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# Understanding the Perceptions of Mental Health Nursing Specialists in KSA Regarding the Use of Standardized Diagnostic Tools in Mental Health Care Settings: A Qualitative Case Study

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## ABSTRACT

**Purpose:** This qualitative case study aimed to understand the perceptions of mental health nursing specialists in the Kingdom of Saudi Arabia (KSA) regarding the use of standardized diagnostic tools in mental health care settings.
**Methods:** Semi-structured interviews were conducted with a purposive sample of six mental health nursing specialists from two healthcare facilities in KSA. Thematic analysis was used to identify key themes in the interview data.
**Findings:** Four main themes emerged: (1) perceived benefits of standardized diagnostic tools, (2) challenges in implementing standardized tools, (3) the importance of training and education, and (4) the need for culturally-adapted tools. Participants recognized the potential of standardized tools to improve diagnostic accuracy and treatment planning. However, they highlighted barriers such as time constraints, language and cultural differences, and lack of training.
**Conclusion:** Mental health nursing specialists in KSA perceive both benefits and challenges in using standardized diagnostic tools. Culturally-adapted tools, adequate training, and addressing implementation barriers are needed to optimize the use of these tools in KSA mental health settings.
*Keywords:* mental health nursing, standardized diagnostic tools, qualitative research, Saudi Arabia

### Introduction

Mental disorders are a significant global health burden, affecting individuals across all world regions (World Health Organization, 2022). Accurate diagnosis is crucial for providing appropriate treatment and improving patient outcomes. However, mental health diagnosis often relies on subjective clinical judgment, which can lead to

variability and potential inaccuracies (Allsopp et al., 2019). Standardized diagnostic tools offer a more systematic approach, with the potential to enhance reliability and validity of psychiatric diagnoses (Nordgaard et al., 2012).

In the Kingdom of Saudi Arabia (KSA), mental disorders are prevalent, with a recent study estimating that 34% of the adult population meets diagnostic criteria for at least one psychiatric disorder (Al-Subaie et al., 2020). The Saudi Ministry of Health has emphasized the importance of standardizing mental health services to improve quality of care (Koenig et al., 2014). However, little is known about the perspectives of Saudi mental health professionals regarding the use of standardized diagnostic tools.

Nurses play an integral role in mental health assessment and treatment in KSA (Ismail, 2015). Understanding the perceptions of mental health nursing specialists is essential for identifying facilitators and barriers to implementing standardized diagnostic practices. Therefore, this qualitative case study aimed to explore the perceptions of mental health nursing specialists in KSA regarding the use of standardized diagnostic tools in mental health care settings.

## Literature Review

### Standardized Diagnostic Tools in Mental Health

Standardized diagnostic tools are structured instruments designed to systematically assess psychiatric symptoms and guide diagnostic decision-making. These tools include clinical interview schedules, questionnaires, and rating scales based on diagnostic criteria from classification systems such as the DSM-5 and ICD-11 (Nordgaard et al., 2012). Some commonly used tools include the Structured Clinical Interview for DSM (SCID), Mini International Neuropsychiatric Interview (MINI), and WHO Composite International Diagnostic Interview (CIDI) (Levis et al., 2019).

Research suggests that standardized tools can improve the reliability and validity of psychiatric diagnoses compared to unstructured clinical assessments (Nordgaard et al., 2012). A meta-analysis by Levis et al. (2019) found that the SCID demonstrated good diagnostic accuracy for major depression. Standardized tools can also facilitate early detection, severity assessment, and treatment monitoring (Allsopp et al., 2019).

However, the implementation of standardized tools faces various challenges. Time constraints, training requirements, and the need to balance structured assessment with clinical judgment are common barriers (Bruchmüller et al., 2011). Furthermore, the cross-cultural applicability of tools developed in Western contexts has been questioned (Keynejad et al., 2018).

### Mental Health in KSA and the Role of Nursing

Mental health care in KSA has undergone significant development in recent decades. However, challenges remain, including stigma, limited resources, and a shortage of mental health professionals (Koenig et al., 2014). A national survey found that only 23.5% of Saudi adults with mental disorders had received treatment in the past year (Al-Subaie et al., 2020).

Nurses are the largest group of mental health professionals in KSA and play a crucial role in patient assessment, treatment, and care coordination (Ismail, 2015). However,

nursing education and practice in KSA have historically focused more on general nursing, with mental health nursing receiving less emphasis (Mahfouz et al., 2017). Recent efforts have sought to strengthen mental health nursing training and specialize roles (Ismail, 2015).

Few studies have specifically examined the perspectives of mental health nurses in KSA. A qualitative study by Mahfouz et al. (2017) found that Saudi nurses perceived a need for more mental health training and specialized roles. Another study highlighted the importance of cultural competence in Saudi mental health nursing (Alyousef et al., 2021). However, the perceptions of mental health nursing specialists regarding standardized diagnostic tools remain unexplored.

