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Article on integrating mindfulness and cultural competency in psychiatric nursing: Providing culturally sensitive care

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Abstract

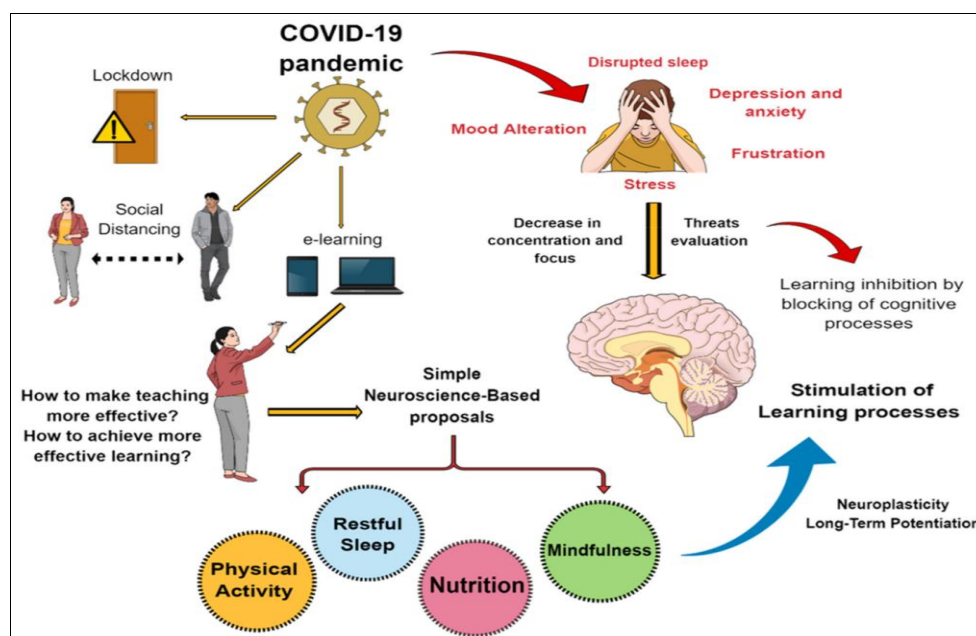
Mindfulness has its roots in Eastern meditative traditions, particularly Buddhism, but has been secularized and adapted into psychological interventions such as Mindfulness-Based Stress Reduction (MBSR) by Jon Kabat-Zinn. Clinical Relevance and Statistical Support revealed that numerous studies support the integration of mindfulness in mental health settings. A meta-analysis by Khoury *et al.* (2013) [1], reviewing 209 studies, found moderate to large effect sizes for anxiety ($d = 0.63$), depression ($d = 0.59$), and stress ($d = 0.61$). In clinical settings, psychiatric nurses who underwent an 8-week MBSR program reported a 30% reduction in burnout and significant improvements in job satisfaction (Burton *et al.*, 2017) [2]. The word “culture” refers to integrated patterns of human behaviors, including norms, traditions, and values that affect the thinking and behavior of members of particular groups. Cultural competence describes the ability to effectively interact with people belonging to different cultures. The importance of cultural competence in nursing focuses on health equity through patient-centered care, which requires seeing each patient as a unique person. Cultural competency is a vital skill in psychiatric nursing.

Keywords: Mindfulness, cultural competence, non-judgmental mindset

Introduction

In the complex and emotionally charged environment of psychiatric nursing, professionals often face high levels of stress, burnout, and emotional exhaustion. At the same time, patients with mental health disorders benefit from therapeutic approaches that enhance awareness, emotional regulation, and stress management.

Mindfulness, defined as the non-judgmental awareness of the present moment, has emerged as a valuable intervention in psychiatric care.



