

Nurse-Led Approaches to Managing Depression and Anxiety in Primary Care Settings

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ABSTRACT

Aim: To examine the role of nurse-led approaches in managing depression and anxiety within primary care settings. Depression and anxiety are common mental health disorders often underdiagnosed in primary care. Nurse-led approaches, which emphasize early identification, patient-centered care, and evidence-based interventions, play a critical role in addressing these challenges. Nurses use validated screening tools, provide education, and deliver therapeutic strategies such as behavioral activation and problem-solving therapy to improve patient outcomes. These approaches enhance access to care, reduce stigma, and promote cost-effective healthcare delivery. Despite challenges like limited training and stigma, nurse-led interventions are pivotal in integrating mental health care into primary care and improving patient well-being.

1. Introduction

Depression and anxiety are among the most prevalent mental health disorders globally, affecting millions of individuals across all age groups and significantly contributing to disability and reduced quality of life. In primary care settings, these conditions are frequently encountered but often underdiagnosed or undertreated due to various barriers, including stigma, lack of time, and limited access to mental health specialists. Patients presenting with depression and anxiety may initially report physical symptoms such as fatigue, headaches, or gastrointestinal complaints, making it challenging for primary care providers to identify the underlying

psychological distress. This highlights the critical need for a more integrated approach to mental health care, where nurses play a pivotal role in addressing these challenges (1).

Nurses are uniquely positioned to manage depression and anxiety in primary care due to their holistic approach, frequent patient interactions, and expertise in health promotion and education. Nurse-led interventions focus on early identification, patient-centered care, and evidence-based management strategies, often bridging the gap between physical and mental health care. These approaches are particularly valuable in primary care settings, where nurses can address mental health concerns during routine visits, reducing the need for specialized referrals and ensuring that patients receive timely support (2).

Early identification is a cornerstone of nurse-led approaches, with nurses using validated screening tools such as the Patient Health Questionnaire-9 (PHQ-9) and Generalized Anxiety Disorder-7 (GAD-7) to assess symptom severity and identify at-risk individuals. These tools allow nurses to proactively address mental health concerns, even when patients present with non-specific or somatic symptoms. Moreover, nurses excel in fostering open and nonjudgmental communication, creating a safe space for patients to discuss their emotional challenges (3).

In addition to identification and screening, nurse-led care incorporates evidence-based interventions such as behavioral activation, problem-solving therapy, and cognitive-behavioral techniques. These interventions empower patients to develop healthier coping mechanisms, engage in meaningful activities, and reframe negative thought patterns, addressing the root causes of their distress. Nurses also emphasize patient education, helping individuals understand the nature of depression and anxiety, the factors that influence these conditions, and the importance of lifestyle changes in promoting mental well-being (3).

The benefits of nurse-led approaches extend beyond individual patient outcomes. By increasing access to mental health care, particularly in underserved areas, nurses help reduce disparities and improve the efficiency of healthcare systems. Collaborative care models, where nurses coordinate with primary care providers and mental health specialists, further enhance the effectiveness of these interventions. Additionally, nurse-led care is cost-effective, reducing the financial burden on healthcare systems while delivering high-quality support (4).

Despite these advantages, challenges remain. Limited mental health training among nurses, persistent stigma surrounding mental illness, and the need for stronger interdisciplinary collaboration can hinder the implementation of nurse-led approaches. Addressing these barriers requires investment in education, culturally sensitive practices, and the integration of technology to support seamless communication and care delivery (4).

This review explores the critical role of nurses in managing depression and anxiety in primary care settings. It highlights the strategies and interventions used in nurse-led care, the impact on patient outcomes and healthcare systems, and the challenges and opportunities for advancing this approach. By examining the contributions of nurses, this discussion underscores the importance of integrating mental health care

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into primary care to address the growing burden of depression and anxiety effectively.

