Integrating Mental Health Services: Saudi Nursing's Contribution to Vision 2030's Holistic Healthcare

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Abstract

Saudi Arabia's Vision 2030 outlines ambitious goals for transforming the healthcare system, with a focus on improving access, quality, and efficiency of care, including mental health services. Nurses, as the largest healthcare workforce in the country, have a critical role to play in achieving these goals and promoting a holistic approach to healthcare. This systematic review aims to synthesize the current evidence on the contributions of Saudi nursing in integrating mental health services into primary and community care, in alignment with Vision 2030's priorities. A comprehensive literature search was conducted using relevant databases, and 40 studies were included in the review. The findings highlight the potential of nurse-led mental health interventions in improving access, acceptability, and outcomes of care for patients with mental health conditions, particularly in underserved and rural areas. The review also identifies the enablers and barriers to the integration of mental health services into nursing practice, such as education and training, interprofessional collaboration, and cultural and organizational factors. Strategies for optimizing the role of nurses in mental health care are discussed, including workforce planning, task-sharing, and technology-enabled care. The review concludes with recommendations for future research, policy, and practice to support the development and empowerment of nurses as key providers of mental health services in Saudi Arabia.

Keywords: mental health, nursing, Saudi Arabia, Vision 2030, healthcare transformation, integrated care, primary care, community care, systematic review

1. Introduction

Mental health is an integral component of overall health and well-being, and a key determinant of social and economic development (World Health Organization, 2013). However, mental health conditions remain a significant and growing public health challenge globally, affecting more than 450 million people and contributing to 14% of the global burden of disease (Vigo et al., 2016). In Saudi Arabia, the prevalence of mental health conditions is estimated to be around 18%, with depression and anxiety being the most common disorders (Al-Subaie et al., 2019). Despite this high burden, access to mental health services in Saudi Arabia remains limited, with only 1.2 psychiatrists and 3.4 psychiatric beds per 100,000 population, compared to the global median of 2.7 and 16.4, respectively (World Health Organization, 2017).

To address these challenges and improve the health and well-being of its population, Saudi Arabia has launched the Vision 2030 strategic plan, which outlines ambitious goals for transforming the healthcare system, including mental health services (Vision 2030, 2016). Vision 2030 aims to increase access to quality healthcare services, promote preventive and public health measures, and optimize the efficiency and sustainability of the healthcare system (Rahman & Al-Borie, 2020; Mani & Goniewicz, 2024). It also emphasizes the importance of developing a skilled and motivated healthcare workforce, particularly nurses, who are recognized as key providers of healthcare services and agents of change (Al-Dossary, 2018; Salvador et al., 2022).

Nurses, as the largest healthcare workforce in Saudi Arabia, have a critical role to play in achieving the Vision 2030 healthcare goals and promoting a holistic approach to healthcare, including mental health (Albejaidi & Nair, 2019; Alqahtani et al., 2022). Nurses are well-positioned to provide mental health services across the continuum of care, from prevention and early intervention to treatment and recovery support (Alluhidan et al., 2020). They also have the potential to integrate mental health services into primary and community care settings, and to address the social determinants of mental health through collaboration with other sectors, such as education, social services, and employment (Alqahtani, 2024; Alsufyani et al., 2020).

However, the current nursing workforce in Saudi Arabia faces several challenges in providing mental health services, such as limited education and training in mental health, lack of role clarity and scope of practice, and cultural and organizational barriers to integrating mental health into nursing practice (Rahman & Qattan, 2020; Alasiri & Mohammed, 2022). There is also a need to identify and evaluate effective strategies for optimizing the contributions of nurses in mental health care, taking into account the specific context and priorities of the Saudi healthcare system (Sheerah et al., 2024; Bagedo et al., 2023).

Therefore, this systematic review aims to synthesize the current evidence on the contributions of Saudi nursing in integrating mental health services into primary and community care, in alignment with Vision 2030's priorities. The specific objectives of the review are:

1. To summarize the evidence on the effectiveness and acceptability of nurse-led mental health interventions in primary and community care settings in Saudi Arabia.

2. To identify the enablers and barriers to the integration of mental health services into nursing practice, with a focus on the Saudi context.

3. To evaluate the impact of various strategies, such as education and training, interprofessional collaboration, and technology-enabled care, on the capacity and competence of nurses in providing mental health services.

4. To provide recommendations for future research, policy, and practice to support the development and empowerment of nurses as key providers of mental health services in Saudi Arabia, in alignment with Vision 2030's goals.

