

# Mental Health Nursing Interventions for Anxiety and Depression: A Systematic Review of Evidence-Based Practices

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## Abstract

**Introduction:** Anxiety and depression are leading causes of disability worldwide, with increasing prevalence across all age groups. Mental health nurses (MHNs) play a critical role in delivering and supporting evidence-based interventions.

**Methods:** A systematic review of published literature (2010–2025) was conducted using PubMed, CINAHL, PsycINFO, and Cochrane databases. Studies included were guidelines, systematic reviews, and meta-analyses focusing on nurse-deliverable interventions for adults with anxiety and depression.

**Results:** A total of 42 studies and 3 clinical guidelines were included. The most effective interventions for anxiety and depression that MHNs can deliver include cognitive-behavioural therapy (CBT), behavioural activation (BA), collaborative care models, mindfulness-based cognitive therapy (MBCT), physical activity interventions, and digital CBT. Pharmacotherapy support and measurement-based care (MBC) were also identified as essential components of nursing practice.

**Conclusions:** Evidence suggests that MHNs can significantly improve patient outcomes when they implement structured, evidence-based interventions as part of stepped-care models. Integrating psychological, pharmacological, and lifestyle-based interventions within collaborative frameworks is critical for sustainable management of anxiety and depression.

**Keywords:** systematic review; mental health nursing; anxiety; depression; evidence-based practice; CBT

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## Introduction

An estimated 374 million people worldwide suffer from anxiety and depression disorders, which are the most common mental diseases<sup>1</sup>. They are linked to greater risk of comorbid chronic illnesses, substantial economic burdens, and functional impairment<sup>2</sup>. In mental health settings, nurses are frequently the initial point of contact and are essential for screening, early intervention, and continuing care<sup>3</sup>.

For anxiety and depression, stepped-care techniques are advised by international practice recommendations (NICE, WHO, APA)<sup>4-6</sup>. For mild cases, they include low-intensity psychosocial therapies; for moderate to severe presentations, these include higher-intensity psychotherapy or medication. MHNs are in a unique position to assist medication adherence, physical activity promotion, digital health treatments, and structured interventions including psychoeducation, CBT, BA, and relapse prevention programs within these frameworks<sup>7-9</sup>.

This systematic review synthesizes evidence on mental health nursing interventions for anxiety and depression to provide guidance for practice, training, and policy.

## Objective

To systematically review and summarize evidence-based interventions for anxiety and depression that are applicable to mental health nursing practice.

## Materials & Methods

**Design:** Systematic review.

**Databases searched:** PubMed, PsycINFO, CINAHL, Cochrane Library (2010–2025).

**Search terms:** “mental health nursing,” “nursing interventions,” “anxiety,” “depression,” “cognitive behavioural therapy,” “behavioural activation,” “collaborative care,” “mindfulness,” “digital CBT,” “exercise,” “measurement-based care.”

### Inclusion criteria:

- Systematic reviews, meta-analyses, RCTs, and clinical guidelines
- Interventions feasible for delivery or support by MHNs
- Adult populations with anxiety and/or depression

### Exclusion criteria:

- Pediatric or perinatal-only studies
- Case reports or narrative-only commentaries

**Selection process:** Titles/abstracts screened independently by two reviewers; full texts reviewed for eligibility.

**Data extraction:** Interventions, outcomes, effectiveness, and role of MHNs were recorded.

**Quality appraisal:** AMSTAR-2 tool used for systematic reviews; GRADE approach referenced where applicable.

## Results

### Study characteristics:

- 42 studies (three guidelines, 15 RCTs, and 24 systematic reviews/meta-analyses).
- Populations: individuals with mixed presentations, panic disorder, depression, or generalized anxiety disorder.
- Interventions centered on lifestyle changes, digital care, medication support, and psychological therapies.

### Main findings:

#### 1. Cognitive-Behavioural Therapy (CBT):

- Consistently effective across anxiety and depression.
- Nurse-delivered CBT modules showed comparable efficacy to psychologist-delivered care in some trials.<sup>9,10</sup>

#### 2. Behavioural Activation (BA):

- Effective and resource-efficient treatment for depression.
- Easily integrated into community nursing settings.<sup>11,12</sup>

#### 3. Collaborative Care:

- Strong evidence for improved depression outcomes.
- MHNs central as case managers coordinating care.<sup>13</sup>

#### 4. Pharmacotherapy Support:

- SSRIs and SNRIs recommended first-line.
- MHNs monitor adherence, side effects, and provide psychoeducation.<sup>14</sup>

#### 5. Mindfulness-Based Cognitive Therapy (MBCT):

- Effective in relapse prevention for recurrent depression.<sup>15</sup>

#### 6. Physical Activity:

- Aerobic exercise, yoga, and resistance training effective as adjuncts.<sup>16</sup>

## 7. **Digital CBT (iCBT):**

- Therapist-supported iCBT shown to be as effective as face-to-face CBT.<sup>17</sup>

## 8. **Measurement-Based Care (MBC):**

- Regular outcome tracking (PHQ-9, GAD-7) improves clinical outcomes and treatment adjustments.<sup>18</sup>

### **Discussion**

This comprehensive review found that MHNs are well-positioned to use evidence-based treatments for anxiety and depression at all levels of care. CBT and BA are flexible, scalable, and effective therapies that can be employed in both inpatient and community settings<sup>11-12</sup>. According to collaborative care models, nurses play a crucial role as case managers when integrating pharmaceutical and psychological therapy<sup>13</sup>.

Digital CBT provides a scalable explanation for resource-limited contexts and can be supervised by nurses to enhance adherence & engagement.<sup>17</sup> Nurses can use lifestyle counseling to incorporate physical activity interventions, which have added benefits in improving overall health outcomes<sup>16</sup>. Relapse avoidance via MBCT adds long-term sustainability to care<sup>15</sup>.

Measurement-based care is a useful and scientifically supported approach that MHNs can use to continuously monitor symptoms and modify therapies in order to maximize results.

**Strengths:** This review synthesizes high-quality evidence and guidelines, providing actionable strategies for MHNs.

**Limitations:** Limited studies from low- and middle-income countries; variability in nurse training and scope of practice across health systems.

### **Conclusions**

The role of mental health nurses in providing therapies for depression and anxiety is well supported by evidence. In nursing practice, CBT, BA, collaborative care, pharmacological support, exercise, digital CBT, and MBCT are all practical and beneficial. Global access to high-quality care may be improved, relapse rates can be decreased, and patient outcomes can be improved by implementing these within stepped-care and measurement-based frameworks.

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