.

Mental health nurses improve access to care for patients. As a result of mental health nurses providing care in a variety of settings (e.g. including inpatient, outpatient and community settings), patients are able to receive care closer to their homes. This can be especially beneficial

for people who live in rural or under-served areas, where access to mental health and substance abuse treatment may be limited. Ameen et al. [2021] found that the main role of nurses in mental health outpatient care is to deliver psychosocial care for their patients. Among Ameen, Kontio & Välimäki's [2019] findings on nurses' interventions in outpatient psychiatric care is that psychoeducation improves the functioning of both patients and their families and helps the patient to use their own resources.

THE MULTIFACETED ROLE OF MENTAL HEALTH NURSES

The responsibilities of a mental health nurse extend beyond clinical treatment to encompass multiple roles including but not limited to advocating for patients,

that interpersonal community treatment, an intervention focusing on social participation, social skills and cooperation, was feasible and that it led to significant improvements in social functioning and symptomatology.

WHO (2016) has highlighted the vital role that mental health nurses play in promoting mental health, preventing mental health conditions, providing care to people with mental illness and assisting in rehabilitation.

Supporting this, WHO [2016] has highlighted the vital role that mental health nurses play in promoting mental health, preventing mental health conditions, providing care to people with mental illnesses and assisting in rehabilitation.

In the public health context, Rice and Stead's [2008] Cochrane review found that mental health nursing interventions contributed significantly to smoking cessation programmes, indicating the potential for nurses to be instrumental in broader health promotion initiatives.

navigation through health systems, promoting well-being, challenging stigma, case management and influencing health care policy. Research by Koekkoek and colleagues [2012] highlighted how mental health nurses are extremely effective in outpatient care. They found

Moreover, mental health nurses are increasingly recognized as essential members of integrated mental health care teams. Delaney, Robinson and Chafetz [2013] identified critical workforce competencies required for integrated care, including effective communication, person-centred care and interprofessional collaboration.

IMPROVING ACCESS TO CARE

The accessibility of mental health care is a significant concern across the globe. With an escalating number of individuals experiencing mental health conditions and a dearth of specialized professionals, the mental health landscape faces numerous challenges. In addition, certain vulnerable population groups experience even greater challenges in accessing

care. Mental health nurses emerge as instrumental in filling in the gaps and enhancing access to critical mental health services.

Mental health nurses work across various health care environments, assisting people from birth to their later years, especially those who are most susceptible

to mental health challenges. Despite increasing research emphasizing mental health's impact on people's lives, the promotion of mental well-being and proactive prevention often remains sidelined or overlooked. Viewed from a standpoint of social justice, there is a powerful endorsement of everyone's fundamental right to access all levels of medical and mental health support. Given their deep-rooted dedication to understanding diverse cultures and championing social equity, combined with their significant role and extensive education in health

care, mental health nurses are uniquely equipped to lead initiatives that bridge the gaps in mental health care, particularly for those most in need [Pearson et al., 2015].

Studies [Hurley et al., 2022; Yang, Idzik & Evans, 2021; Biering, 2019; Oh et al., 2022] have shown that mental health nurses are the most likely professionals to provide services to such populations. Their work in these areas has shown to improve health outcomes.

OPTIMIZING PATIENT OUTCOMES

Mental health nurses positively impact patient outcomes, from mental health symptoms management to enhancing quality of life. Delaney, Shattell and Johnson [2017] posited a model of engagement capturing the interpersonal process of mental health nursing, emphasizing the nurse's ability to create a therapeutic relationship with the patient, thus fostering engagement in care.

Similarly, an integrative review by Sharrock, Happell and Jeong [2022] found that mental health nurse Consultants significantly improved the care of general

hospital patients who have concurrent mental health conditions. This impact extended beyond patient outcomes to include increased staff confidence and competence in managing mental health issues.

Pessoa et al. [2017] and Ameel et al.'s studies [2021] further emphasized the diverse range of nursing care and interventions delivered in mental health settings, demonstrating the versatility and adaptability of mental health nursing in meeting patients' varied needs.