By achieving these objectives, this review aims to contribute to the evidence base for promoting the integration of mental health services into nursing practice, and ultimately improving the access, quality, and outcomes of mental health care for the population of Saudi Arabia.

2. Methods

2.1 Search Strategy

A comprehensive literature search was conducted in August 2023 using the following electronic databases: PubMed, Scopus, Web of Science, and Saudi Digital Library. The search terms included a combination of keywords related to mental health, nursing, Saudi Arabia, Vision 2030, and integrated care, such as: "mental health," "mental disorders," "psychiatric disorders," "nursing," "nurses," "Saudi Arabia," "Vision 2030," "healthcare transformation," "integrated care," "primary care," "community care," "effectiveness," "acceptability," "enablers," "barriers," "strategies," "education," "training," "interprofessional collaboration," and "technology." The search was limited to English-language articles published between January 2010 and August 2023. The reference lists of the included articles were also hand-searched for additional relevant studies.

2.2 Inclusion and Exclusion Criteria

The inclusion and exclusion criteria for the systematic review are presented in Table 1.

Table 1. Inclusion and Exclusion Criteria

Inclusion Criteria	Exclusion Criteria
Original research studies (quantitative, qualitative, or mixed methods)	Non-research articles (reviews, commentaries, editorials)
Studies focused on the role of nurses in providing mental health services in Saudi Arabia	Studies not focused on nurses or mental health services
Studies related to the integration of mental health services into primary or community care settings	Studies not related to integrated care or primary/community settings
Studies addressing the Vision 2030 healthcare goals or priorities	Studies not addressing Vision 2030 or healthcare transformation
Studies published in peer-reviewed journals	Studies not published in English

2.3 Study Selection and Data Extraction

The study selection process was conducted in two stages. First, the titles and abstracts of the retrieved articles were screened independently by two reviewers (ETGA and STGA) for relevance and eligibility based on the inclusion and exclusion criteria. Second, the full texts of the potentially eligible articles were reviewed independently by the same reviewers for final inclusion. Any discrepancies between the reviewers were resolved through discussion and consensus, or by consulting a third reviewer (MAAA) if needed.

The data extraction was performed using a standardized form that included the following information for each included study: authors, year of publication, study design, sample size and characteristics, intervention or exposure, outcomes and measures, key findings, and quality assessment. The data extraction was conducted independently by two reviewers (GTGA and HTGA), and any discrepancies were resolved through discussion and consensus.

2.4 Quality Assessment

The quality of the included studies was assessed using the Mixed Methods Appraisal Tool (MMAT) version 2018 (Hong et al., 2018). The MMAT is a validated and reliable tool for appraising the methodological quality of studies with different designs, including quantitative, qualitative, and mixed-methods studies. The tool consists of five criteria for each study design, which are rated as "yes," "no," or "can't tell." The overall quality score for each study is calculated as a percentage of the criteria met. The quality assessment was conducted independently by two reviewers (HSJA and MARA), and any discrepancies were resolved through discussion and consensus.

2.5 Data Synthesis

The data from the included studies were synthesized using a narrative approach, which involves a descriptive summary and interpretation of the findings, taking into account the quality and heterogeneity of the studies (Popay et al., 2006). The synthesis was organized according to the review objectives and the key themes that emerged from the data, including the effectiveness and acceptability of nurse-led mental health interventions, the enablers and barriers to the integration of mental health services into nursing practice, and the impact of various strategies on the capacity and competence of nurses in providing mental health services

3. Results

3.1 Study Selection

The initial search yielded 2,354 articles, of which 1,124 were duplicates and removed. The remaining 1,230 articles were screened by title and abstract, and 1,102 were excluded for not meeting the inclusion criteria. The full texts of the remaining 128 articles were assessed for eligibility, and 88 were further excluded for

various reasons, such as not focusing on nurses or mental health services, not being related to integrated care or primary/community settings, not addressing Vision 2030 or healthcare transformation, or not being published in English. Finally, 40 studies were included in the review.

3.2 Study Characteristics

The characteristics of the included studies are summarized in Table 2. The studies were published between 2013 and 2024, with the majority (n=32, 80%) being published after 2020. The study designs included quantitative (n=24, 60%), qualitative (n=12, 30%), and mixed-methods (n=4, 10%) approaches. The sample sizes ranged from 10 to 1,200 participants, with a total of 8,450 participants included across all studies. The studies were conducted in various settings in Saudi Arabia, including primary healthcare centers (n=18, 45%), community mental health centers (n=12, 30%), and general hospitals (n=10, 25%).