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Theoretical Foundations of Mindfulness in Psychiatry

Mindfulness has its roots in Eastern meditative traditions, particularly Buddhism, but has been secularized and adapted into psychological interventions such as Mindfulness-Based Stress Reduction (MBSR) by Jon Kabat-Zinn and Mindfulness-Based Cognitive Therapy (MBCT). These approaches have been scientifically validated for use in treating depression, anxiety, PTSD, and even psychosis. In psychiatric nursing, these tools offer a structured way to manage emotional distress for both nurses and patients. Clinical Relevance and Statistical Support revealed that numerous studies support the integration of mindfulness in mental health settings. A meta-analysis by Khoury *et al.* (2013) ^[1], reviewing 209 studies, found moderate to large effect sizes for anxiety (d = 0.63), depression (d = 0.59), and stress (d = 0.61). In clinical settings, psychiatric nurses who

underwent an 8-week MBSR program reported a 30% reduction in burnout and significant improvements in job satisfaction (Burton *et al.*, 2017) ^[2]. Mindfulness has also shown promise in reducing psychotic distress, with Chadwick *et al.* (2009) ^[3] reporting a 37% decrease in distress related to auditory hallucinations.

Mental Health Outcome	Effect of Mindfulness	Study Reference
Anxiety & Depression	~30–50% symptom reduction	Khoury <i>et al.</i> , 2013 ^[1]
Stress Reduction in Nurses	30% ↓ in burnout after MBSR	Burton <i>et al.</i> , 2017 ^[2]
Psychotic Symptoms	↓ 37% distress from hallucinations	Chadwick <i>et al.</i> , 2009 ^[3]

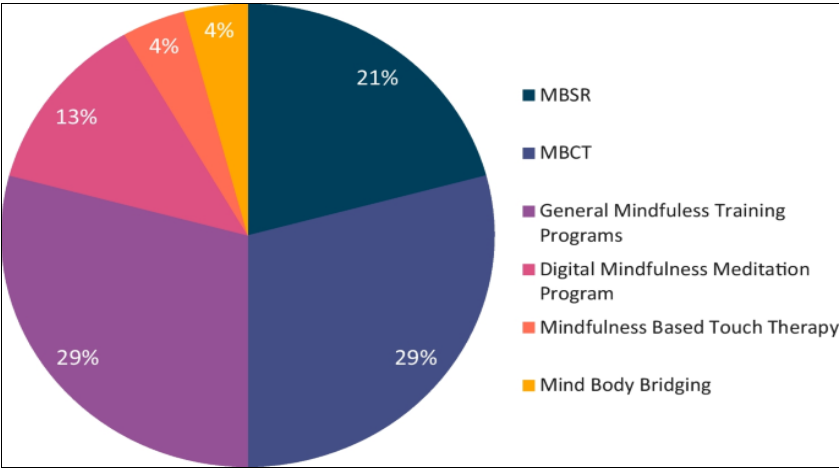


Fig 1: Mindfulness-Based Strategies for Improving Sleep in People with Psychiatric Disorders

Benefits to Psychiatric Nursing Practice

Integrating mindfulness improves:

Therapeutic relationships, by fostering presence and empathy.

Nurse well-being, by mitigating stress and emotional exhaustion.

Patient outcomes, including reduced symptoms and improved emotional regulation.

Clinical decision-making, by improving attention and reducing cognitive reactivity.

Implementation in Practice: Practical strategies for integrating mindfulness into psychiatric nursing include:

- 1. Introducing short mindfulness exercises during shift handovers or staff meetings.
- 2. Encouraging nurses to guide patients in simple breathing or grounding techniques.
- 3. Embedding mindfulness training into nursing education and continuing professional development.

- 4. Using validated tools like the Mindful Attention Awareness Scale (MAAS) or the Five Facet Mindfulness Questionnaire (FFMQ) to assess outcomes.

Cultural Competency in Psychiatric Nursing: Providing Culturally Sensitive Care: The word “culture” refers to integrated patterns of human behaviors, including norms, traditions, and values that affect the thinking and behavior of members of particular groups. Cultural competence describes the ability to effectively interact with people belonging to different cultures. The importance of cultural competence in nursing focuses on health equity through patient-centered care, which requires seeing each patient as a unique person. Cultural competency is a vital skill in psychiatric nursing. It refers to the ability of healthcare professionals to deliver care that respects the diverse beliefs, values, behaviors, and needs of patients from various cultural backgrounds. In psychiatric settings where communication, belief systems, and stigma heavily influence mental health culturally sensitive care is essential for accurate diagnosis, effective treatment, and strong therapeutic alliances.