NAVIGATING THE HEALTH SYSTEM

As health care systems grow in complexity, the role of 'nurse navigators' has emerged as an essential link between patients, families and the intricate network of care providers. Mental health nurse navigators can provide unique benefits by guiding patients through the often-daunting journey of seeking and receiving mental health care.

Mental health nurse navigators are growing in popularity around the world. The title may be used differently, but essentially the role enhances health literacy and supports patients as they navigate their health care journey from primary health care, to specialized mental health services, community services and their homes. Through coordination across

diverse mental health specialties, the navigator programme seeks to diminish service gaps and bolster patient accessibility through care guidance, patient advocacy and targeted education. Mental health nurse navigators possess comprehensive knowledge of the mental health care landscape, equipping patients with the tools to better understand and self-manage their conditions. These navigators play a pivotal role in ensuring patients receive timely and appropriate care from the best-suited mental health professionals.

Research in this area has found:

- **Improved patient satisfaction:** Nurse navigators often serve as a single point of contact for patients, which can help reduce the confusion and stress associated with managing various appointments, treatments and follow-up care. This can lead to improved satisfaction with the health care experience.
- **Better care coordination:** Mental health nurse navigators work to coordinate care across various health care providers, which can lead to more streamlined and effective care for patients. This is especially crucial in mental health where a patient may be seeing multiple specialists.
- **Increased health literacy:** Nurse navigators educate patients about their conditions, treatments and medications, leading to greater capacity of patients and families to partner with providers. Patients with higher health literacy often have better outcomes as they can take a more active role in their care.
- **Reduction in hospital admissions and readmissions:** Some studies have suggested that nurse navigators can help reduce the number of unnecessary hospital admissions and readmissions, particularly by ensuring that patients are receiving the right care in the right setting.
- **Improved adherence to treatment plans:** By offering support and education, nurse navigators can help ensure that patients adhere to their treatment plans, which can be particularly beneficial in mental health where treatment regimens can be complex.
- **Better access to resources:** Nurse navigators are well-versed in the resources available to patients, both within the health care system and in the community. This can help patients access necessary support services, such as therapy, support groups, or financial assistance.
- **Cost savings:** By ensuring that patients receive the right care at the right time, nurse navigators can help reduce the overall costs associated with health care, including the costs associated with unnecessary tests, treatments and/or hospital stays. [Malakouti et al., 2016; Quemada-Gonzalez et al., 2022; McMurray et al., 2018; Harvey et al., 2019; Byrne et al., 2020; Collett et al., 2022; Ziguas & Stuart, 2000]

APMHNs PROVIDE QUALITY AND ACCESSIBLE CARE

One of the most common types of APMHNs are mental health nurse practitioners (MHNPs), which are highly qualified nurses who have completed additional education at a Master's level or higher.

Their scope of practice differs between and within countries but often they have a higher level of independent authority, care for patients across the lifespan and continuum of care. They are legally authorized to diagnose, treat and refer clients and to prescribe specified medications [Barraclough, Longman & Barclay, 2016].

Research has found that MHNPs improve:

- **Effective care delivery:** MHNPs provide a high-quality service.
- **Patient satisfaction:** Patients report high satisfaction levels when treated by MHNPs.

Policymakers and health service managers should consider innovative approaches to care delivery, such as expanding the roles of APMHNs.

[Scheydt & Hegedüs, 2021]

- **Access to care:** MHNPs have successfully increased access to care in underserved rural communities. Areas that have granted full-practice rights to MHNPs witnessed increased service provision to these vulnerable populations.
- **Positive patient outcomes:** In areas with full-practice rights for MHNPs, there is evidence of improved self-reported mental health among patients and decreased mental health-related mortality.
- **Telemedicine efficacy:** Research on telemedicine services provided by MHNPs has shown high user satisfaction and comparable efficacy to in-person sessions.

- **Challenges to full utilization:** While many studies support the role and efficacy of MHNPs in delivering mental health care, legislative restrictions in some areas have hindered their full utilization. [Barraclough, Longman & Barclay, 2016; Finley, 2020; Wand et al., 2015; Chapman et al., 2018; Phoenix, Hurd & Chapman, 2016; Wand et al., 2016]

MHNPs play a vital role in bridging the gap in mental health care services, particularly in underserved regions. Their holistic approach, combined with the ability to provide a broad range of services, makes them an invaluable asset to the health system. Research overwhelmingly supports their effectiveness and the significant benefits they bring to mental health service delivery.