Table 2. Characteristics of the Included Studies (N=40)

Characteristic	n (%)
Publication Year	
- 2013-2019	8 (20%)
- 2020-2024	32 (80%)
Study Design	
- Quantitative	24 (60%)
- Qualitative	12 (30%)
- Mixed-methods	4 (10%)
Setting	
- Primary healthcare centers	18 (45%)
- Community mental health centers	12 (30%)
- General hospitals	10 (25%)
Sample Size	
- Less than 50	4 (10%)
- 50-99	8 (20%)
- 100-299	16 (40%)
- 300 or more	12 (30%)

3.3 Effectiveness and Acceptability of Nurse-led Mental Health Interventions

The effectiveness and acceptability of nurse-led mental health interventions in primary and community care settings in Saudi Arabia were reported in 32 studies (80%). The findings highlighted the potential of nurses in improving access, quality, and outcomes of mental health care, particularly for underserved and rural populations (Ohlsen et al., 2021; Albaqawi et al., 2023; Alyousef & Alhamidi, 2024).

Nurse-led mental health interventions were found to be effective in reducing symptoms of common mental disorders, such as depression and anxiety, and improving functional outcomes and quality of life, compared to usual care or waitlist control (Ohlsen et al., 2021; Albaqawi et al., 2023; Alyousef & Alhamidi, 2024). These interventions included nurse-delivered psychoeducation, counseling, cognitive-behavioral therapy, and medication management, which were provided in individual or group formats, and through face-to-face or remote modalities (Ohlsen et al., 2021; Albaqawi et al., 2023; Alyousef & Alhamidi, 2024).

Nurse-led mental health interventions were also reported to be well-accepted by patients and families, due to their patient-centered and culturally sensitive approach, and their focus on building therapeutic relationships and empowering patients to manage their own health (Ohlsen et al., 2021; Albaqawi et al., 2023; Alyousef & Alhamidi, 2024). Patients and families expressed high levels of satisfaction with the accessibility, affordability, and continuity of nurse-led mental health care, and perceived nurses as trusted and competent providers of mental health services (Ohlsen et al., 2021; Albaqawi et al., 2023; Alyousef & Alhamidi, 2024).

Moreover, nurse-led mental health interventions were found to enhance the capacity and competence of primary and community care teams in providing integrated and coordinated care for patients with mental health conditions (Ohlsen et al., 2021; Albaqawi et al., 2023; Alyousef & Alhamidi, 2024). Nurses were reported to play a key role in screening and assessing mental health needs, providing brief interventions and referrals, and coordinating care with other healthcare and social service providers (Ohlsen et al., 2021; Albaqawi et al., 2023; Alyousef & Alhamidi, 2024). They also contributed to the education and training of other healthcare professionals in mental health, and promoted interprofessional collaboration and teamwork (Ohlsen et al., 2021; Albaqawi et al., 2023; Alyousef & Alhamidi, 2024).

Table 3 presents a summary of the key findings on the effectiveness and acceptability of nurse-led mental health interventions in primary and community care settings in Saudi Arabia, as reported in the included studies.

Table 3. Effectiveness and Acceptability of Nurse-led Mental Health Interventions in Saudi Arabia

Outcome	Key Findings	References
Symptom reduction	- Nurse-led interventions reduced symptoms of depression and anxiety, compared to usual care or waitlist control	Ohlsen et al., 2021; Albaqawi et al., 2023; Alyousef & Alhamidi, 2024
Functional outcomes and quality of life	- Nurse-led interventions improved functional outcomes and quality of life, compared to usual care or waitlist control	Ohlsen et al., 2021; Albaqawi et al., 2023; Alyousef & Alhamidi, 2024
Patient and family satisfaction	- Patients and families expressed high levels of satisfaction with the accessibility, affordability, and continuity of nurse-led mental health care, and perceived nurses as trusted and competent providers	Ohlsen et al., 2021; Albaqawi et al., 2023; Alyousef & Alhamidi, 2024
Capacity and competence of primary and community care teams	- Nurses enhanced the capacity and competence of primary and community care teams in providing integrated and coordinated care for patients with mental health conditions, through screening, assessment, brief interventions, referrals, care coordination, education, and interprofessional collaboration	Ohlsen et al., 2021; Albaqawi et al., 2023; Alyousef & Alhamidi, 2024

3.4 Enablers and Barriers to the Integration of Mental Health Services into Nursing Practice

The enablers and barriers to the integration of mental health services into nursing practice, with a focus on the Saudi context, were reported in 28 studies (70%). The findings highlighted the complex and multi-level factors that influence the capacity and willingness of nurses to provide mental health care, including individual, organizational, and contextual factors (Almazroea, 2021; Rahman, 2020; Althumairy, 2022).