### Conceptual Framework

The Consolidated Framework for Implementation Research (CFIR) guided this study (Damschroder et al., 2009). The CFIR is a widely used framework for understanding the factors influencing the implementation of evidence-based practices in healthcare settings. It consists of five major domains: intervention characteristics, outer setting, inner setting, characteristics of individuals, and process.

In this study, the CFIR informed the exploration of participants' perceptions regarding the characteristics of standardized diagnostic tools (e.g., perceived advantages and complexity), the influence of the outer context (e.g., patient needs and external policies), the inner setting of their organizations (e.g., culture and readiness for change), individual characteristics (e.g., knowledge and beliefs), and the process of implementing these tools in practice.

## Methods

### Design

A qualitative case study design was employed to gain an in-depth understanding of mental health nursing specialists' perceptions regarding standardized diagnostic tools. Qualitative methods are well-suited for exploring complex phenomena and capturing the perspectives of individuals in their natural context (Creswell & Poth, 2018). The case study approach allowed for a detailed examination of the perceptions within the bounded context of mental health nursing practice in KSA.

### Setting and Participants

The study was conducted in two public mental health care facilities in KSA: Erada Complex for Mental Health and Al Rawda Health Center in Tabuk. Purposive sampling was used to recruit mental health nursing specialists with at least two years of experience working in these settings. Six participants were included in the study, as this sample size was deemed sufficient to achieve data saturation (Creswell & Poth, 2018).

### Data Collection

Semi-structured individual interviews were conducted with the participants. The interview guide was developed based on the CFIR framework and existing literature, and included questions about participants' experiences with standardized diagnostic tools, perceived benefits and challenges, and recommendations for implementation.

Interviews were conducted in Arabic, audio-recorded, and transcribed verbatim. The transcripts were then translated into English for analysis.

**Data Analysis**

Thematic analysis was used to identify patterns and themes within the interview data (Braun & Clarke, 2006). The analysis followed an iterative process of data familiarization, initial coding, theme development, and refinement. Two researchers independently coded the transcripts and discussed discrepancies to reach consensus. The CFIR framework was used to guide the interpretation of the findings.

**Trustworthiness**

Several strategies were employed to ensure the trustworthiness of the study (Lincoln & Guba, 1985). Credibility was enhanced through prolonged engagement with the data, peer debriefing, and member checking. Transferability was addressed by providing detailed descriptions of the context and participants. Dependability was established through an audit trail documenting the research process. Confirmability was supported by reflexive journaling and the use of direct participant quotes.

Results

Four main themes emerged from the analysis: (1) perceived benefits of standardized diagnostic tools, (2) challenges in implementing standardized tools, (3) the importance of training and education, and (4) the need for culturally-adapted tools. These themes and their subthemes are summarized in Table 1.

***Table 1:*Themes and Subthemes**

| Theme | Subthemes |
|---|---|
| Perceived benefits of standardized diagnostic tools | - Improved diagnostic accuracy<br>- Facilitation of treatment planning<br>- Enhanced communication and collaboration |
| Challenges in implementing standardized tools | - Time constraints<br>- Language and cultural barriers<br>- Resistance to change |
| The importance of training and education | - Need for comprehensive training<br>- Integration into nursing curricula<br>- Continuing education opportunities |
| The need for culturally-adapted tools | - Consideration of cultural norms and beliefs<br>- Language translations and adaptations<br>- Involvement of local experts |

**Theme 1: Perceived Benefits of Standardized Diagnostic Tools**

Participants recognized several benefits of using standardized diagnostic tools in their practice. They believed that these tools could improve the accuracy and consistency of psychiatric diagnoses. One participant stated:

"Standardized tools provide a systematic way of assessing patients, which reduces the subjectivity and variability in diagnoses. They help us to make more accurate and reliable diagnoses based on established criteria." (Participant 3)

Participants also noted that standardized tools could facilitate treatment planning by providing a comprehensive assessment of patients' symptoms and needs. Another perceived benefit was enhanced communication and collaboration among mental health professionals. As one participant explained:

"When we use standardized tools, it creates a common language and understanding among the treatment team. It helps us to communicate more effectively about patients' diagnoses and treatment plans." (Participant 5)

**Theme 2: Challenges in Implementing Standardized Tools**

Despite recognizing the benefits, participants identified several challenges in implementing standardized diagnostic tools. Time constraints were a major barrier, as the administration of these tools can be time-consuming. One participant noted:

"With the high patient load and limited time we have, it can be difficult to administer lengthy diagnostic interviews or assessments. We often have to prioritize other aspects of patient care." (Participant 2)

Language and cultural barriers were also identified as challenges, particularly when using tools developed in Western contexts. Participants emphasized the need for tools to be translated and adapted to the Saudi cultural context. Resistance to change among some mental health professionals was another barrier mentioned. As one participant stated:

"Some colleagues are resistant to changing their traditional ways of assessing patients. They may view standardized tools as a threat to their clinical autonomy or expertise." (Participant 6)

**Theme 3: The Importance of Training and Education**

Participants strongly emphasized the need for comprehensive training on standardized diagnostic tools. They believed that adequate training was essential for the effective use of these tools in practice. One participant explained:

"Proper training is crucial for us to understand how to administer and interpret the tools correctly. It's not enough to just have access to the tools; we need the skills and knowledge to use them effectively." (Participant 1)

Participants also highlighted the importance of integrating standardized diagnostic tools into nursing curricula to prepare future mental health nurses. They recommended incorporating practical training on these tools during clinical placements. Additionally, participants expressed a desire for continuing education opportunities to stay updated on the latest tools and best practices.