2. Review

1. The Role of Nurses in Managing Depression and Anxiety

1.1. Early Identification and Screening

Nurses are often the first point of contact for patients in primary care settings, making them ideally positioned to identify early signs of depression and anxiety. These mental health conditions frequently present with physical symptoms such as fatigue, headaches, or chronic pain, which can mask underlying psychological distress. Nurses employ validated tools like the Patient Health Questionnaire-9 (PHQ-9) for depression and the Generalized Anxiety Disorder-7 (GAD-7) scale to systematically screen patients and assess the severity of their symptoms (1).

Screening is not just a diagnostic tool but also a way to foster open conversations about mental health. Many patients, particularly those in underserved or stigmatized populations, may feel reluctant to discuss emotional struggles. By integrating mental health questions into routine check-ups, nurses create a non-threatening environment that encourages disclosure. For instance, a nurse might notice a patient reporting persistent fatigue and, upon further inquiry using a screening tool, identify underlying depressive symptoms. This proactive approach enables earlier intervention, reducing the likelihood of symptom escalation and long-term complications (2).

In addition, regular screening helps normalize mental health care within primary settings. When patients perceive mental health discussions as a standard part of healthcare, it reduces stigma and increases their willingness to seek help. Nurses play a critical role in conveying empathy and understanding during these interactions, making patients feel heard and supported.

1.2. Patient Education and Health Promotion

Patient education is a cornerstone of nurse-led mental health interventions. Nurses provide essential information about the nature of depression and anxiety, helping patients understand their symptoms, triggers, and the importance of treatment. This education empowers patients to take an active role in managing their conditions. For example, nurses may explain how disruptions in sleep patterns, dietary habits, or exercise routines can exacerbate anxiety and depressive symptoms and offer practical strategies to address these factors (3).

Education extends beyond the individual to involve families and caregivers, particularly in cases where stigma or cultural misconceptions about mental health exist. By fostering understanding among a patient's support network, nurses help build a more supportive environment for recovery. For instance, a nurse working with a patient from a community where mental health issues are heavily stigmatized

might engage family members in discussions about how to provide nonjudgmental support.

Nurses also promote lifestyle changes that can significantly enhance mental well-being. For patients with mild-to-moderate symptoms, non-pharmacological interventions such as mindfulness practices, regular physical activity, and balanced nutrition can be transformative. Nurses work collaboratively with patients to set realistic goals, such as incorporating 20 minutes of daily physical activity or reducing caffeine intake, and provide ongoing encouragement to sustain these changes.

1.3. Delivering Evidence-Based Interventions

Nurse-led interventions often incorporate evidence-based approaches such as behavioral activation, problem-solving therapy, and cognitive-behavioral techniques. These interventions are particularly effective for managing mild-to-moderate depression and anxiety within primary care settings.

Behavioral activation involves encouraging patients to engage in activities that bring pleasure or a sense of accomplishment, countering the withdrawal and inactivity often associated with depression. For example, a nurse might work with a patient to identify a simple, enjoyable activity—like gardening or walking—and develop a plan to integrate it into their daily routine. This approach not only improves mood but also helps patients rebuild a sense of purpose and control over their lives (4).

Problem-solving therapy is another valuable tool in nurse-led care. Patients with anxiety or depression often feel overwhelmed by daily challenges, which can perpetuate feelings of helplessness. Nurses guide patients in breaking down complex problems into manageable steps, identifying practical solutions, and building confidence in their ability to overcome obstacles. For instance, a patient struggling with financial stress might work with a nurse to prioritize expenses, seek community resources, and develop a budget, alleviating both the immediate issue and the associated emotional burden.

Some nurses receive training in delivering elements of cognitive-behavioral therapy (CBT), enabling them to help patients identify and challenge negative thought patterns. For example, a nurse might teach a patient how to recognize automatic negative thoughts like "I'm a failure" and replace them with balanced, constructive statements such as "I've faced challenges before and found solutions." These skills not only reduce symptom severity but also equip patients with long-term coping mechanisms (5).