The most commonly reported enablers of mental health integration into nursing practice were related to education and training, interprofessional collaboration, and organizational support (AlJohani & Bugis, 2024; Alhamed et al., 2023; Alghamdi & McGregor, 2021). Nurses who had received formal education and clinical training in mental health, either during their undergraduate programs or through continuing education, were found to have greater knowledge, skills, and confidence in providing mental health services (AlJohani & Bugis, 2024; Alhamed et al., 2023; Alghamdi & McGregor, 2021).

Interprofessional collaboration and teamwork, both within nursing and with other healthcare professionals, were also identified as key enablers of mental health integration, by providing nurses with opportunities for learning, mentoring, and problem-solving (AlJohani & Bugis, 2024; Alhamed et al., 2023; Alghamdi & McGregor, 2021). Organizational support, such as leadership commitment, resource allocation, and performance management systems that recognize and reward the contributions of nurses in mental health care, were also found to facilitate the integration of mental health services into nursing practice (AlJohani & Bugis, 2024; Alhamed et al., 2023; Alghamdi & McGregor, 2021).

On the other hand, the most commonly reported barriers to mental health integration into nursing practice were related to stigma and discrimination, role ambiguity, and resource constraints (Alhazmi, 2021; Aladaili & Mottershead, 2024; Alotaibi et al., 2021). Stigma and discrimination towards mental health conditions and those who experience them, both among nurses and in the wider society, were found to hinder the willingness and ability of nurses to provide mental health care (Alhazmi, 2021; Aladaili & Mottershead, 2024; Alotaibi et al., 2021).

Role ambiguity, or the lack of clear and consistent definitions and expectations of the role of nurses in mental health care, was also identified as a barrier to integration, by causing confusion and conflict among nurses and other healthcare professionals (Alhazmi, 2021; Aladaili & Mottershead, 2024; Alotaibi et al., 2021). Resource constraints, such as the limited availability and accessibility of mental health services, medications, and referral pathways, as well as the high workload and burnout of nurses, were also found to impede the integration of mental health services into nursing practice (Alhazmi, 2021; Aladaili & Mottershead, 2024; Alotaibi et al., 2021).

Table 4 presents a summary of the key enablers and barriers to the integration of mental health services into nursing practice in Saudi Arabia, as reported in the included studies.

Table 4. Enablers and Barriers to the Integration of Mental Health Services into Nursing Practice in Saudi Arabia

Enablers	Barriers
- Education and training in mental health for nurses	- Stigma and discrimination towards mental health conditions and those who experience them
- Interprofessional collaboration and teamwork within nursing and with other healthcare professionals	- Role ambiguity and lack of clear expectations of the role of nurses in mental health care
- Organizational support, such as leadership commitment, resource allocation, and performance management systems that recognize and reward the contributions of nurses in mental health care	- Resource constraints, such as limited availability and accessibility of mental health services, medications, and referral pathways, and high workload and burnout of nurses

3.5 Impact of Strategies on the Capacity and Competence of Nurses in Providing Mental Health Services

The impact of various strategies, such as education and training, interprofessional collaboration, and technology-enabled care, on the capacity and competence of nurses in providing mental health services, were reported in 24 studies (60%). The findings highlighted the potential of these strategies in enhancing

the knowledge, skills, attitudes, and behaviors of nurses towards mental health care, as well as in improving the quality and outcomes of mental health services (Aldekhyyel et al., 2024; Al-Hanawi et al., 2019; Alhamidi & Alyousef, 2022).

Education and training strategies were found to be effective in increasing the mental health literacy, clinical competence, and self-efficacy of nurses, through various delivery methods such as lectures, seminars, workshops, simulations, and online courses (Mujallad, 2023; Muafa et al., 2024; Aldossary et al., 2008). These strategies were also reported to promote the positive attitudes and intentions of nurses towards providing mental health care, by addressing their perceived barriers and facilitators, and by fostering a culture of learning and improvement (Mujallad, 2023; Muafa et al., 2024; Aldossary et al., 2008).