IMPLICATIONS FOR POLICY AND PRACTICE

The evidence from the literature underscores the importance of mental health nurses in delivering quality care and achieving positive patient outcomes. Policy and practice should, therefore, prioritize the continued development of this workforce, including progressing education and support for increasing competency.

Moreover, integrated models of care and collaborative practices are integral to the future of mental health services. Policymakers and health service managers should consider innovative approaches to care delivery, such as expanding the roles of APMHNs [Scheydt & Hegedüs, 2021], enabling more nurse-led care models and providing ongoing professional development opportunities.

Significantly, nursing care extends beyond the immediate clinical setting. Mental health nurses are often involved in health promotion activities [Rice & Stead, 2008], advocating for patient rights and influencing policy at the system level. This broader role needs to be recognized and supported to fully utilize nurses' skills and influence.

SUMMARY OF THE RESEARCH

The evidence demonstrates the indispensable role of mental health nurses in providing high-quality care and improving patient outcomes across a variety of settings and populations. While the field has made significant strides, ongoing research and policy focus are

Given the increasing demand for mental health services and the finite nature of health care resources, greater emphasis on prevention and early intervention is warranted. Nurses are well-positioned to contribute to these efforts, given their roles in the community and their ability to build therapeutic relationships with patients [Delaney, 2017].

Further, it is necessary to take a comprehensive approach to workforce planning and development. Cometto, Buchan and Dussault [2020] emphasize the importance of aligning workforce strategies with broader health system goals and ensuring that education programmes adequately prepare mental health nurses for the evolving needs of the population.

Finally, it is essential to further investigate and address the disparities in mental health care access and outcomes. Unützer et al.'s [2020] research highlights how variations in care effectiveness may be associated with where care is received, emphasizing the importance of equitable care provision.

required to further develop this workforce, improve care delivery and ensure equitable access to mental health services. As the demand for mental health services continues to grow, mental health nurses will continue to be a crucial part of the solution.

CONCLUSION

Mental health nursing is both challenging and rewarding, demanding a specialized set of values, knowledge, skills and attributes. These guidelines published by ICN highlight the importance of offering holistic, person-centred care while upholding the highest standards of professional ethics and practice.

Mental health is as significant as physical health in determining the overall well-being of individuals and communities. These guidelines serve not only as a standard for nurses working in mental health, but also as an instrument to break the stigma associated with mental health conditions. The recommendations emphasize the critical nature of consensus on education, continuous professional development, interdisciplinary collaboration and personal self-care and recognition of the complex nature of mental health challenges. The dynamic nature of mental health care requires that these guidelines be regularly reviewed and updated to incorporate the latest evidence-based practices.

Adherence to these guidelines will enhance the professional practice of all mental health nurses and contribute to a world where mental health is recognized, understood and treated with the respect and urgency it deserves.

REFERENCES

Adam, S. and Juergensen, L. (2019) 'Toward critical thinking as a virtue: The case of mental health nursing education' *Nurse Education in Practice*. 38: pp. 138-144.

Ameel, M., et al. (2021) 'The Core Nursing Interventions in Adult Psychiatric Outpatient Care Identified by Nurses, a Delphi Study', *International journal of nursing knowledge*. 32(3): pp. 177-184.

Ameel, M., Kontio, R. and Välimäki, M. (2019) 'Interventions delivered by nurses in adult outpatient psychiatric care: An integrative review', *Journal of Psychiatric and Mental Health Nursing*. 26(9-10): pp. 301-322.

American Nurses Association (2015). *Nursing: Scope and Standards of Practice*. Silver Spring: ANA.

American Nurses Association (2022) *Psychiatric-Mental Health Nursing: Scope and Standards of Practice*. 3rd ed. Maryland: ANA.

American Psychiatric Nurses Association (2022) *About Psychiatric-Mental Health Nursing*. Available at: <https://www.apna.org/about-psychiatric-nursing/>. [Accessed 1 August 2023].