2. The Impact of Nurse-Led Care

2.1. Improved Access to Mental Health Services

Nurse-led interventions significantly enhance access to mental health care, particularly in primary care settings where mental health specialists may be scarce. By integrating mental health support into routine primary care visits, nurses reduce

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the need for referrals and ensure that patients receive timely and comprehensive care. This is especially important in rural or underserved areas, where access to psychiatrists or therapists is limited (6).

Collaborative care models amplify this impact. In these models, nurses act as care coordinators, liaising between patients, primary care providers, and mental health specialists. For example, a nurse managing a patient with moderate depression might initiate behavioral activation therapy while coordinating with a physician to assess the need for antidepressant medications. This integrated approach ensures that patients receive holistic care tailored to their unique needs.

2.2. Enhanced Patient Outcomes

The effectiveness of nurse-led care in improving outcomes for patients with depression and anxiety is well-documented. Studies show that patients receiving nurse-led interventions experience significant reductions in symptom severity, improved treatment adherence, and higher satisfaction with care (7). For example, a meta-analysis of primary care-based mental health programs found that nurse-led approaches led to a 20% greater improvement in depressive symptoms compared to standard care.

Patients often cite the empathetic and supportive nature of nursing care as a key factor in their recovery. Nurses' ability to build trust and provide consistent follow-up fosters a therapeutic relationship that motivates patients to engage actively in their care. This is particularly important for individuals with anxiety, who may feel apprehensive about seeking help or adhering to treatment plans.

2.3. Cost-Effectiveness and Healthcare Efficiency

Nurse-led care models are cost-effective, reducing the financial burden on healthcare systems while improving patient outcomes. By addressing mental health needs early and effectively, nurses help prevent the escalation of symptoms that can lead to costly interventions, such as hospitalization or emergency care. For example, a patient with untreated anxiety who frequently visits the emergency department for somatic symptoms can benefit from nurse-led interventions that address the root cause of their distress, reducing unnecessary healthcare utilization (8).

Additionally, nurse-led approaches free up physician time, allowing primary care providers to focus on more complex cases. This division of labor not only improves efficiency but also ensures that patients with mild-to-moderate mental health conditions receive personalized and thorough care.

3. Challenges and Opportunities

3.1. Training and Competency Development

A significant challenge in implementing nurse-led mental health programs is

ensuring that nurses have the necessary training to deliver effective interventions. Many nurses lack formal education in mental health care, limiting their confidence and capability in addressing depression and anxiety. Professional development programs focusing on screening, counseling techniques, and evidence-based therapies are essential for equipping nurses with the skills to take on these expanded roles (9).

3.2. Stigma and Patient Engagement

Stigma remains a significant barrier to mental health care, even in primary care settings. Patients may feel reluctant to disclose their symptoms or pursue treatment due to fear of judgment or cultural misconceptions. Nurses must employ culturally sensitive and patient-centered approaches to build trust and reduce stigma. For example, using non-stigmatizing language and framing mental health care as an integral part of overall well-being can encourage patients to engage with treatment (10).

3.3. Integration with Multidisciplinary Teams

The success of nurse-led mental health interventions depends on seamless collaboration between nurses, physicians, and mental health specialists. Clear communication, shared decision-making, and integrated care plans are essential for ensuring continuity of care and optimizing outcomes. Technology, such as shared electronic health records, can facilitate this integration by enabling real-time information sharing and coordinated care delivery.

3. Conclusion

Nurse-led approaches are a cornerstone of effective mental health care in primary care settings, addressing the widespread need for accessible, patient-centered support for depression and anxiety. Through early identification, patient education, and evidence-based interventions, nurses play a pivotal role in improving outcomes for individuals struggling with these conditions. By increasing access to care, enhancing patient engagement, and promoting cost-effectiveness, nurse-led strategies contribute to more holistic and integrated primary care.

Despite challenges such as training needs and persistent stigma, ongoing investment in nursing education and multidisciplinary collaboration will further enhance the impact of these approaches. As trusted healthcare providers, nurses are uniquely positioned to bridge the gap between mental and physical health care, ensuring that patients with depression and anxiety receive the comprehensive support they need to thrive.

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