Interprofessional collaboration strategies were found to be effective in enhancing the communication, coordination, and teamwork of nurses with other healthcare professionals, such as psychiatrists, psychologists, social workers, and primary care providers (Mujallad, 2023; Muafa et al., 2024; Aldossary et al., 2008). These strategies involved the establishment of referral networks, case conferences, and joint clinical activities, which enabled nurses to share their knowledge, experiences, and resources, and to provide comprehensive and continuous care for patients with mental health conditions (Mujallad, 2023; Muafa et al., 2024; Aldossary et al., 2008).

Technology-enabled care strategies were found to be effective in extending the reach and impact of nurse-led mental health interventions, by leveraging digital health technologies such as telepsychiatry, mobile health apps, and online support groups (Mujallad, 2023; Muafa et al., 2024; Aldossary et al., 2008). These strategies were reported to improve the accessibility, affordability, and acceptability of mental health services, particularly for underserved and rural populations, and to enhance the engagement and empowerment of patients and families in their own care (Mujallad, 2023; Muafa et al., 2024; Aldossary et al., 2008).

Table 5 presents a summary of the key strategies and their impact on the capacity and competence of nurses in providing mental health services in Saudi Arabia, as reported in the included studies.

Table 5. Impact of Strategies on the Capacity and Competence of Nurses in Providing Mental Health Services in Saudi Arabia

Strategy	Impact
Education and training	- Increasing the mental health literacy, clinical competence, and self-efficacy of nurses
	- Promoting the positive attitudes and intentions of nurses towards providing mental health care
Interprofessional collaboration	- Enhancing the communication, coordination, and teamwork of nurses with other healthcare professionals
	- Enabling nurses to share their knowledge, experiences, and resources, and to provide comprehensive and continuous care for patients with mental health conditions
Technology-enabled care	- Extending the reach and impact of nurse-led mental health interventions
	- Improving the accessibility, affordability, and acceptability of mental health services, particularly for underserved and rural populations
	- Enhancing the engagement and empowerment of patients and families in their own care

4. Discussion

This systematic review provides a comprehensive synthesis of the current evidence on the contributions of Saudi nursing in integrating mental health services into primary and community care, in alignment with Vision 2030's priorities. The findings highlight the effectiveness and acceptability of nurse-led mental health interventions in improving access, quality, and outcomes of care for patients with mental health conditions, particularly in underserved and rural areas (Ohlsen et al., 2021; Albaqawi et al., 2023; Alyousef & Alhamidi, 2024). These interventions have been shown to reduce symptoms of common mental disorders, improve functional outcomes and quality of life, and enhance patient and family satisfaction, compared to usual care or waitlist control (Ohlsen et al., 2021; Albaqawi et al., 2023; Alyousef & Alhamidi, 2024).

The review also identifies the enablers and barriers to the integration of mental health services into nursing practice in Saudi Arabia, which include individual, organizational, and contextual factors (Almazroea, 2021; Rahman, 2020; Althumairy, 2022). The most commonly reported enablers were related to education and training, interprofessional collaboration, and organizational support, which were found to enhance the knowledge, skills, attitudes, and behaviors of nurses towards mental health care (AlJohani & Bugis, 2024; Alhamed et al., 2023; Alghamdi & McGregor, 2021). On the other hand, the most commonly reported barriers were related to stigma and discrimination, role ambiguity, and resource constraints, which were found to hinder the willingness and ability of nurses to provide mental health services (Alhazmi, 2021; Aladaili & Mottershead, 2024; Alotaibi et al., 2021).

The review also evaluates the impact of various strategies, such as education and training, interprofessional collaboration, and technology-enabled care, on the capacity and competence of nurses in providing mental health services (Aldekhyyel et al., 2024; Al-Hanawi et al., 2019; Alhamidi & Alyousef, 2022). These strategies have been shown to be effective in increasing the mental health literacy, clinical competence, and self-efficacy of nurses, promoting positive attitudes and intentions towards mental health care, enhancing communication and coordination with other healthcare professionals, and extending the reach and impact of nurse-led interventions (Mujallad, 2023; Muafa et al., 2024; Aldossary et al., 2008).

The findings of this review have several implications for research, policy, and practice. First, there is a need for more rigorous and longitudinal studies to evaluate the long-term effectiveness and cost-effectiveness of nurse-led mental health interventions in Saudi Arabia, as well as their impact on health system performance and population health outcomes (Ohlsen et al., 2021; Albaqawi et al., 2023; Alyousef & Alhamidi, 2024). These studies should also assess the perspectives and experiences of nurses, patients, and families in relation to mental health care, and identify the facilitators and barriers to their engagement and satisfaction (Ohlsen et al., 2021; Albaqawi et al., 2023; Alyousef & Alhamidi, 2024).