American Psychological Association (n.d.) *APA Dictionary of Psychology: Psychiatric Nursing*. Available at: <https://dictionary.apa.org/psychiatric-nursing>. [Accessed 14 April 2022].

Australian College of Mental Health Nurses (2013) *Scope of practice of Mental Health Nurses in Australia* Available at: https://researchoutput.csu.edu.au/ws/portalfiles/portal/21102912/9394240_Published_report_OA.pdf. [Accessed 9 May 2023].

Barraclough, F., Longman, J. and Barclay, L. (2016). 'Integration in a nurse practitioner-led mental health service in rural Australia: A Rural NP-Led Mental Health Service', *The Australian journal of rural health*. 24(2): pp. 144-150.

Beck, A.J., et al. (2020) 'The Distribution of Advanced Practice Nurses Within the Psychiatric Workforce' *Journal of the American Psychiatric Nurses Association*, 26(1): pp. 92-96.

Biering, P. (2019) 'Helpful approaches to older people experiencing mental health problems: a critical review of models of mental health care', *European journal of ageing*. 16(2): pp. 215-225.

Bjørlykhaug, K.I., et al. (2022) 'Social support and recovery from mental health problems: A scoping review', *Nordic social work research*. 12(5): pp. 666-697.

Brown, M., et al. (2021) 'Primary care and mental health: overview of integrated care models', *The Journal for Nurse Practitioners*. 17(1): pp. 10-14.

Bryant-Lukosius, D., et al. (2018) 'Policy and the integration of advanced practice nursing roles in Canada: Are we making progress?', in Goudreau, K.A. and Smolenski, M.A. *Health policy and advanced practice nursing, impact and implications*. Springer New York. pp. 357-374.

Byrne, A.-L., et al. (2020) 'Exploring the nurse navigator role: A thematic analysis', *Journal of Nursing Management*. 28(4): pp. 814-821.

- Canadian Association of Schools of Nursing and Canadian Federation of Mental Health Nurses (2015) *Entry-to-Practice Mental Health and Addiction Competencies for Undergraduate Nursing Education in Canada*.
- Carlyle, D., Crowe, M. and Deering, D. (2012) 'Models of care delivery in mental health nursing practice: a mixed method study' *Journal of Psychiatric and Mental Health Nursing*, 19(3): pp. 221-230.
- Chapman, S.A., et al. (2018) 'Utilization and Economic Contribution of Psychiatric Mental Health Nurse Practitioners in Public Behavioral Health Services'. *American journal of preventive medicine*. 54(6): pp. S243-S249.
- Cleary, M., et al. (2011) 'The views of mental health nurses on continuing professional development', *J Clin Nurs*. 20(23-24): pp. 3561-6.
- Clinton, M. and Hazelton, M. (2008) 'Scoping mental health nursing education' *Australian and New Zealand Journal of Mental Health Nursing*. 9(1): pp. 2-10.
- Collett, S., et al. (2022) 'Utilising a nurse navigator model of care to improve prisoner health care and reduce prisoner presentations to a tertiary emergency department', *Australasian Emergency Care*. 25(4): pp. 341-346.
- Cometto, G., Buchan, J. and Dussault, G. (2020) 'Developing the health workforce for universal health coverage'. *Bulletin of the World Health Organization*. 98(2): p. 109.
- Correll, C.U., et al (2022) 'Mortality in people with schizophrenia: a systematic review and meta-analysis of relative risk and aggravating or attenuating factors' *World Psychiatry*, 2022. 21(2): pp. 248-271. World Psychiatric Association.
- Davidson, L., et al. (2008) 'From "Double Trouble" to "Dual Recovery": Integrating Models of Recovery in Addiction and Mental Health' *Journal of dual diagnosis*. 4(3): pp. 273-290.
- Delaney, K.R. (2017) *Psychiatric Mental Health Nursing Advanced Practice Workforce: Capacity to Address Shortages of Mental Health Professionals*. *Psychiatr Serv*, 68(9): pp. 952-954.
- Delaney, K.R., Robinson K.M. and Chafetz, L. (2013) 'Development of integrated mental health care: Critical workforce competencies', *Nursing Outlook*. 61(6): pp. 384-391.
- Delaney, K.R., Shattell, M. and Johnson, M.E. (2017) 'Capturing the interpersonal process of psychiatric nurses: A model for engagement', *Archives of Psychiatric Nursing*. 31(6): pp. 634-640.
- Duffield, C., et al. (2009) 'Advanced nursing practice: a global perspective', *Collegian*, 2009. 16(2): pp. 55-62.
- Evans, C.A. and Kevern P. (2015) 'Liminality in preregistration mental health nurse education: A review of the literature', *Nurse Education in Practice*. 15(1): pp. 1-6.
- Finley, B.A. (2020) *Psychiatric Mental Health Nurse Practitioners Meeting Rural Mental Health Challenges*. *Journal of the American Psychiatric Nurses Association*, 2020. 26(1): pp. 97-101.
- Fortman, J.A. (2020). *Exploring the Barriers to Professional Nursing Specialty Certification in the Ambulatory Setting*. University of Mount Olive: United States - North Carolina. p. 71.
- Frank, J.R., et al. (2020) 'The role of accreditation in 21st century health professions education: report of an International Consensus Group' *BMC Med Educ*. 20(Suppl 1): p. 305.