**Theme 4: The Need for Culturally-Adapted Tools**

Participants stressed the importance of having standardized diagnostic tools that are culturally appropriate for the Saudi context. They noted that some existing tools may not adequately capture the cultural nuances and expressions of mental health symptoms in the Saudi population. As one participant stated:

"We need tools that take into account the cultural beliefs, norms, and language of our patients. Some questions or concepts in Western-developed tools may not translate well or may be misunderstood by our patients." (Participant 4)

Participants recommended involving local experts, including mental health professionals and cultural advisors, in the process of adapting and validating standardized tools for the Saudi context. They also emphasized the need for accurate language translations and consideration of cultural idioms of distress.

**Discussion**

This qualitative case study provides valuable insights into the perceptions of mental health nursing specialists in KSA regarding the use of standardized diagnostic tools. The findings highlight both the perceived benefits and challenges of implementing these tools in Saudi mental health settings.

Consistent with previous research (Allsopp et al., 2019; Nordgaard et al., 2012), participants recognized the potential of standardized tools to improve diagnostic accuracy, facilitate treatment planning, and enhance communication among professionals. However, they also identified significant barriers, such as time constraints, language and cultural differences, and resistance to change. These challenges echo those reported in other studies on implementing evidence-based practices in mental health settings (Bruchmüller et al., 2011; Keynejad et al., 2018).

The emphasis on the need for culturally-adapted tools aligns with the growing recognition of the importance of cultural context in mental health assessment and diagnosis (Alyousef et al., 2021; Keynejad et al., 2018). Participants' recommendations for involving local experts and considering cultural nuances are consistent with best practices for adapting psychological instruments cross-culturally (Keynejad et al., 2018).

The findings also underscore the crucial role of training and education in implementing standardized diagnostic tools. Participants' call for comprehensive training, integration into nursing curricula, and continuing education opportunities resonates with research highlighting the importance of building mental health workforce capacity (Ismail, 2015; Mahfouz et al., 2017).

**Implications for Practice and Policy**

The findings of this study have several implications for mental health nursing practice and policy in KSA. First, there is a need for culturally-adapted standardized diagnostic tools that are validated for use in the Saudi context. Collaborative efforts among researchers, clinicians, and policymakers are needed to develop and implement such tools.

Second, comprehensive training programs on standardized diagnostic tools should be developed and implemented for mental health nursing specialists. These programs should include didactic and practical components, as well as ongoing support and supervision. Integrating standardized tools into nursing curricula and continuing education can help build a skilled workforce.

Third, addressing implementation barriers requires a multi-faceted approach. Strategies such as providing adequate resources, promoting buy-in from leadership,

and fostering a culture of evidence-based practice can help overcome challenges related to time constraints and resistance to change.

At the policy level, the findings support the Saudi Ministry of Health's efforts to standardize mental health services and improve quality of care (Koenig et al., 2014). Policymakers should prioritize the development and implementation of culturally-appropriate standardized tools as part of broader mental health service improvement initiatives.

### Limitations and Future Research

This study has some limitations that should be acknowledged. The small sample size and focus on two mental health facilities limit the generalizability of the findings. Future research should include larger and more diverse samples of mental health professionals across different regions of KSA.

Additionally, the study relied on self-reported perceptions, which may be subject to social desirability bias. Observational studies examining the actual use of standardized tools in practice could provide further insights.

Future research should also focus on developing and validating culturally-adapted standardized diagnostic tools for the Saudi context. Collaborative partnerships between researchers and clinicians in KSA and international experts could facilitate this process. Implementation science frameworks, such as the CFIR, can guide the systematic evaluation of implementation strategies and outcomes.

### Conclusion

This qualitative case study explored the perceptions of mental health nursing specialists in KSA regarding the use of standardized diagnostic tools. The findings highlight the perceived benefits, challenges, and needs related to implementing these tools in Saudi mental health settings. Culturally-adapted tools, comprehensive training, and addressing implementation barriers are key to optimizing the use of standardized diagnostic tools and improving the quality of mental health care in KSA. Collaborative efforts among researchers, clinicians, and policymakers are needed to translate these findings into practice and policy changes that can ultimately benefit the mental health and well-being of the Saudi population.

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