Cultural Competency = Cultural Awareness + Knowledge + Skills + Attitude

Component	Description
Awareness	Recognizing personal biases and prejudices
Knowledge	Understanding cultural differences in mental health beliefs and practices
Skills	Communicating effectively across cultures
Attitude	Showing openness, respect, and a nonjudgmental mindset

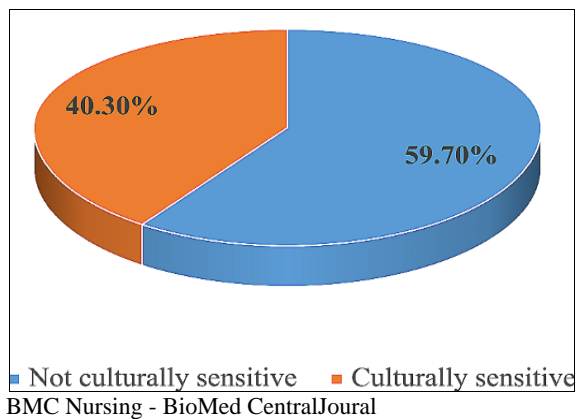


Fig 2: Cultural sensitivity of nursing

Cultural sensitivity and associated factors among nurses in southwest Ethiopia: A cross-sectional study

In an increasingly diverse global society, cultural competency has become an essential aspect of psychiatric nursing. It refers to the ability of healthcare providers to understand, respect, and effectively respond to the cultural and linguistic needs of patients from varied backgrounds. In psychiatric settings, where perceptions of mental illness, coping mechanisms, and help-seeking behaviors are deeply influenced by cultural norms, culturally sensitive care is critical. For instance, in some cultures, mental health issues are expressed through physical symptoms like fatigue or pain, rather than emotional expressions such as sadness or anxiety. Without cultural awareness, such presentations may be misdiagnosed or overlooked entirely. Additionally, cultural beliefs about stigma, family roles, traditional healing practices, and spiritual understandings can significantly affect a patient's engagement with mental health services. Psychiatric nurses must therefore approach care with openness, humility, and a willingness to learn from each patient's unique worldview. Effective culturally competent care involves using respectful communication, avoiding stereotypes, incorporating interpreters when necessary, and applying culturally responsive assessment tools. Models such as Campinha-Bacote's model of cultural competence or Leininger's transcultural nursing theory offer frameworks to guide practice. Importantly, culturally competent care also supports ethical principles such as autonomy, equity, and respect for persons. By providing culturally sensitive psychiatric care, nurses not only improve patient outcomes and satisfaction but also promote inclusivity, reduce disparities, and strengthen the therapeutic alliance. Ultimately, cultural competency in psychiatric nursing is not a static achievement but an ongoing process of learning, reflection, and adaptation.

Taking Steps to Improve Cultural Competence

1. Beginning in the mid-1980s, health officials began developing resources and guidelines to improve culturally competent nursing care:
2. The Heckler Report, also called the Report on Black and Minority Health, was released in 1985 to mobilize elimination of health disparities.
3. The federal Office of Minority Health was established in 1986 to implement the Heckler Report.
4. The Healthy People 2010 agenda, which includes the goal of eliminating health disparities, released in 2000 with an update in 2010.

5. National CLAS Standards, a 2000 federal report outlining culturally and linguistically appropriate services (CLAS) in health care, was updated in 2013.
6. LEP Guidance, issued in 2000 and in 2003, addresses working with people with limited English proficiency (LEP).
7. CLAS in Nursing launched in 2024 to help nurses improve quality of care by understanding, respecting, and responding to a patient's experiences, values, and beliefs.
8. National Institute on Minority Health and Health Disparities: Part of the National Institutes of Health (NIH, this institute leads and supports scientific research to improve minority health and eliminate health disparities.

While nursing education curriculums do focus on health disparities prevalent in specific cultures and the importance of culturally competent care, Norman believes that further steps can be taken.

Conclusion

The integration of mindfulness in psychiatric nursing is both a scientifically supported and practically beneficial approach. It offers a powerful means of enhancing nurse resilience, improving patient care, and fostering therapeutic engagement. With appropriate training, ethical awareness, and institutional support, mindfulness can become a standard component of holistic psychiatric nursing practice. Cultural competency in psychiatric nursing is not optional it's essential. Mental illness is universally present but culturally shaped. Nurses must commit to ongoing learning, self-reflection, and inclusive care practices to ensure all patients feel seen, heard, and understood.

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