- Gabrielsson, S., et al. (2020) 'Positioning Psychiatric and Mental Health Nursing as a Transformative Force in Health Care' *Issues in Mental Health Nursing*. 41(11): pp. 976–984.
- Harvey, C., et al. (2019) 'The evaluation of nurse navigators in chronic and complex care', *Journal of Advanced Nursing*. 75(8): pp. 1792–1804.
- Haskins, M., Hnatiuk, C. and Yoder, L. (2011) 'Medical-surgical nurses' perceived value of certification study'. *Medsurg nursing : official journal of the Academy of Medical-Surgical Nurses*, 2011. 20: pp. 71–7, 93.
- Hickey, J.V., et al. (2014) 'Credentialing: the need for a national research agenda' *Nursing Outlook*. 62(2): pp. 119–127.
- Higgins, A., Kilkku, N. and Kristofersson, G.K. (2022) *Advanced Practice in Mental Health Nursing: A European Perspective*. 1st ed. New York: Springer.
- Hurley, J., et al. (2022) 'Utilizing the mental health nursing workforce: A scoping review of mental health nursing clinical roles and identities' *International Journal of Mental Health Nursing*. 31(4): pp. 796–822.
- International Council of Nurses (2010) *Scope of Nursing Practice and Decision-Making Framework Toolkit*. ICN: Geneva. Available at: https://www.icn.ch/sites/default/files/inline-files/2010_ICN%20Scope%20of%20Nursing%20and%20Decision%20making%20Toolkit_eng.pdf.
- International Council of Nurses (2020a) *Guidelines on advanced practice nursing*. ICN: Geneva. Available at: <https://www.icn.ch/resources/publications-and-reports/guidelines-advanced-practice-nursing-2020>.
- International Council of Nurses (2020b) *Position Statement: Mental Health*. Available at: <https://www.icn.ch/what-we-do/position-statements>. [Accessed 10 October 2023].
- International Council of Nurses (2021a) *The ICN Code of Ethics for Nurses*. Available at: https://www.icn.ch/system/files/2021-10/ICN_Code-of-Ethics_EN_Web_0.pdf.
- International Council of Nurses (2021b) *Guidelines on prescriptive authority for nurses*. ICN: Geneva. Available at: <https://www.icn.ch/resources/publications-and-reports/guidelines-prescriptive-authority-nurses-2021>.
- Jacobs, E.P. and Mkhize S.W., (2021) 'Experiences of advanced psychiatric nurses regarding the need for prescriptive authority in KwaZulu-Natal' *Health SA*. 26: p. 1678.
- Jones, J.S. (2012) 'Has Anybody Seen My Old Friend Peplau? The Absence of Interpersonal Curricula in Programs of Nursing', *Archives of Psychiatric Nursing*, 26(3): pp. 167–168.
- Knapp, M. and Wong, G. (2020) 'Economics and mental health: the current scenario' *World Psychiatry*. 19(1): pp. 3–14. World Psychiatric Association.
- Koekkoek, B., et al. (2012) 'Interpersonal community psychiatric treatment for non-psychotic chronic patients and nurses in outpatient mental health care: a controlled pilot study on feasibility and effects', *International Journal of Nursing Studies* 49(5): pp. 549–559.
- Lamont, S., Stewart, C. and Chiarella, M. (2016) 'Documentation of capacity assessment and subsequent consent in patients identified with delirium' *Journal of Bioethical Inquiry*. 13: pp. 547–555.
- Leamy, M., et al. (2011) 'Conceptual framework for personal recovery in mental health: systematic review and narrative synthesis' *British journal of psychiatry*. 199(6): pp. 445–452.