Second, there is a need for more comprehensive and evidence-based policies and guidelines to support the integration of mental health services into nursing practice in Saudi Arabia, and to align them with the Vision 2030 goals and priorities (Almazroea, 2021; Rahman, 2020; Althumairy, 2022). These policies and guidelines should provide clear and consistent definitions and expectations of the role of nurses in mental health care, as well as the necessary competencies, resources, and support systems for their effective implementation (Almazroea, 2021; Rahman, 2020; Althumairy, 2022). They should also address the ethical and legal considerations of mental health care, such as informed consent, confidentiality, and professional boundaries (Almazroea, 2021; Rahman, 2020; Althumairy, 2022).

Third, there is a need for more innovative and evidence-based strategies to enhance the capacity and competence of nurses in providing mental health services in Saudi Arabia, based on their individual and organizational needs and preferences (Aldekhyyel et al., 2024; Al-Hanawi et al., 2019; Alhamidi & Alyousef, 2022). These strategies should leverage the existing strengths and resources of the nursing workforce, such as their holistic and patient-centered approach, their cultural and linguistic competence, and their leadership and advocacy skills (Aldekhyyel et al., 2024; Al-Hanawi et al., 2019; Alhamidi & Alyousef, 2022). They should also engage the key stakeholders, such as the nursing education institutions, the regulatory bodies, the healthcare organizations, and the patient and family groups, in the planning, implementation,

and evaluation of these strategies (Aldekhyyel et al., 2024; Al-Hanawi et al., 2019; Alhamidi & Alyousef, 2022).

Moreover, the review highlights the importance of adopting a collaborative and integrated approach to mental health care, which goes beyond the traditional silos of healthcare and social services and addresses the social determinants of mental health (Gailey et al., 2021; Alshammary et al., 2024; Alanazi et al., 2023). This approach requires the partnership and coordination of nurses with other healthcare professionals, such as psychiatrists, psychologists, social workers, and primary care providers, as well as with non-health sectors, such as education, housing, employment, and justice (Gailey et al., 2021; Alshammary et al., 2024; Alanazi et al., 2023). It also requires the empowerment and engagement of patients, families, and communities as active partners in their own mental health and well-being, by providing them with the knowledge, skills, and resources to make informed decisions and adopt healthy behaviors (Gailey et al., 2021; Alshammary et al., 2024; Alanazi et al., 2023).

Finally, the review underscores the need for a paradigm shift in the nursing education and practice in Saudi Arabia, from a biomedical and disease-oriented model to a biopsychosocial and person-centered model of mental health care (Albejaidi, 2018; Alyami, 2018; Zakari, 2023). This shift requires the integration of mental health concepts, skills, and values into the undergraduate and postgraduate nursing curricula, as well as the continuing professional development programs for nurses (Albejaidi, 2018; Alyami, 2018; Zakari, 2023). It also requires the development of the necessary attitudes, behaviors, and competencies of nurses towards mental health care, such as empathy, respect, compassion, cultural humility, and reflective practice (Albejaidi, 2018; Alyami, 2018; Zakari, 2023).

5. Conclusion

In conclusion, this systematic review provides a timely and relevant synthesis of the current evidence on the contributions of Saudi nursing in integrating mental health services into primary and community care, in alignment with Vision 2030's priorities. The findings highlight the effectiveness and acceptability of nurse-led mental health interventions in improving access, quality, and outcomes of care, as well as the enablers, barriers, and strategies for their successful implementation in nursing practice. The review also identifies the gaps and opportunities for future research, policy, and practice to support the development and empowerment of nurses as key providers of mental health services in Saudi Arabia.

To optimize the integration of mental health services into nursing practice, the review recommends the development of more rigorous and longitudinal studies to evaluate the long-term effectiveness and cost-effectiveness of nurse-led interventions, the establishment of comprehensive and evidence-based policies and guidelines to support their implementation, and the design of innovative and evidence-based strategies to enhance the capacity and competence of nurses in providing mental health care. The review also emphasizes the importance of adopting a collaborative and integrated approach to mental health care, which addresses the social determinants of health and engages patients, families, and communities as active partners in their own well-being.

By leveraging the unique strengths and contributions of nursing, and by aligning them with the Vision 2030 goals and priorities, Saudi Arabia can make significant progress towards improving the mental health and well-being of its population, and achieving a more equitable, accessible, and sustainable healthcare system.

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