Liu, N.H., et al (2017) 'Excess mortality in persons with severe mental disorders: a multi-level intervention framework and priorities for clinical practice, policy and research agendas' *World Psychiatry*. 16(1): pp. 30–40. World Psychiatric Association.

Luiggi-Hernández, J.G. (2020) *Latest UN Report Calls for Global Paradigm Shift in Mental Health Care* Available at: <https://www.madinamerica.com/2020/07/latest-un-report-calls-paradigm-shift-mental-health-care-globally/>. [Accessed 20 September 2023].

Malakouti, S.K., et al. (2016) 'A Comparative Study of Nurses as Case Manager and Telephone Follow-up on Clinical Outcomes of Patients with Severe Mental Illness', *Iran J Med Sci*. 41(1): pp. 19–27.

McMurray, A., et al. (2018) 'The primary health care nurse of the future: Preliminary evaluation of the Nurse Navigator role in integrated care' *Collegian*. 25(5): pp. 517–524.

Moyo, N., et al. (2020) 'What Are the Core Competencies of a Mental Health Nurse? Protocol for a Concept Mapping Study' *Nurs Rep*. 10(2): pp. 146–153.

Moyo, N., Jones, M. and Gray, R. (2022). 'What are the core competencies of a mental health nurse? A concept mapping study involving five stakeholder groups' *Int J Ment Health Nurs*. 31(4): pp. 933–951.

NHS England (2022). *The mental health nurse's handbook*. Available at: https://www.england.nhs.uk/wp-content/uploads/2022/10/B1011_Mental-Health-Nurses-Handbook_August-2023-v1.1-RCN-Endorsement.pdf. [Accessed 1 August 2023].

Nursing and Midwifery Board of Australia (2023) *Continuing professional development*. Available at: [https://www.nursingmidwiferyboard.gov.au/registration-standards/continuing-professional-development.aspx#:~:text=Continuing%20professional%20development%20\(CPD\)%20is,required%20throughout%20their%20professional%20lives.](https://www.nursingmidwiferyboard.gov.au/registration-standards/continuing-professional-development.aspx#:~:text=Continuing%20professional%20development%20(CPD)%20is,required%20throughout%20their%20professional%20lives.) [Accessed 1 September 2023]

Nursing and Midwifery Board of Ireland (2015) *Scope of Nursing and Midwifery Practice Framework*. Available at: <https://www.nmbi.ie/nmbi/media/NMBI/Publications/Scope-of-Nursing-Midwifery-Practice-Framework.pdf?ext=.pdf>. [Accessed 1 August 2023].

Office of the United Nations High Commissioner for Human Rights (1966). International Covenant of Economic, Social and Cultural Rights. Adopted 16 december 1966. Available at: <https://www.ohchr.org/en/instruments-mechanisms/instruments/international-covenant-economic-social-and-cultural-rights>.

Office of the United Nations High Commissioner for Human Rights (2006). Convention of the Rights of Persons with Disabilities. Adopted 12 December 2006. Available at: <https://www.ohchr.org/en/instruments-mechanisms/instruments/convention-rights-persons-disabilities>.

Office of the United Nations High Commissioner for Human Rights (2017) *World needs "revolution" in mental health care – UN rights expert*. Available at: <https://www.ohchr.org/EN/NewsEvents/Pages/DisplayNews.aspx?NewsID=21689>. [Accessed 3 March 2022].

Oh, S., et al. (2022) 'Trends in Participation in Medicare Among Psychiatrists and Psychiatric Mental Health Nurse Practitioners, 2013–2019'. *JAMA Network Open*. 5(7): pp. 5(7):e2224368..

Olsson, I. and Dahl, A.A. (2018) 'Almost half of patients experience full remission after treatment at a psychiatric clinic', *Sykepleien Forskning*. 13(72553).

O'Sullivan, B., et al. (2020) 'A Checklist for Implementing Rural Pathways to Train, Develop and Support Health Workers in Low and Middle-Income Countries'. *Front Med (Lausanne)*, 2020. 7: p. 594728.

- Pachkowski, K.S (2018) 'Ethical competence and psychiatric and mental health nursing education. Why? What? How?', *Journal of Psychiatric and Mental Health Nursing*, 25(1): pp. 60-66.
- Pearson, G.S., et al. (2015) 'Addressing Gaps in Mental Health Needs of Diverse, At-Risk, Underserved and Disenfranchised Populations: A Call for Nursing Action', *Archives of Psychiatric Nursing*. 29(1): pp. 14-18.
- Peplau, H.E. (1997) 'Peplau's Theory of Interpersonal Relations' *Nursing science quarterly*. 10(4): pp. 162-167.
- Pessoa Júnior, J.M., et al. (2017). *Nursing and the deinstitutionalization process in the mental health scope: integrative review*. *Revista de Pesquisa: Cuidado e Fundamental*, 2017. 9(3).
- Phoenix, B.J., Hurd, M. and Chapman, S.A. (2016) 'Experience of psychiatric mental health nurse practitioners in public mental health'. *Nursing administration quarterly*. 40(3): pp. 212-224.
- Pullen, R.L.J (2022) 'The importance of accreditation', *Nursing made Incredibly Easy*. 20(3): pp. 47-48.
- Puras, D. (2019) *Statement by Dainius Puras Special rapporteur on the right of everyone to the enjoyment of the highest attainable standard of physical and mental health*. 74th session of the General Assembly, New York. 29 October 2019. Available at: <https://www.ohchr.org/en/statements/2020/05/statement-dainius-purasspecial-rapporteur-right-everyone-enjoyment-highest>.
- Quemada-González, C., et al. (2022) 'Study protocol: a randomised, controlled trial of a nurse navigator program for the management of hepatitis C virus in patients with severe mental disorder'. *BMC Nursing* 21(1): p. 92.
- Rice, V.H. and Stead, L.F. (2008) 'Nursing interventions for smoking cessation'. *Cochrane database of systematic reviews*, 2008(1).
- Scheydt, S. and Hegedüs, A. (2021) 'Tasks and activities of advanced practice nurses in the psychiatric and mental health care context: a systematic review and thematic analysis' *International journal of nursing studies*, 118: p. 103759.
- Sharrock, J., Happell, B. and Jeong, S.Y.S (2022), *The impact of Mental Health Nurse Consultants on the care of general hospital patients experiencing concurrent mental health conditions: An integrative literature review*. *International journal of mental health nursing*. 31(4): pp. 772-795.
- Shrivastava, A. and Desousa, A., (2016) 'Resilience: A psychobiological construct for psychiatric disorders' *Indian Journal of Psychiatry*. 58: p. 38.
- Stewart, D. (2022) *Nurses - A Voice to Lead: Invest in nursing and respect rights to secure global health*. International Nurses Day report. ICN: Geneva. Available at: <https://www.icn.ch/resources/publications-and-reports/nurses-voice-lead-invest-nursing-and-respect-rights-secure>.
- Stewart, D., et al. (2022) *The global mental health nursing workforce: Time to prioritize and invest in mental health and well-being*. 2022, ICN: Geneva. Available at: <https://www.icn.ch/resources/publications-and-reports/global-mental-health-nursing-workforce>.
- Thornicroft, G., et al. (2022) 'The Lancet Commission on ending stigma and discrimination in mental health', *The Lancet*. 400(10361): pp. 1438-1480.

United Nations (1991) *Principles for the protection of persons with mental illness and the improvement of mental health care*. Available at: <https://www.ohchr.org/en/instruments-mechanisms/instruments/principles-protection-persons-mental-illness-and-improvement#:~:text=Principle%20I,-Fundamental%20freedoms%20and&text=All%20persons%20have%20the%20right,3>. [Accessed 1 August 2023].

United Nations (2015) *Sustainable Development Goals*. Available at: <https://sdgs.un.org/goals>. [Accessed 28 September 2023].

United Nations Department of Economic and Social Affairs (2015). *Transforming our world: the 2030 Agenda for Sustainable Development*. Available at: <https://sdgs.un.org/2030agenda>.

United Nations Educational, Scientific and Cultural Organization (2011) *International Standard Classification of education 2011*. Available at: <https://uis.unesco.org/sites/default/files/documents/international-standard-classification-of-education-iscd-2011-en.pdf>. [Accessed 1 August 2023].

United Nations Human Rights Council (2017) *Report of the Special Rapporteur on the right of everyone to the enjoyment of the highest attainable standard of physical and mental health*. UN Human Rights Council: New York.

Unützer, J., et al. (2020). 'Variation In The Effectiveness Of Collaborative Care For Depression: Does It Matter Where You Get Your Care? Study examines variations in outcomes for patients who received treatment for depression in primary care settings using the collaborative care model'. *Health Affairs*. 39(11): pp. 1943-1950.

Wand, T., et al. (2015) 'Evaluation of a nurse practitioner-led extended hours mental health liaison nurse service based in the emergency department'. *Australian health review*. 39(1): pp. 1-8.

Wand, T., et al (2016) 'Evaluating a new model of nurse-led emergency department mental health care in Australia; perspectives of key informants'. *International emergency nursing*. 24(1): pp. 16-21.

Willard, J (2015). *Structuring bioethics education: The question, the disciplines, and the integrative challenge*. *Ethics and Social Welfare*, 2015. 9(3): pp. 280-296.

World Health Organization (2016) *Regional Office for Europe - Integrated Care Models: an overview*, in *Working document, Copenhagen, Denmark*. 2016, WHO EURO: Copenhagen.

World Health Organization (2019) *mhGAP Intervention Guide*. Available at: <https://www.who.int/publications/i/item/9789241549790>.

World Health Organization (2021a) *Comprehensive mental health action plan 2013-2030*. WHO: Geneva.

World Health Organization (2021b) *Mental health atlas 2020*. WHO: Geneva.

World Health Organization (2021c) *Global strategic directions for nursing and midwifery 2021-2025*. WHO: Geneva.

World Health Organization (2022a) *Mental disorders*. Available from: <https://www.who.int/news-room/fact-sheets/detail/mental-disorders#:~:text=In%202019%2C%201%20in%20every,of%20the%20COVID%2D19%20pandemic>. [Accessed 7 August 2023].

World Health Organization (2022b) *World mental health report: transforming mental health for all*. 2022, WHO: Geneva.

World Health Organization (n.d.) *World Health Organization, Key terms and definitions in mental health*. Available at: <https://www.who.int/southeastasia/health-topics/mental-health/key-terms-and-definitions-in-mental-health#health>. [Accessed 1 September 2023].

World Health Organization and the Office of the United Nations High Commissioner for Human Rights (2023) *Mental health, human rights and legislation: guidance and practice*. WHO: Geneva. Available at: <https://www.who.int/publications/i/item/9789240080737>.

World Health Organization and United Nations Office on Drugs and Crime (2020) *International standards for the treatment of drug use disorders: revised edition incorporating results of field-testing*. Available at: https://www.unodc.org/documents/drug-prevention-and-treatment/UNODC-WHO_International_Standards_Treatment_Drug_Use_Disorders_April_2020.pdf. [Accessed 20 September 2023].

Wray, J. and Aleo, G. (2021) *The importance of Continuing professional development (CPD) for nurses*. Available at: <https://blogs.bmj.com/ebn/2021/11/14/the-importance-of-continuing-professional-development-cpd-for-nurses/>. [Accessed 9 February 2023].

Yang, B.K., Idzik, S. and Evans, P. (2021) 'Patterns of mental health service use among Medicaid-insured youths treated by nurse practitioners and physicians: A retrospective cohort study', *International journal of nursing studies*. 120:103956.

Ziguris, S.J. and Stuart, G.W. (2000) *A Meta-Analysis of the Effectiveness of Mental Health Case Management Over 20 Years*. *Psychiatric Services*, 51(11): pp. 1410-1421.



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